PREDICTORS OF SELF-REPORTED LIKELIHOOD OF WORKING WITH OLDER ADULTS

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This study examined the self-reported likelihood of working with older adults in a future career among 237 college undergraduates at a midsized Midwestern university. Although aging anxiety was not significantly related to likelihood of working with older adults, those students who had a greater level of death anxiety were less likely than other students to report a future likelihood of working with older adults. In addition, quality relationships with unrelated older adults were positively correlated with likelihood of working with older adults. Recommendations for future research and ideas for attracting college students to gerontology as a career are discussed.

The dramatic demographic shifts in the population of the United States have had profound implications for the provision of social services to the aging. During the first half of the last century, the population of the United States was relatively young; half of the population was under the age of 23 years (Hobbs & Stoops, 2002). Today, the U.S. has a rapidly aging population. In 2007, 12.5% of the population (about 37 million) were age 65 years or older (U.S. Census Bureau, American Fact Finder, 2008), and by 2030 that percentage is expected to more than double (He, Sengupta, Velkoff, & DeBarros, 2005). Along with the aging of the population comes the
mandate to provide services to meet its health and social needs (Shrestha, 2006). There is also a growing demand for individuals who wish to pursue aging related careers in order to meet those needs. According to the Bureau of Labor Statistics (2009), the health care and social services industries will grow by about 25% and add four million new jobs between 2006 and 2016.

With the aging of the population, social and human services employment is expected to grow much faster than average compared to all occupations, and there will be an increasing demand for workers who have the appropriate postsecondary education. However, recent studies suggest a national shortage of professionals capable of providing effective services to older adults (Dawson & Santos, 2000). Labor force shortages are predicted in the obvious aging careers (Bial, 2005), i.e., geriatrics (Blanchette & Flynn, 2001); nursing (Fulmer, Flaherty, & Medley, 2001); long-term care administration (Rix, 2001); physical, occupational, and speech therapies (Bonder, 2001); and social work (Rosen & Zlotnik, 2001; Sharlach, Damron-Rodriguez, Robinson, & Feldman, 2000). In addition, more than half of the aging population will remain healthy and independent with enough money and enough time to support a desired lifestyle. This suggests that not only health care professionals, but also workers who are knowledgeable about aging processes and are able to understand and relate to the unique characteristics of this population, will have employment opportunities not yet imagined.

A first step in meeting the demand for professionals to work with this population is to determine which students are interested in gerontology and what factors predict this interest. Therefore, the purpose of this study is to explore how personal characteristics and experiences with older adults predict students’ interest in working with elders. Such knowledge will help us attract students to the field and prepare them to work in the aging industry. Specifically, this study sought to answer the following questions:

1. What personal characteristics (death anxiety, aging anxiety, and empathy) predict interest in aging among college undergraduates?
2. What experiential characteristics (relationship with older adult relatives and/or nonrelatives, work/volunteer experiences with older adults) predict interest in aging among college undergraduates?
PERSONAL CHARACTERISTICS

Death Anxiety

Personal characteristics explored in this study were death anxiety, aging anxiety, and empathy. Death anxiety is a complex construct that has multiple dimensions. Collett and Lester (1969, as cited in Pollak, 1979, p. 98) distinguished four types of death anxiety that include fear of the event and the fear of the process of dying for both self and others. Death anxiety is also conceptualized as fear of what comes after death, fear of the process of dying, and fear of ceasing to be (Choron, 1964; Kastenbaum & Aisenberg, 1972, both as cited in Pollak, 1979, p. 98). In addition, Stout, Minton, and Spilka (1976, as cited in Pollak, 1979, pp. 98–99) have identified the positive or neutral dimensions of death anxiety (death as courage and reward) as well as the negative aspects, i.e., death as punishment for wrongdoing. Because older adults are chronologically closer to the end of their lives, death and the process of dying may be much more relevant to them than it is to younger or middle aged adults. As a result, helping professionals who work with older adults may be more mindful of death and the process of dying. Individuals who are more anxious about death may, therefore, be reluctant to pursue a career in gerontology. However, this is not necessarily supported in the literature.

