

Training of trainers should occur within the basic social science disciplines. The trainer must serve as an integrator and translator of basic science concepts for the applier of such knowledge. Relevant skills as well as experience in working with paraprofessionals and in multidisciplinary settings should therefore be included as part of the training program.

## Training of Trainers to Train Trainers<sup>1</sup>

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The 1971 White House Conference on Aging was explicit in calling for the training of a new generation of individuals who would make a direct impact on behalf of the welfare and well-being of the older person. The recommendations coming from that conference were also quite explicit in suggesting that the newly required personnel would largely be at the level of paraprofessionals who would not only have concrete applied skills but also possess a reasonably broad understanding of the needs, attitudes, and characteristics of older people. It would seem to be my role in the symposium to lay out a blueprint on how the academician can participate in the training of such professionals in such a manner that he can make an impact upon the "real world" while remaining in the ivory tower.

### The Disciplines and the Training of Paraprofessionals

It is the essential role of the academician to attempt to make his impact upon society while retaining a stance of relative distanciation. This position is necessary if the academician is to maintain the possibility of being a critic and a reformer without being pulled under by the daily demands of continuous advocacy and involvement. The role of the disciplines in the training of paraprofessionals cannot lie in their

direct involvement in such training. Rather, their role should be the detailed consideration and provision of background materials which will be required to provide a small cadre of intensively trained high-level individuals. It is the latter who will indeed be involved in the exercise of mass-producing the army of paraprofessionals who are needed to permit a concerted attack upon the problems incapacitating our older population and who will provide the life support systems which will make it possible for older people to share fully the opportunities and resources of our society.

### Who Should Train the Trainers?

At last year's Gerontological Society Training Symposium (Schaie & Siegler, 1972) I tried to detail, when examining the alternate training models for graduate students, that interdisciplinary coalitions usually provide the exciting concepts leading to scientific breakthroughs but that it is the disciplines which provide the technology which results in the operationalization of the construct and thus delivers the goods. The obverse is necessarily true when we are dealing with the paraprofessional. But by definition, we are here concerned with intensive training in specific skills, broadly applicable, which may be derived from a variety of disciplines, without the trainee having the opportunity to obtain training in depth within any single discipline.

How are we to obtain the trainers for this exercise? We cannot expect to provide direct role models in the usual sense of the words. In-

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deed this is an occasion where we will have to insist that our trainees must do as we say and not as we do. This is not an unusual stance for the academician primarily involved in undergraduate teaching, but much less palatable for those of us who are heavily invested in the development of new knowledge and the training of new generations of scholars. It is a role which is also much more comfortable for the faculty member of a professional school than for the basic scientist. Nevertheless, particularly in the area of the social and behavioral sciences, it is the basic scientist who must now be asked to spend at least some of his time in translating his knowledge into principles which admit of specific application. In addition, and more important for our present purposes, he must think through the issue of how he can contribute to the training of a specialist who will train professionals and paraprofessionals rather than simply reproduce himself. In the remainder of this paper I will try to do two things: First, I will examine what ought to be the skills and attributes of this trainer of applied personnel in gerontology, and second, I will address myself to the issue of what context the training of trainers is to occur.

#### **Trainers Should Be at the Doctoral Level**

The time required to groom the trainer would in and of itself require placing him at the doctoral level. In addition the status attribution is particularly important when training of paraprofessionals is involved. Not only must information be conveyed concisely and in breadth, but this information must be endowed with the "magic" of authority to be acceptable to the recipient, who cannot himself validate the information received, but must accept and act on it largely as a matter of faith. Next, the trainer must have a professional home in a basic discipline, since there will never be enough of such individuals to provide either the scientific or power base required for doing the job, as well as offering reasonable career risk insurance. The professional home of the trainer ought to be in one of the social or behavioral sciences, because the bulk of the information to be transmitted will come from these fields. Special input from the medical and biological sciences may be required for the training of the trainer, but it is unlikely that medical training or training in a science which studies behavior at an infra-human or molecular level will be most useful for the task at hand.

#### **Departures from the Traditional Academic Model**

While it is essential that our trainer have a firm grounding in his basic discipline, his interests and attitudes must deviate to some extent from the traditional academic model. That is, while he should be skilled in the techniques and concepts of scholarly research, his research interest should clearly be applied, and the questions which he wants to ask must be at the cutting edge of contemporary social problems, rather than related to basic or largely theoretical issues. He should be firmly committed to the notion that particular skills can be taught at many levels, no matter how sophisticated the subject matter might be. In other words, one of the most important skills for the trainer will be the ability to translate complex paradigms into everyday English and to deduce from obscure-appearing laboratory research those aspects which permit applications in immediate real life situations. The trainer cannot be expected to be competent in all areas of gerontology, but he should be expected to acquire a broad enough knowledge base to know where to go for information he does not possess as well as the interpersonal techniques required to make profitable use of consultants as well as to serve as a consultant. High level conceptual and verbal skills are clearly a must, as well as the ability to integrate concepts from many disciplines and to formulate their application into everyday terminology.

