California State University, Sacramento Gerontology Program

GERONTOLOGY 100 - ISSUES OF AGING IN AMERICA

Fall 2012 Fridays, 9:00 to 11:50 a.m. Academic Resource Center. Room 1011 Joseph Rodrigues, Instructor <u>Joseph.Rodrigues@csus.edu</u> 916-217-0252

Office Hours: By appointment Benicia 1015

I. Course Description

This course is an introduction to the field of gerontology and its social implications. It examines current major issues in gerontology using a life span perspective focusing on older adults' needs/concerns along life's continuum in various environments. Topics include the demographic imperative, common aging changes/conditions, myths and stereotypes, the effects of health/illness on individual and family roles, basic social issues and policies arising from the graying of America, and media, cultural and gender influences.

II. Overview

The purpose of this course is to provide students with an introduction to the field of gerontology and its social implications. Students will delve into their own perceptions of aging by reviewing their personal experiences and societal attitudes that have influenced these perceptions. An important aspect of this class will be to create an awareness of aging issues through weekly examination of how the news media reports issues affecting older Americans.

Interwoven throughout the class will be the life course perspective on aging, demonstrating how income, education, ethnicity and gender affect the aging process and a person's lifetime choices. Students will learn about the normal aging process and about conditions that appear to be part of the "aging process" but may be pathological in nature. Students will determine how to make lifestyle changes to improve their chances of a healthy old age.

We will examine social support systems and their influence on the aging individual. The instructor will introduce students social aging policies, including the Older Americans Act, Social Security, Medicare, and the long-term care system. Students will analyze both the negative and positive impact of these policies and the part advocates play in

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the process. At the conclusion of the class, students will explore their own career plans and how their newly acquired knowledge in gerontology can advance these plans.

III. Required Reading

Quadagno, J. (2010). *Aging and the life course: An introduction to social gerontology* (5^h ed.). New York: McGraw-Hill.

IV. Recommended Reading

Publication manual of the American Psychological Association (6^h ed.). (2010). Washington, DC: American Psychological Association.

V. Course Objectives

Students will be able to:

- A. Define the life course perspective and describe how age/period/cohort and gender, race and ethnicity influence the life course.
- B. Understand how the demographics of the older population affect various aspects of our society.
- C. Critically review studies of older people and understand how to use these studies to improve the health and well-being of society as a whole.
- D. Differentiate between normal changes in functioning due to aging and pathological changes leading to disease.
- E. Describe how personality affects a person's adaptation to old age.
- F. Demonstrate how sensory losses affect the individual.
- G. Describe the effects of stereotypes on the older person; how these stereotypes may limit access to jobs, medical care or a person's autonomy.
- H. Give examples of how aging affects intelligence, both positively and negatively.
- I. Develop a personal definition of successful aging and apply it.
- J. Examine social policies, including Social Security, Medicare, the long-term care system, employment, and age discrimination.

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VI. Gerontology Program Learning Outcomes

Upon the completion of the Gerontology program of study the student will:

- A. demonstrate understanding of fundamental interdisciplinary evidencebased knowledge, skills, values, and current trends as a basis for competent gerontological practice. (1, 2, 5)
- B. demonstrate critical thinking when analyzing diverse and complex aging issues and outcomes for elders, families, and society from an interdisciplinary perspective that is grounded in the sciences, social sciences, and humanities. (1, 2, 3, 5)
- C. synthesize and apply learned interdisciplinary theories and research in applied settings. (1, 2, 3, 4, 5)
- D. demonstrate social and cultural awareness, sensitivity, respect, and support of multiple perspectives when interacting with others. (2, 3, 4, 5)
- E. exhibit personal and social responsibility, and ethical and professional behavior in all settings. (4, 5)
- F. exhibit effective use of basic communication (written, oral and interpersonal) skills and information technology needed in a global information society. (3, 4)

Note: (numbers relate to the five (5) *Sacramento State Baccalaureate Learning Goals* (2009).