For example, in her research, Greene (1984) investigated the differences in levels of death anxiety among social workers in the field of aging and those who worked with other populations. She found significant differences between the two groups with geriatric social workers experiencing a higher fear of dying of others than social workers not in the aging field. Salter and Salter (1976) also found that death anxiety was not necessarily related to rejection of the elderly, which provides some support for the idea that individuals who fear death may reduce those fears by supporting the elderly. Similarly, Feifel et al. (cited in Pollak, 1979) found a higher fear of death among a physician group than a control group consisting of medical students, healthy persons, and terminally ill and seriously ill patients. This may indicate that choice of medical specialty is, in part, an attempt to master the fear of death by gaining the skills to conquer mortality.

However, not all researchers have found significant relationships between career choice and death anxiety. In a study of 86 senior baccalaureate nursing students, Gomez, Young, and Gomez (1991) did not find any relationship between death anxiety and preference for working in gerontology. Likewise, Lonetto, Fleming, and Mercer (1979) found that there were more similarities than differences
between students with varying degrees of exposure to death and that one group could not be distinguished from another on the basis of their death anxiety factor scores. Although limited research has examined the potential link between death anxiety and choice of academic major among undergraduate students, Fang and Howell (1977) studied 128 graduate students enrolled in five different programs: arts and sciences, law, medicine, education, and engineering. The only statistically significant difference was between law students and medical students, with medical students less fearful of the dying of others. Clearly, death anxiety as it relates to occupation or interest in working with the elderly needs to be investigated further.

Aging Anxiety

Aging anxiety is “the combined concern and anticipation of losses centered around one’s own aging process” (Lasher & Faulkender, 1993, p. 247). With the aging of the American population, and the concomitant increase in the aging industry, it is important to understand how personal anxiety about aging may influence the interest of budding professionals to work with elders.

To get a better understanding of students’ views and attitudes about aging and working with elders, Anderson and Wiscott (2003) surveyed 97 social work students and 80 nonsocial work students (e.g., psychology, communications, business). Regardless of major, all the participants in this study were currently enrolled in either social work or gerontology classes. Almost 23% of students had negative attitudes about aging and were anxious about their own aging process; however, there were no differences in aging anxiety between the social work students and nonsocial work students on these measures. In addition, few of the participants in this study (15.4%) indicated a strong preference to work with the elderly. Cummings, Galambos, and DeCoster (2003) reported similar outcomes in their study of graduate students in social work. Students completed a survey before graduation to determine their interest in aging-related employment. About six months later, a follow-up survey was sent to all graduates to determine their actual employment. At this time, a little more than 20% of the respondents reported that they were employed in an aging-related position, most in some type of a health care or mental health-care setting and social service or nonprofit agencies. However, both groups reported a moderate amount of aging anxiety with graduates employed in aging-related positions showing higher levels of personal aging anxiety than graduates employed in nonaging positions. However, this difference was not
significant. Harris and Dollinger (2001) also found no significant difference in personal aging anxiety between students enrolled in a psychology of aging class and students enrolled in an introductory psychology class with the exception of the fear of old people dimension. This dimension relates more to feelings about old people than it does to fear of one’s own aging; those in the psychology of aging class were significantly less afraid of elders than those in the introductory psychology class. Although this research may provide some insight about how knowledge of aging may decrease one’s fear of old people, it does not help in understanding how personal anxiety about aging and working with the elderly are related. Finally, Mosher-Ashley and Ball (1999) asked 119 undergraduate students representing different majors whether or not they were worried about getting old and to describe themselves at the age of 75 years. Significant differences were found among the different majors. Business majors had the least positive views of themselves at age 75 years, and occupational therapy majors had the most positive view. However, this does not necessarily measure the degree of anxiety or fear about personal aging.