It would appear then that the trainer needs knowledge and skills in the interpersonal area, the area of social organization and of educational technology. He will require experience in the conduct of traditional educational offerings, but also in the organization and conduct of very specialized inservice training activities.

#### **Where Should the Trainers be Trained?**

Perhaps I am overly optimistic in thinking that the traditional disciplines can be used to produce a person who is to be a competent researcher, a master teacher, a systems analyst, consultant, and probably a political activist. I do not know of any other effective approach and as in any other endeavor must work with the building blocks in hand.

I propose, then, that the trainer-of-trainers originate in an aging-oriented program within one of the social science disciplines. I next propose that his PhD program be carefully planned to include training in the methodology of evaluation research and of information dissemina-

tion. I would next insist that as part of his graduate training he be exposed as a program or teaching assistant to the practical matters of teaching in multidisciplinary courses, short courses, workshops, and the like. In fact I would require as a mandatory exercise during his summers, first attendance at and subsequently participation as discussion leader or teaching assistant in an institute or institutes devoted to paraprofessional training. Beyond this I would encourage post-doctoral training in a multidisciplinary setting for the particular purpose of getting exposure to other areas of gerontology, including the conduct of evaluation research and possible administrative internships in agencies which would be likely employers of paraprofessionals.

### **The Role of the Academic Department**

Let me next address the issue of how the traditional discipline can be effective in contributing to the training goals just described. Most scientific disciplines have been trying to protect their bailiwick and attain scientific respectability by concerning themselves with their methodologies, models, and theoretical frameworks to the exclusion of a concern with the specific relevance of a given aspect of a research project or piece of knowledge to broad social issues. It is not my purpose to attack this stance, because it may well be necessary for dispassionate inquiry and for the ultimate progress of knowledge. For our particular purposes here, however, I would like to see this stance supplemented by a genuine attempt to translate scientific concepts and research findings in such a way that they can be directly related to contemporary social issues. For example, I would like to see the psychologist specify how principles of positive reinforcement can be applied in the upgrading of the quality of life in a nursing home, or for that matter in shaping the behavior of a nursing home administrator in a societally desired direction. I would like to see the sociologist examine what particular changes in the structure of a social organization might be required to relieve pressures toward age segregation. In other words, to give the trainer his tools for training, it is the basic discipline which should translate its knowledge for ready application, if we are to continue seeing ourselves as the designers and architects of our society.

### **The Trainer as an Integrator of Knowledge**

Thus far I have considered the role of the basic discipline in translating research findings into principles which can be directly applied to specific instances and applications likely to occur in everyday life. But there is yet another contribution which the discipline can make, and this relates directly to the role of the academician as an abstractor and integrator of knowledge. Although the amount of research literature which the knowledgeable researcher must know is voluminous, nevertheless, the principles which can be abstracted therefrom and which might be essential for the practitioner may be quite limited. Perhaps one contribution we can make is to apply principles and more or less firm conclusions which may indeed be essential as well as helpful. It is the basic discipline which can and should be transmitted for rather than the user who should refine the mate-wide dissemination and ready application.

Although many might insist these views argue for the trainer to be a gerontologist *per se* rather than a specialist with broad training in gerontology, I will persist in my position that gerontology is a coalition of specialists organized around a set of constructs rather than a discipline in its own right. What I am saying is that I wish to equip a specialist trained in depth with the tools required in turn to train broad generalists at the firing line level.

### **Will There Be Jobs for the Trainer?**

What is the likelihood that the trainer trained in the manner I have described will find appropriate employment? Multidisciplinary centers like the one I am affiliated with are rapidly moving into the dissemination of knowledge and training of paraprofessional stage. Nevertheless they must maintain their position in the generation of new knowledge. For the former efforts we clearly need new staff oriented toward such missions, but such staff must be able to communicate effectively with basic researchers and be effective in translating their efforts.

### **Reference**

Schaie, K. W., & Siegler, I. C. Models for graduate training in gerontology: Uni-disciplinary, inter-disciplinary, and multi-disciplinary approaches. Paper presented at Gerontological Society meeting, San Juan, 1972.