VII. Gerontology Core Competencies

These gerontology competencies are organized using the areas from the original Nursing Core Competencies from the American Association of Critical-Care Nurses (AACN) and John A. Hartford Foundation (2000) publication that grouped nursing competencies for gerontology and geriatric care.

CRITICAL THINKING

Content: Consideration of students and societal attitudes toward aging, and how the myths that older people themselves, family members, health care professionals, and society hold toward older adults influence the health care that older adults receive. Consideration of successful aging across a continuum that promotes an appreciation of how aging has changed through history and how aging is valued across cultures.

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- 1. Recognize the contributions that aging persons make.
- 2. Define/describe the bio/psycho/social concepts and theories used to study aging.
- 3. Understand the influence of theory on policies and procedures in practice.
- 4. Modify practice and policy as concepts and theories indicate.
- 5. Evaluate the efficacy of theory as a way of designing interventions.
- 6. Identify aspects that may influence the interpersonal environment.
- 7. Understand the importance of evaluating popular media representations of aging.
- 8. Analyze the continuity of adult development in terms of prior psycho/social development.
- 9. Synthesize theories of positive aging and formulate a personal definition.
- 10. Examine how an older population impacts and is impacted by major social and political issues.

COMMUNICATION

Content: Sensory changes in hearing, vision, smell, taste, speech, touch, and movement that have a high potential to impair communication with older adults, and compensatory actions to assess and overcome or minimize these communication barriers. Techniques to assist providers decipher the "meaning" behind behaviors of cognitively impaired older adults.

11. Establish rapport and sustain effective working relationships with a wide range of older adults, their families, and caregivers.

ASSESSMENT

Content: Standard instruments to assess function, mental status, falls, social support, sleep, depression, pressure ulcer risk, and risk for complications during hospitalization; analysis of the usefulness of these instruments in practice. Modifications in history taking and physical examination to encompass changes common to older adults. Assessment of home and community living situations and analysis of how services (e.g., transportation, location, and environmental modifications) facilitate and impede independent living. Assessment of relationships among intergenerational families, the capacity and expectations of family members to provide care, family knowledge of caregiving, and assessment of family burden.

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- 12. Understand the trajectories of improvement and/or decrement in individual functioning.
- 13. Employ appropriate assessment procedures to maintain optimal levels of functional capacity and adaptation, and to enhance life quality throughout the life cycle.

PROFESSIONAL PRACTICE SKILLS (clinical/direct service skills)

Content: Adaptation of technical skills (vital signs, physical assessment, injections, and infusions, and use of assistive devices) to accommodate changes common to older adults. Alternative strategies to the use of physical and chemical restraints in order to manage treatment interference in older adults.

- 14. Use knowledge of contexts to access resources, to frame interventions and to organize individual, family and community efforts.
- 15. Work effectively with other professionals to provide necessary services and resources for aging individuals, their families and support groups.
- 16. Develop statements of relationships between problems and solutions.
- 17. Understand how applied research can be utilized to improve practice.
- 18. Conduct literature reviews and utilize professional and scientific literature in gerontology to maintain currency in knowledge and skills and provided rationale(s) for practice and policies.*
- 19. Understand the missions, objectives, staff, and target populations of agencies providing funding and services for elders.
- 20. Understand the requisite practice skills appropriate to the intended area of gerontological practice.
- 21. Understand the importance of program review and evaluation for program effectiveness.
- 22. Develop and implement programs and services for individuals, families and communities across the service continuum.
- 23. Advocate for necessary services and resources.
- 24. Employ appropriate intervention strategies within interdisciplinary context.

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HEALTH PROMOTION, RISK REDUCTION, & DISEASE PREVENTION

Content: Age recommendations in Healthy People 2010. Health promotion for older adults, irrespective of age or living environment: exercise; prevention of osteoporosis, injury; iatrogenesis and polypharmacy; immunizations; nutrition guidelines; and reduction of social isolation. Exposure to instruments to detect physical, psychological, and financial elder mistreatment and state guidelines for reporting elder abuse (resources appended).