Empathy

Empathy has been defined as the “mechanism that enables an individual to take up any attitude at all toward another life” (Freud, 1949, as cited in Choplan, McCain, Carbonell, & Hagen, 1985, p. 365); “the identification with another person and an awareness of the feelings that accompany that identification” (Hogan, 1969, as cited in Choplan et al., 1985, p. 365); and “an involuntary vicarious experience of another’s emotional state” (Clark, 1980, as cited in Choplan et al., 1985, p. 365). It has been well documented that empathy is a vital component of the helping relationship (Keefe, 1976; Reynolds & Scott, 1999) and enhances the well-being of those served (Hollinger-Samson & Pearson, 1999; LaMonica, Wolf, Madea, & Oberst, 1987; Olson, 1995). Unfortunately, we know very little about how empathy relates to students’ choice of academic major and/or to interest in working with elders, although there is a small but persistent body of research that continues to link empathy and other related characteristics to students’ choices of academic majors.

In a study of 451 psychology majors, minors, and nonmajors from four public and private universities, psychology majors scored higher in empathic concern and perspective-taking than minors or nonmajors (Harton & Lyons, 2003). In seeking to understand the factors that influence empathic responses of college students toward students who have been diagnosed positive for HIV, Becares and Turner
(2004) hypothesized that nursing students and psychology majors would score higher on measures of empathy than business and computer science majors. In fact, nursing and psychology majors, as compared to management and computer science majors, did score higher on empathy. Differences in emotional empathy were also supported in the data collected from 138 business, technology, and social science majors at the University of Helsinki (Myyry & Helkama, 2001). Social science students had the highest empathy scores, and engineering students had the lowest scores with business majors scoring in the middle.

In studying the relationship between academic major and empathy, we must also consider the temporal ordering of the variables. As we’ve proposed, students who are enrolled in majors that are more likely to lead to careers in the human services industry (health care, counseling, family life education, social work, etc.) may have personality characteristics that predispose them to careers related to empathy. On the other hand, it could be that as students take more classes in the social sciences (gerontology, family studies, psychology, sociology, anthropology) they learn to feel more empathy. Harton and Lyons (2003) rejected the latter by finding no relationship between class status (freshman, sophomore, etc.) and empathic concern or perspective taking among psychology majors. That is, majors who have been in college longer as measured by class status, are more likely to have taken more major classes, but there were no differences in empathy and perspective-taking based on class status. It is also questionable if there is enough time within the traditional academic framework to influence the development of empathy in this way (Cadman & Brewer, 2001).

**EXPERIENTIAL CHARACTERISTICS**

Working with elders seems to be a low priority for a variety of budding professionals such as medical students (Fitzgerald, Wray, Halter, Williams, & Supiano, 2003; Geiger, 1978); law students (Geiger, 1978); dietetics students (Kaempfer, Wellman, & Himburg, 2002) and social work students (Geiger, 1978). However, it is not clear why this is the case. Several researchers have investigated the relationship between experience with older relatives and nonrelatives and how that relates to attitude toward aging (Hawkins, 1996; Kimuna, Knox, & Zusman, 2005). However, the link between attitude and interest in working with older adults has not been firmly established. Although interests, values, and abilities are identified as important factors in career decision making, direct and vicarious work experiences are also influential in the decision making process (Lent et al., 2002).
Over the last 100 years, the population structure of the United States by age has changed from a pyramid with a large base and a much narrower apex to almost a rectangle. This configuration represents a declining birth rate and increasing longevity (Bengtson, 2001). The implication of this at the family level means that most American families have an age structure that is long and narrow. The structure is much like a bean pole; it represents fewer people in each generation, but multiple generations. This increases the likelihood of intergenerational relationships among family members. Therefore, it is expected that increasingly greater numbers of younger adults have opportunities for interaction with aging family members, and research suggests that previous experience with aging relatives is related to an interest in gerontology (Cummings et al., 2003; Gorelik, Damron-Rodriguez, Funderburk, & Solomon, 2000) or to an interest in the helping professions—but not necessarily gerontology (Robert & Mosher-Ashley, 2000). On the other hand, some find no relationship between aging interest and personal contact with an elderly relative (Paton et al., 2001).

