

# DR. KATHY BLACK

As a Professor of Social Work and Gerontology and Hartford Geriatric Faculty Scholar at USF Sarasota-Manatee, she's been involved researching and teaching the whole process of aging – not just about the obvious physical but also psychological, social, spiritual, medical, and financial concerns. Kathy's work focuses on active and healthy

aging with dignity and independence. Her career includes 30 years as a geriatric case manager, medical social worker in acute care and hospice, and geriatric nurse. "We need to challenge the social-construction of what getting older is all about—and choose to thrive throughout our life course."



**I**n a community with one third of the population aged 65 and older, you'd assume that individuals and the community have adequately addressed issues surrounding the later years of life. Advance care planning refers not just to legal documents, but to a process that includes a dialogue with family, friends, and health care professionals about how one's needs will be met during the last years of life.

Dr. Kathy Black, Professor of Social Work and Gerontology and Hartford Geriatric Faculty Scholar at the University of South Florida Sarasota-Manatee, refers to the obvious physical limitations, but she cites research that other considerations are important and often overlooked, namely psychological, social, spiritual, medical, and financial concerns. These are critical issues for people in their late 70s and 80s, but Kathy expresses a need for the baby boomers born 1946-1964 and the millennials born 1980-1995 (who outnumber the boomers, by the way) to think about how to meet life's changes in all areas. Her work focuses on active and healthy aging with dignity and independence and therefore compressing morbidity into the later years of life.

Kathy, who is also The Patterson Foundation Initiative Consultant, Age-Friendly Sarasota, says, "As people live longer, more and more people will experience years of functional and cognitive decline prior to death. The script from the past is no longer true. People do not become sick and die in a couple days or weeks. Only 10 percent of people die suddenly. According to The Centers for Disease Control four of the five leading causes of death are chronic diseases: heart disease, cancer, chronic obstructive pulmonary disease, and stroke. Researcher Dr. Joanne Lynn says that nine out of 10 Americans belong to one of three categories: about 20 percent of the population will have good health with a few weeks or months of rapid decline before death usually from cancer; about 25-30 percent of the population will begin a chronic progressive decline in their 70s primarily from chronic heart failure and COPD with death occurring in the 80s; and about 40 percent of the population will have years of decline—and years of care—due to dementia and/or frailty. We need to think about how to live fully and actively with deteriorating conditions."

Debra Jacobs, President and CEO of The Patterson Foundation, says, "Kathy exemplifies using one's gifts to make a positive difference. Her passion for creating new realities through participatory research combined with her vast network bodes well for the Age-Friendly Sarasota journey ahead." The initiative aims to encourage government, businesses, organizations, and residents to create an environment conducive to an aging population. Sarasota is the first in Florida to participate in the AARP/World Health Organization's Global Age-Friendly Cities and Communities project which identifies eight domains of livability including accessible recreational facilities, transportation, housing, social participation, civic engagement, and health services.

"We're an aging society, but we're not geared for longevity. The Patterson Foundation realizes that societies are not prepared for the cascading problems that come with aging. In society, we have three levels of targeted research: the micro-level that focuses on the individual's healthy and active aging; the meso-level that focuses on the intersec-

tion between organizations, the community, and the individual; and the macro-level that focuses on large-scale infrastructure such as businesses and parks, for example," says Kathy. "All are important."

According to Kathy, one's later years of life are the result of earlier life choices or genetics. The resulting multiple cumulative changes indicate a need to maintain functioning in all areas during the aging process. Women, she says, who outnumber men particularly at an older age, face triple jeopardy in aging: they're more likely to be widowed; they're more likely to be living alone; and they're more likely to be poor or have limited financial resources. Add into this picture chronic conditions and frailty, and the eventual result is placement in an institution.

Kathy adds, "Families are multi-generational, multi-cultural and multi-gender. I'm very concerned about the 'sandwich generation.' In the past, people who were 40 years and older were caring for family members who were in their late 60s and 70s. Now people who are 65 and older are caring for family members in their 90s. The old are now caring for the older. Another issue is that one third of baby boomers are unmarried, and boomers in general have smaller extended families, higher divorce rate, and no children—who will care for them, their home, and their finances? In a study that I conducted, I found that over 85 percent of the respondents (aged 65-95) said they want to be cared for by friends. Rosalynn Carter said that there are only four kinds of people in the world: those who have been caregivers, those who currently are caregivers, those who will be caregivers, and those who will need caregivers. It is not a crime to need each other at the end of life."

Kathy received a Ph.D. from SUNY at Albany, Masters' Degrees in Public Health from UCLA, in Social Work and in Gerontology from the University of Southern California. She was one of three women faculty members in the entire USF system to receive the 2015 Faculty Research Award presented by USF Women Leadership and Philanthropy for her research on women's issues. Her professional experience includes 30 years as a geriatric case manager, medical social worker in acute care and hospice, and geriatric nurse. She is on the editorial board of *Research on Aging* and the *Journal of Social Work in End-of-Life & Palliative Care* and her articles appear in 40 peer-reviewed publications.

Born in the New York Catskills, Kathy's interest in gerontology and end-of-life issues originated with her grandmother (who her work honors) who lived with her and her husband when they were in their 20s. Kathy has been married for 36 years to William Culver who teaches computer science at State College of Florida. Daughter Alyssa is a student at Florida State University and daughter Alanna is a student at Pine View. Her favorite leisure activities are watching black and white movies on TCM and NBC's "The Voice."

This sage professor offers some profound insights. "We should all consider what we really think and how we really feel about getting older. Life will be a self-fulfilling prophecy. Ageism abounds and we've all been bombarded with negative images of aging and getting older throughout our lives and society. We need to challenge the social-construction of what getting older is all about—and choose to thrive throughout our life course." ❧

STORY: Carol Darling

IMAGES: Evelyn England