- 25. Maintain currency in research findings of Evidence-Based Prevention studies.
- 26. Understand common threats to loss of independence: falls, medication management, and lifestyle.
- 27. Understand the role of service providers and community recreation and health services in their involvement with older persons.
- 28. Understand Primary, Secondary, and Tertiary level prevention.

ILLNESS AND DISEASE MANAGEMENT

Content: Instruments and guidelines to identify and manage syndromes common to older adults, e.g., falls, iatrogenesis, polypharmacy, dementia and delirium, urinary incontinence, sleep disturbance, problems of eating and feeding, pressure ulcers. Understanding of how these syndromes present in older adults. Differentiation among delirium, depression, and dementia and management of acute and chronic pain in older adults. Consideration of the interaction of chronic and acute illness on the expression of symptoms and recovery from illness in older adults.

29. Maintain currency in research findings of Evidence-based disease management programs.

- 30. Understand health disparities among older adults and their impact on society.
- 31. Facilitate elders' and families' adaptive capacity related to disease and geriatric syndrome management.

INFORMATION & TECHNOLOGY (Was Information & Health Care Technologies)

Content: Instruments and guidelines to prevent and recognize common areas of communication impairments in older adults. Technologies that directly impact function: hearing aids, assistive devices, and adaptive equipment. Technologies that facilitate adherence to treatment: electronic monitoring of clinical indicators such as blood pressure; glucose; aids to medication and treatment adherence; personal emergency

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response systems useful in alerting frail older people and their caregivers to potential untoward events.

32. Evaluate popular media for scientific accuracy to provide appropriate professional opinions.

33. Use technology to enhance older adults' function, independence, and safety.

ETHICS

Content: Ethical issues that pose threats to the autonomy of older adults, e.g., ability to live independently in the community, self-medication, driving, and adherence to a plan of care. Decision-making about health care for older adults, e.g., decision-specific capacity, advance directives, informed consent, refusal of treatment. Decisions critical to older people as they transition between health care settings, e.g., placement, use of physical restraints and feeding tubes. Ethical dilemmas using age as a criterion for allocation of scarce resources, i.e. access to organ donation and to intensive care units. Role of ethics committees in clarifying and resolving disputes around care of older adults.

- 34. Uses knowledge of general ethical principles and how they relate to professional practice in gerontology.
- 35. Appreciate the need for ethical accountability in practice.
- 36. Identify current ethical issues in the field of aging.
- 37. Behave ethically in relation to clients, colleagues, and the profession.

HUMAN DIVERSITY

Content: The ethnic, cultural, language, and socio-economic diversity of patients, families, and paid caregivers (nurses, nurse assistive personnel, physicians and therapists) who provide long-term care to frail older adults. An analytic framework for evaluating how the values and attitudes of frail older people and of the people who provide their care impact on when, how, and whether care is delivered, and the satisfaction of both patient and provider with that care.

- 38. Understand the variety of contexts within which aging can be examined and their implications for practice.
- 39. Identify how an older person is affected by the person-environment interactions.

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40. Incorporate into treatment and service planning the relationship of race, ethnicity, and culture on health status, beliefs, help-seeking behaviors, practice, and health outcomes (i.e., traditional and non-traditional medicine).

GLOBAL HEALTH CARE

Content: Analysis of similarities and differences of global health care models that favor community long-term care over institutional care and that promote individualized care.

- 41. Recognize changing international demographics of aging.
- 42. Evaluate differing international models of geriatric care.

CARE SYSTEMS & POLICY (Was Health Care Systems & Policy)

Content: The effects of an aging society on disease prevalence, morbidity, and mortality. Evaluation of the consequences of an aging society on health care utilization, resource allocation, cost, and work force needs. Payment systems for older adults, e.g., Social Security, Medicare, Medicaid, supplemental and long-term care insurance, and capitation. How an aging society and payment systems drive housing options for the elderly, e.g., assisted living, continuing care retirement options, home care, and nursing homes.