Another factor that one expects to be related to an interest in aging is experience with older nonrelatives and the quality of that experience. Paton, Sar, Barber, and Holland (2001) found that graduate and undergraduate students who had previous work experience with older persons were more interested in working with older adults than students who had no previous experience. Lent et al. (2002) identified six factors that influence expected career choice including direct and observed work-relevant activities. Although they did not find significant differences between social work and nonsocial work students on personal experiences or relationship quality with elders, Anderson and Wiscott (2003) did find a significant positive correlation between more personal experiences with elders and desire to work with older adults. Positive personal experience, such as an internship, a volunteer position, summer employment, or clinical rotation experience with an aging population, is significant in deciding on a career in aging (Robert & Mosher-Ashley, 2000).

**METHOD**

**Participants**

College undergraduates ($N = 237$) in several courses at a midsized Midwestern university were asked by a research assistant to complete an anonymous questionnaire during class time. Almost 75% ($n = 176$) were female, and the mean age was 20.14 ($SD = 2.91$). Participants
ranged in age from 18 to 44 years. Thirty-three percent (n = 79) of students were freshman, 23% (n = 54) sophomore, 18% (n = 43) junior, and 25% (n = 60) senior. The mean grade point average for participants was 3.12 (SD = .43). Ninety-seven percent (n = 230) of participants identified themselves as European American. All but 2 participants reported that they were heterosexual. Out of 237 participants, 11 (5%) indicated that they were gerontology majors and 3 (1%) were gerontology minors. A total of 73 students (33%) had a major in the area of social and behavioral sciences (e.g., sociology, family services, psychology, social work). Fifty students (21%) had taken a course in aging.

**Measures**

**Predictor Variables**

**Death anxiety.** Participants completed Templer’s Death Anxiety Scale (Templer, 1970). The measure consists of 15 true-false items. Example items are “I am very much afraid to die,” and “I fear dying a painful death.” Items are scored 0 or 1 such that a high score indicates a higher degree of death anxiety. Possible scores range from 0 to 15. Cronbach’s alpha in the present study was .74.

**Aging anxiety.** Anxiety about aging was measured using the Lasher and Faulkender Aging Anxiety Measure (Lasher & Faulkender, 1993). The scale consists of 20 items such as “I fear that when I am old all my friends will be gone,” and “I am afraid that there will be no meaning in life when I am old.” Participants respond on a scale of 1 to 5, where 1 was “Strongly Disagree” and 5 was “Strongly Agree.” Scores were recoded so that higher scores indicate greater anxiety about aging. Possible scores range from 20 to 100. Cronbach’s alpha in the present study was .81.

**Empathy.** Empathy was measured using the Multidimensional Emotional Empathy Scale (Mayer, Caruso, & Salovey, 1999). The empathy scale consists of 30 items such as “If someone is upset, I get upset, too,” and “I feel good when I help someone out or do something nice for someone.” A five-point response scale is used, where 1 was “Strongly Disagree” and 5 was “Strongly Agree.” Higher scores indicate greater empathy. Possible scores range from 30 to 180. Cronbach’s alpha in the present study was .85.

**Previous work with older adults.** Participants responded to the following question: “How much have you worked with older adults in job/volunteer settings?” Response choices were on a scale from 1 (not much) to 7 (a lot).
Quality of relationships with older adults. Participants were asked two items regarding the quality of their relationships with older adults. The first item was “I have had and/or currently have quality relationships with older adults who are not related to me.” The second item was “I have had and/or currently have quality relationships with older relatives.” Response choices were on a scale of 1 (strongly disagree) to 7 (strongly agree) for both items.

Outcome Variable
Self-reported likelihood of working with older adults. The future likelihood of an individual working with older adults was measured by one item: “In your future career, how likely is it that you will work with older adults?” Participants were asked to choose a number from 1 (not at all likely) to 7 (very likely).