- 43. Recognize the reciprocal effects of aging on groups, social institutions and social policy over time.
- 44. Act to enhance the adaptive capacity of organizations to deal with change.
- 45. Identify a range of available services for elders in most communities.
- 46. Understand state and national aging policy and programs.
- 47. Understand the organizational structure of health services for older people.
- 48. Identify how policies, regulations, and programs differentially impact older adults and their caregivers, particularly among historically disadvantaged populations (e.g., women and elders of color).
- 49. Analyze the impact of an aging society on the nation's health care system.

ROLE DEVELOPMENT ~ PROVIDER, MANAGER/COORDINATOR, PROFESSIONAL MEMBER

Content:

Provider of Care: The use of interdisciplinary teams to assess and deliver care to older adults. Knowledge of how disciplines other than nursing contribute to the wellbeing of older adults. Complementary health practices, e.g., relaxation, massage, pet therapy, reminiscence and life review, acupuncture used by many older adults. Analysis of the relative merits of teams and complementary health practices in improving care for older adults.

Designer/Manager/Coordinator of Care: Assessment and education strategies to maximize older adults and family participation in health promotion, disease prevention, and illness management. Quality improvement strategies to evaluate effectiveness of assessment and education activities on older adults and on families. Assess, supervise, and evaluate the care provided to older adults by licensed and unlicensed assistive personnel. Conflict resolution skills to redress conflicts among providers, older adults and families.

Member of a Profession: The importance of illness prevention and end-of-life care for older adults. Analysis of how membership in, and participation on, boards of professional organizations and lobbying and political activities promote integration of prevention and end-of-life care for older adults into federal and state legislation, regulations, and reimbursement streams.

- 50. Conduct, utilize and disseminate applied research to improve practice.
- 51. Demonstrate appropriate socialization, including behavioral and organizational protocols, use of resources, and professional responsibilities.
- 52. Develop skills necessary for grant writing.

Competencies are drawn from the following:

Nursing:

AACN & John A. Hartford Foundation Institute for Geriatric Nursing (2000). Older Adults: Recommended Baccalaureate Competencies and Curricular Guidelines for Geriatric Nursing Care. Accessed from:

http://www.aacn.nche.edu/Education/pdf/Gercomp.pdf

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Social Work:

Social Work Leadership Institute and Council on Social Work Education (2005). *Practicum Partnership Program Geriatric Social Work Competency Scale II*. Accessed from:

http://louisville.edu/kent/outcomes-assessment/Appendix%208.8%20-%20Geriatric%20Social%20Work%20Competency%20Scale%20II.pdf

Gerontology:

Wendt PF, Peterson DA, Douglass EB (1993). *Core Principles and Outcomes of Gerontology, Geriatrics and Aging Studies Instruction.* Association for Gerontology in Higher Education (AGHE) Publication.

California Council of Gerontology and Geriatrics (CCGG) Competency Evaluation and Development Task Force SAGE Project 2007-2010, (2009).

NOTES:

Core Competency Areas (e.g. Critical Thinking, Communication, Assessment) are from the AACN & John A. Hartford Foundation (2000) publication to group Nursing competencies. Competencies from the other disciplines (Social Work and Gerontology) were grouped within the Nursing Core Competency areas.

#s 8-10, 24, 28, 40 & 52 awaiting affirmation by AGHE.

VIII. Course Requirements

- A. Required reading of text: Aging and the life course (2010)
- B. Class Participation (in-class and online students) is measured through the completion of concept maps, out-of-class and online assignments. Concept maps identify new information, revelatory (a-ha!) moments, learned concepts and how they you will apply them to your life or profession. Out-of-class and online assignments are performed in lieu of a class meeting.
- C. **Midterm exam** (in-class)
- D. **Final exam** (in-class)
- E. **Critical analysis of two newspaper or magazine articles on aging issues:** Each student will share <u>two</u> news articles with the class. These articles can be on any subject that interests you and that pertains to older

people or aging. You can obtain articles from newspapers, magazines, or the Internet. Students must cite the source and date of the articles. In selecting articles, some factors to consider are:

- 1. Does the article portray older persons negatively or positively?
- 2. If the article contains research on aging, does it provide information on the number of subjects and the controls?
- 3. Why did you choose this particular article?

You can share news articles in two ways: 1) short oral presentations at the beginning of each class, accompanied by the article with the student's name on it; or 2) a written, two to three paragraph summary of the article including its source and the date.

F. Interview with an older person, written outline and five-minute oral presentation or written narrative. Each student is required to interview an elder and give either a brief oral presentation to the class or a written narrative of the interview to the instructor. The person interviewed should be age 65 or older and can be a family member, neighbor or acquaintance. Do not use the real name of the interviewee. Instead, refer to the person by first names, a pseudo name or, by using an initial, such as Mr. M or Mrs. Q. A sign-up sheet for presentations will be available on the first day of class.

Oral presentations of the interviews should be approximately five to 10 minutes. Please give a brief written outline of your presentation to the instructor. The quality of the interview will be graded, not the outline, which can be as brief or as extensive as the student chooses. Written presentations for online students should be in narrative form. The instructor will grade those interviews on both content and quality of writing.

Telephone interviews are acceptable. Many students have had very positive experiences connecting with relatives from long distances. Get creative. This should be an enjoyable experience for both you and the person you choose to interview.

Suggested questions:

- 1. Tell me about your childhood; where did you live, how many siblings, what was your school like, etc.
- 2. What do you consider the high points of your life?
- 3. What have you found to be the most difficult part of growing older?
- 4. What are the most positive aspects of growing old?
- 5. What historical event has most affected your view of life? Which one and in what way?
- 6. What would your advice be to me on how to age successfully?

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G. **Issue Paper: 7-10 pages.** Gerontology 100 is a D2 - General Education course. All D2 courses require written assignments that contain a minimum of 1,500 words. The purpose of writing an issue paper is to give students an opportunity to explore a subject about aging, form an opinion about the subject, determine how this issue will affect them personally and write a persuasive argument either for or against the controversial issue. In the process, students will improve their research, analytical and writing skills.

For example, the issue could be the need for long-term care, the prevalence of elder abuse, work vs. retirement, Social Security, Medicare, how gender/ethnicity affect an aging person's life, or a subject of your own choosing that addresses issues of aging. You must address the factors surrounding the chosen issue, examining the pros and cons of the issue. Also included should be what society has done to address this issue. Conclude by summarizing your views about the issue and rationalizing your position. Here are some other tips:

- 1. Quickly write out the issue your argument will address. Try writing it several different ways. Select the one you think best defines the issue.
- 2. Why is this issue controversial? Does society disagree about basic values, assumptions or belief?
- 3. How does this issue affect you personally? What experience might you have had with this issue?
- 4. Choose one side of the issue. Write as many ideas that come to mind.
- 5. Now, choose the other side of the issue and write as many ideas that support this opposite view.
- 6. Review your writing and determine what you still need to know about the subject.
- 7. Research the subject to fill in the missing gaps.
- 8. Now, determine which side you plan to argue for and why.
- 9. Once you have completed these tasks, you are now ready to write a rough draft.
- 10. **RESEARCH REQUIREMENTS:** You must cite at least five scholarly peer-reviewed journals. Internet research, unless it involves journals, is not acceptable.
- 11. **APA FORMAT**: Use APA format when typing your Issue Paper. Consult the *Publication manual of the American Psychological Association* (6th ed.) and the Sample APA paper in SacCT.