RESULTS

Preliminary Analyses

Descriptive statistics were performed for predictor and outcome variables (Table 1). On a scale of 1 to 7, the mean likelihood of a student working with older adults in the future was 4.89 ($SD = 1.68$). Over 57% ($n = 136$) of the sample responded positively to the item (indicating 5, 6, or 7). Only 6 participants (2.5%) responded that they were “not at all likely” to work with older adults. The majority of participants indicated experience working with older adults; 134 (56.6%) responded 5, 6, or 7, on a scale of 1 to 7. Participants also responded that they had quality relationships with older adults. For quality of relationships with unrelated adults, 72.2% ($n = 171$) responded positively (5, 6, or 7); and for quality of relationships with older relatives, 84.5% ($n = 200$) responded positively (5, 6, or 7). There was not a

| Table 1. Descriptive statistics for predictor and outcome variables ($N = 237$) |
|---------------------------------|-----|-----|-----|-----|
| 1. Likelihood of working with older adults | 4.89 | 1.68 | 1 | 7 |
| 2. Aging anxiety                 | 50.86 | 10.19 | 20 | 84 |
| 3. Death anxiety                 | 7.92 | 3.45 | 0 | 17 |
| 4. Empathy                       | 112.41 | 11.14 | 78 | 139 |
| 5. Previous work with older adults | 4.73 | 1.72 | 1 | 7 |
| 6. Quality of relationships with unrelated older adults | 4.94 | 1.66 | 1 | 7 |
| 7. Quality of relationships with older relatives | 5.81 | 1.41 | 1 | 7 |
significant difference in the likelihood of working with older adults for social science ($M = 4.64, SD = 1.70$) and nonsocial science majors [$M = 5.01, SD = 1.66; F(1, 235) = 2.50, p = .11$]. In addition, students who had taken a course in aging ($M = 5.04, SD = 1.75$) were not significantly more likely to work with older adults in their future than students who had not taken a course in aging [$M = 4.86, SD = 1.66; F(1, 235) = .43, p = .51$].

Correlations were also performed for predictor and outcome variables (Table 2). Likelihood of working with older adults was not related to gender or age of participants. However, participants reported less aging anxiety, $r(236) = -.33, p < .01$, and death anxiety, $r(236) = -.40, p < .01$, were more likely than other participants to indicate a likelihood of working with older adults in the future. Empathy and likelihood of working with older adults were not related. Regarding experiential factors, likelihood of working with older adults was positively related to previous work with older adults, $r(236) = .56, p < .01$. Furthermore, although there was not a significant correlation for quality of relationships with older relatives, participants reporting higher quality relationships with unrelated older adults were more likely than other participants to report a likelihood of working with older adults in the future, $r(236) = .06, p < .01$. Inter-correlations between personal characteristics should be noted. There was a significant positive relationship for death anxiety and aging

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<td>1. Gender (male = 0; female = 1)</td>
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<td>3. Likelihood of working w/older adults</td>
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<td>4. Aging anxiety</td>
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<td>5. Death anxiety</td>
<td>0.21**</td>
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<td>6. Empathy</td>
<td>0.38**</td>
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<td>7. Previous work w/older adults</td>
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<td>8. Quality of relationships w/unrelated older adults</td>
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<td>9. Quality of relationships w/older relatives</td>
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*p < .05; **p < .01.
anxiety, \( r (236) = .42, p < .01 \), and a significant positive relationship for death anxiety and empathy, \( r (236) = .22, p < .01 \). There were also significant intercorrelations for the experiential variables. Participants who reported higher quality relationships with unrelated older adults were more likely than other participants to have worked more with older adults previously, \( r (236) = .36, p < .01 \), and those who had higher quality relationships with unrelated older adults also had higher quality relationships with older relatives, \( r (236) = .36, p < .01 \).

**Tests of Hypotheses**

Age and gender were entered into a multiple regression model along with personal characteristics (aging anxiety, death anxiety, and empathy) and experiential factors (previous work with older adults, quality of relationships with unrelated older adults, and quality of relationships with older relatives; see Table 3). The model significantly predicted self-reported likelihood of working with older adults, \( F (8, 228) = 19.99, p < .01 \) (Table 4). Forty-two percent of the variance in likelihood of working with older adults was explained by the model.

**Personal Characteristics**

While controlling for demographic variables and experiential factors, only one of the three personal characteristics investigated was a significant predictor of likelihood of working with older adults. Whereas empathy did not predict likelihood of working with older adults, participants with higher levels of death anxiety were less likely than other participants to indicate a likelihood of working with older adults in the future, \( p < .01 \). Lower levels of aging anxiety were predictive of higher likelihood of working with older adults, but this relationship did not reach statistical significance, \( p = .09 \).

<table>
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<th>Table 3. Predictors in multiple regression model</th>
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<td><strong>Demographic variables</strong></td>
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E. M. Eshbaugh et al.
Experiential Characteristics

Not surprisingly, participants who reported working more with older adults previously were likely to report a higher likelihood of working with older adults in the future, \( p < .01 \). Furthermore, those who had higher quality relationships with unrelated older relatives were more likely than other participants to indicate a likelihood of working with older adults in the future, \( p < .01 \). However, although quality of relationships with older relatives predicted likelihood of working with older adults, this finding did not reach statistical significance, \( p = .10 \).

Multicollinearity

Because of the intercorrelations between variables mentioned in the preliminary analysis, multicollinearity was addressed. The Variance Inflation Factor (VIF) measures the impact of collinearity among the variables in a regression model. A VIF of 1 is ideal, indicating that predictor variables do not have shared variance. There is no formal VIF value for determining presence of multicollinearity; however, it has been suggested that values over 2.5 may be a cause for concern. VIFs in this model ranged from 1.06 to 1.40.

DISCUSSION

Our first research question examined the role of personal characteristics (death anxiety, aging anxiety, and empathy) in predicting self-reported likelihood of working with older adults. We found students who indicated a higher likelihood of working with older
adults had lower levels of death anxiety than other students. This is not consistent with the work of Greene (1984), who suggested that geriatric social workers had higher levels of death anxiety than other social workers. It is also not consistent with Gomez et al. (1991), who found that preference for working in gerontology and death anxiety were unrelated. Even while controlling for previous experience working with older adults and other personal and experiential factors, death anxiety was negatively related to future likelihood of working with older adults. Our results suggest that students with less fear of death may feel more comfortable working with individuals who are closer to death than students who have a greater fear of death. If a student has a fear of death, he/she may want to be able to deny the inevitability of the end of life. Thus, he/she may choose a career where he/she is not exposed to individuals who may be closer to negotiating their own death process.

Using simple correlations, students with higher levels of aging anxiety were more likely to indicate they would work with older adults than students with lower levels of aging anxiety. Although this relationship was significant, it did not reach statistical significance in multiple regression while controlling for other personal variables and experiential factors. This indicates that, at least in part, the relationship between aging anxiety and likelihood of working in an aging field is a spurious correlation. Some research suggests that aging anxiety does not predict aging related employment (Cummings et al., 2003). In this study, we cannot say with confidence that aging anxiety predicts self-reported likelihood of working with older adults. Although death anxiety and aging anxiety are correlated with each other, it appears that death anxiety is more important than aging anxiety as a predictor of likelihood of working with older adults.

We found no evidence that self-reported likelihood of working with older adults was related to empathy. It might be suggested that students higher in empathy would be more likely to identify with older adults and understand their life challenges. If this is the case, this identification does not seem to lead to an increased likelihood of working with elders in a future career. Previous research (Myyry & Helkama, 2001) has suggested that social science majors have higher levels of empathy compared to other majors. Although gerontology is a major in the social sciences, students higher in empathy were no more likely to predict a future working with older adults.

Not surprisingly, we found that previous work and volunteer experience with older adults were related to likelihood of working with the population in the future. Although one could argue that an interest in a gerontology career is developed through these
experiences, it may also be true that this interest is present before the work and volunteer experiences are sought. Nonetheless, students who have more professional experiences working with elders are more likely to predict they will have careers working with the aging population than students who have had fewer or none of these experiences.