Limit your discussion to one issue. You may make an appointment with me if you are having difficulty or need suggestions for a topic. The final submission date for the issue paper is December 7, 2012.

H. CSUS Policy on Plagiarism

Plagiarism is the use of distinctive ideas or works belonging to another person without providing adequate acknowledgement of that person's contribution. Regardless of the means of appropriation, incorporating another's work into one's own requires adequate identification and acknowledgement. Plagiarism is doubly unethical because it deprives the author of rightful credit and gives credit to someone who has not earned it. Acknowledgement is not necessary when the material used is common knowledge. When the course is not noted, the following would constitute plagiarism:

- 1. Word-for-word copying.
- 2. The mosaic (to intersperse a few words of one's own here and there while, in essence, copying another's work).
- 3. The paraphrase (the rewriting of another's work, yet still using the fundamental idea or theory) unless you cite the paraphrase.
- 4. Fabrication (inventing or counterfeiting sources).
- 5. Ghost-written material (submitting another's effort as one's own).

It is also plagiarism to neglect quotation marks on material that is otherwise acknowledged. Plagiarism and acts associated with it are cause for disciplinary and/or legal action.

I. Gerontology Program Writing Rubric

Written communication is the development and expression of ideas through writing for a particular audience and purpose. Gerontology students should be able to communicate effectively through writing, about social phenomena from a social science perspective. All Gerontology instructors use the Writing Rubric as an objective way to evaluate your written work (see Attachment #1).

J. Gerontology Program Presentation Rubric

Oral communication is the development and expression of ideas through presentation for a particular audience and purpose. Gerontology students should be able to communicate effectively orally about social phenomena from a social science perspective. All Gerontology instructors use the Presentation Rubric as an objective way to evaluate your oral presentations (see Attachment #2).

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IX.	Evaluation	Maximum # of Points	Grade
	News Articles (15 points each)	30	475 – 500 = A
	In-Class Participation (5 points ea	ich) 40	450 – 474 = A-
	Online Participation (15 points ea	ch) 45	425 – 449 = B+
	Outside Participation (15 points e	ach) 30	400 – 424 = B
	Interview	85	375 – 399 = B-
	Issue Paper	90	350 – 374 = C+
	Midterm	90	325 – 349 = C
	Final	90	300 – 324 = C-
	Total	500	275 – 299 = D+
			250 – 274 = D
			225 – 249 = D-
			Below 225 = F

The instructor will monitor your attendance and participation by assignments, concept maps, and other in-class, out-of-class, and online activities. The Midterm and Final examinations are in-class tests. You will need to be physically in-class to take the examinations. Assignments submitted after the due date will receive two points off for each day late. The instructor may consider extra credit proposals from students.

VIII. Suggested Readings to Supplement Required Texts

Non-Fiction

- Albom, M. (1999). *Tuesdays with Morrie*. New York: Double Day. Interviews on the meaning of life with a former college professor conducted by one of his students.
- Brokaw, T. (1998). *The greatest generation*. New York: Random House. The stories of men and women who came of age during World War II, their war experiences and how these experiences influenced their lives.
- Delany, S., & Delany, B. (1993). *Having our say: The Delany sisters' first 100 years*. Delightful autobiography of two African American sisters who lived well past 100 years.
- Friedan, B. (1993). *The fountain of age*. New York: Simon & Schuster. Interviews with successful elders who have aged well.
- Pipher, M. (1999). *Another country: Navigating the emotional terrain of our elders*. New York: Riverhead Books. Thought-provoking interviews with older persons.

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Terkel, S. (1984). *The good war: An oral history of world war two*. New York: Ballantine Books.

Interviews with men and women, some who went to war; many who stayed home and assisted the war effort. This book won a Pulitzer Prize.

Terkel, S. (1996). *Coming of age: The story of our century by those who've lived it.* New York: Saint Martin's Griffin.

A real slice of Americana. Interviews with those who have been very successful and those who are just plain folks.

Tindell, C. (1998). Seeing beyond the wrinkles: Stories of ageless courage, humor, and faith. New York: Studio 4 Productions. Older people's comments on growing old; short 2-3 page vignettes.

Fiction

- Guterman, D. (1995). Snow falling on cedars. New York: Vintage Contemporaries. A Japanese fisherman is on trial for killing a Caucasian fisherman. The story, through flashbacks, tells the tale of what happened to Japanese landowners and their families during World War II and how these experiences affected their life course.
- Kleiner, G. (1996). *Where river turns to sky*. New York: Avon Books. Rather off-the-wall novel about an elderly man who buys a broken down mansion and opens it up to other old folks.
- Michener, J. A. (1994). *Recessional*. New York: Ballantine Books. Young doctor becomes administrator of an upscale continuing care community in Florida. Deals with many issues facing older people.
- Wallis, V. (1993). Two old women: An Alaska legend of betrayal, courage, and survival. New York: Harper Perennial.
 When two elderly Native American women are left by their tribe to die, they decide they aren't ready to go.

CONCEPT MAP #1 Student Name: _____



CONCEPT MAP #2 Student Name: _____



CONCEPT MAP #3 Student Name: _____



CONCEPT MAP #4 Student Name: _____



CONCEPT MAP #5 Student Name: ______



CONCEPT MAP #6 Student Name: ______



CONCEPT MAP #7 Student Name: _____



CONCEPT MAP #8 Student Name: ______



Attachment #1- Gerontology Program WRITING Rubric Written Communication is the development and expression of ideas through writing for a particular audience and purpose. Gerontology students should be able to communicate effectively through writing, about social phenomena from a social science perspective.

	4 = Exceed Expectation	3 = Meet Expectation	2 = Approach Expectation	1 =Below Expectation
1. Purpose and	A strong sense of purpose controls the	A clear purpose guides the	The student generally stays on a	The presentation has no clear
Development	development of the presentation. The presentation is extremely focused even though it studies complex ideas. The student demonstrates mastery of	development of the presentation. The presentation studies increasingly complex ideas and is adequately focused. Student demonstrates an	fairly broad topic, but has not developed a clear theme. The presenter demonstrates some understanding of the subject, but	sense of purpose or central theme. The student has not yet decided the main idea of the paper or is still in search of a
	the subject.	adequate understanding of the subject.	has not yet focused the topic pass the obvious.	topic, thus demonstrated little understanding of the subject.
2. Overall Organization	The organization enhances and showcases the central theme. The order, structure or presentation of information is compelling and smoothly moves the reader through the text.	The organizational structures are strong enough to display a central theme and adequately move the reader through the text.	The organizational structures are not strong enough to display a central theme; therefore the reader is confused sometimes when listening to the presentation.	The presentation lacks a clear sense of direction and identifiable internal structures, which makes it hard for the reader to get a grip on the theme or the main idea.
3. Audience Engagement	The student meets the needs and captivates the interest of the audience throughout the presentation.	The student meets the needs and captivates the interest of the audience throughout most of the presentation.	Sometimes, the student holds the attention of the audience, but does not sustain it throughout.	The student neither meets the needs nor captures the interest of the audience.
4. Control of Syntax and Mechanics	The student demonstrates mastery of standard writing & presentation conventions (e.g. spelling, punctuation, capitalization, grammar, paragraphing, speech clarity) & uses these conventions to enhance present- ability.	The student demonstrates an adequate grasp of standard writing & presentation conventions (e.g. spelling, punctuation, capitalization, grammar, paragraphing, speech clarity) despite a few errors.	The student shows a reasonable control over limited range of standard writing & presentation conventions. Conventions are sometimes handled well; at other times, errors distract readability.	The student demonstrates little control of grammar, syntax, and presentation mechanics. The errors distract the reader and make the text hard to read.
5. Summary: Clarity and Revision	The whole presentation is extremely clear and easy to understand. It needs little or no revision.	The presentation is clear and easy to understand, but needs some revision.	Some parts of the presentation are clear, but others are hard to follow. The presentation needs a fair amount of revision.	The presentation is not clear, therefore difficult to follow. The presentation needs significant revision.
6. Citation of Sources (if applicable)	The student consistently cites all of the sources.	The student consistently cites the majority of the sources.	The student consistently cites some of the sources.	Errors occur everywhere when citing the sources.
7. Graphic Presentation (if applicable)	The student demonstrates an innovative use of graphic presentations to communicate a meaningful message.	The student demonstrates an appropriate use of graphic presentations to communicate a meaningful message.	The student used some graphic presentations to communicate a message.	The student does not use graphic presentations where necessary.