The quality of relationships with older relatives was examined in relation to likelihood of working with older adults in the future. Although students in general indicated a high quality of relationships with related older adults, this quality was unrelated to likelihood of working with elders. A more important predictor was the quality of relations one has with unrelated older adults. There are two explanations for this finding: (a) People with an interest in aging seek out older adults and develop positive relationships with them, or (b) development of positive relationships with older adults leads young people toward a career in an aging-related field. Due to the correlational nature of this study, we can make no case for either of these explanations. Future research is needed to determine if it might be useful to guide friendships between young people and elders in order to stimulate college students to pursue gerontology.

Bial (2005) suggests labor shortages are predicted in aging related careers. However, within this sample, 24% indicated that they were very likely to work with older adults in their future career. Less than 3% responded that they were “not at all likely” to work with older adults. Students responded with a higher likelihood of working with older adults in their careers than expected—considering the current shortage of employees in aging-related fields. These are positive findings considering the demographic shifts our society is currently experiencing. It should be noted that the sample consisted of 33% majors in social and behavioral sciences (a higher proportion than the university in its entirety). But this 33% was actually slightly, but not significantly, less likely to indicate that they would work with older adults in their careers. This sample also contained 50 students who had taken a course in aging. Interestingly, these students were not more likely to indicate a future working with older adults than other students. Despite the relatively high proportion of students indicating a likelihood of working with adults, 40% admitted that they did not know the term “gerontology” before it was defined on this survey.

A possible explanation for the unexpected number of students who indicated they were likely to work with older adults (despite being unfamiliar with the term gerontology) in their future career may be how students defined “work with.” Although we intended to identify students who felt they would work with older adults as a main focus of their career, students may have interpreted the question as asking
if they would come into contact with older adults in their career. For instance, if a student plans to become a real estate agent, he/she may serve older adults, just as he/she would serve other individuals. He/she may have indicated on our questionnaire that they were “very likely” to work with older adults in their future career. In addition, students were not given a definition of “older adults.” Some may have considered older adults to be individuals older than 40 years, whereas others may have used a more narrow definition. In fact, some research (Kimuna et al., 2005) suggests that the younger a college student is, the younger they consider “old” to be. Our sample had a mean age of 20.1 years, so perhaps they were using a very broad range of the term “older adult.”

This is not the only limitation of the present study. Although 42% of variance in likelihood of working with older adults was predicted, many other factors that are related to predicted careers in gerontology were unmeasured here. It is likely that students come to choose a career in gerontology by a variety of unique paths. A qualitative study might be useful to further explore the diverse journeys that bring people to want to devote themselves to working with elders. In addition, we assessed a student’s self-reported likelihood of working with older adults in the future. It remains to be seen whether or not these students will actually work with older adults.

How could findings from this study help to increase students’ interest in aging-related careers? Although we can say that the profile of a student interested in aging is one who has low death anxiety, much previous experience working with older adults, and high quality friendships with elders, we cannot say that modification of these variables would lead more students to the field of gerontology. Perhaps an interest in gerontology preceded these factors. However, gerontological researchers should consider designing experimental studies to determine if, perhaps, interventions to decrease death anxiety might increase the number of students who have an interest in an aging-related career. Furthermore, mandatory experiences volunteering in nursing homes and in other settings with older adults and development of strong friendships with elders might increase the chances of a young person planning a career in gerontology. If this is the case, researchers should seek to determine how extensive these experiences need to be in order to arouse someone’s interest in older populations, and at what age(s) it is most beneficial for these experiences to occur.

We have examined the likelihood of working with older adults in a future career among students of diverse academic majors. This is in contrast to previous studies on student interest in gerontology that have focused on a specific major such as social work (Anderson &
Wiscott, 2003; Cummings et al., 2003). We view the more inclusive approach presented in the study to be an important addition to the literature because future careers in aging will not be limited to obvious aging careers such as social work, nursing, and long term care administration. There is an anticipated need for workers knowledgeable about the aging process and the needs and wants of the aging population. Although they share an interest in older adults, these employees will come from diverse educational backgrounds and interest areas.

REFERENCES