Attachment #2 - Gerontology Program PRESENTATION Rubric Oral Communication is the development and expression of ideas through presentation for a particular audience and purpose. Gerontology students should be able to communicate effectively orally about social phenomena from a social science perspective.

	4 = Exceed Expectation	3 = Meet Expectation	2 = Approach Expectation	1 =Below Expectation
1. Purpose and	A strong sense of purpose controls the	A clear purpose guides the	The student generally stays on a	The presentation has no clear
Development	development of the presentation. The presentation is extremely focused even though it studies complex ideas. The student demonstrates mastery of the subject.	development of the presentation. The presentation studies increasingly complex ideas and is adequately focused. Student demonstrates an adequate understanding of the	fairly broad topic, but has not developed a clear theme. The presenter demonstrates some understanding of the subject, but has not yet focused the topic	sense of purpose or central theme. The student has not yet decided the main idea of the paper or is still in search of a topic, thus demonstrated little
		subject.	pass the obvious.	understanding of the subject.
2. Overall Organization	The organization enhances and showcases the central theme. The order, structure or presentation of information is compelling and smoothly moves the reader through the text.	The organizational structures are strong enough to display a central theme and adequately move the reader through the text.	The organizational structures are not strong enough to display a central theme; therefore the reader is confused sometimes when listening to the presentation.	The presentation lacks a clear sense of direction and identifiable internal structures, which makes it hard for the reader to get a grip on the theme or the main idea.
3. Audience Engagement	The student meets the needs and captivates the interest of the audience throughout the presentation.	The student meets the needs and captivates the interest of the audience throughout most of the presentation.	Sometimes, the student holds the attention of the audience, but does not sustain it throughout.	The student neither meets the needs nor captures the interest of the audience.
4. Control of Syntax and Mechanics	The student demonstrates mastery of standard writing & presentation conventions (e.g. spelling, punctuation, capitalization, grammar, paragraphing, speech clarity) & uses these conventions to enhance present- ability.	The student demonstrates an adequate grasp of standard writing & presentation conventions (e.g. spelling, punctuation, capitalization, grammar, paragraphing, speech clarity) despite a few errors.	The student shows a reasonable control over limited range of standard writing & presentation conventions. Conventions are sometimes handled well; at other times, errors distract readability.	The student demonstrates little control of grammar, syntax, and presentation mechanics. The errors distract the reader and make the text hard to read.
5. Summary: Clarity and Revision	The whole presentation is extremely clear and easy to understand. It needs little or no revision.	The presentation is clear and easy to understand, but needs some revision.	Some parts of the presentation are clear, but others are hard to follow. The presentation needs a fair amount of revision.	The presentation is not clear, therefore difficult to follow. The presentation needs significant revision.
6. Citation of Sources (if applicable)	The student consistently cites all of the sources.	The student consistently cites the majority of the sources.	The student consistently cites some of the sources.	Errors occur everywhere when citing the sources.
(if applicable) (if applicable)	The student demonstrates an innovative use of graphic presentations to communicate a meaningful message.	The student demonstrates an appropriate use of graphic presentations to communicate a meaningful message.	The student used some graphic presentations to communicate a message.	The student does not use graphic presentations where necessary.