Social Gerontology as Public Sociology in Action

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Burawoy (2005) argues that sociology needs to re-establish a public sociology oriented toward society's problems and the practice of its unique knowledge if it is to again be taken seriously by the public, policymakers, and others. Yet, it is unclear how best to achieve these goals. We argue that the relatively young field of social gerontology provides a useful model of successful public sociology in action. As a multidisciplinary field engaged in basic and applied research and practice, social gerontology's major aim is to improve the lives of older people and to ameliorate problems associated with age and aging. Thus social gerontology has routinely reached beyond the academy to engage with its publics. We review the field's historical and theoretical development and present four examples of public sociology in action. Several factors have contributed to social gerontology's success in achieving the goals of public sociology: (1) Working in multidisciplinary teams which promote collaboration and respect for diverse perspectives. (2) Its ability to advocate "professionally" for its publics without favoring one group at the expense of another. (3) The unique affinity of its theories and practices with its disciplinary values. (4) The constructive effects of its ongoing questioning of values and ethics. Working in a multidisciplinary field with multiple publics, social gerontologists have been able to blend professional, critical, policy, and public sociologies to a considerable degree while contributing toward improvements in well-being.

Public sociology has recently emerged as a topic of significant debate within the broader field of sociology. At its core, public sociology involves reaching a public audience and working to improve the public's well-being (Brady, 2004). Its aim is "to enrich public debate about moral and political issues by infusing them with sociological theory and research" (Burawoy, 2004: 1603). Yet it is unclear how best to achieve these goals, or even whether these are appropriate goals for sociologists. Little published work has discussed whether or how public sociology can

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be practically achieved. We propose that the field of social gerontology can offer insights as to how a social science discipline can enact its "public" dimension—engagement with various publics both inside and outside the discipline for the mutual benefit of its constituent interests.

Burawoy (2005) proposes that public sociology brings sociology into a conversation with publics, motivated by a concern that sociology may be isolated from public discourse and public action. Social gerontology, on the other hand, has been in continuous conversation with its publics since its beginnings: the elderly and their families, practitioners, policymakers, government agencies, employers as the providers of pensions, gerontology students, and many others. Gerontologists almost by definition are involved in public sociology. Many act in the public arena as advocates for elders.

In this paper we argue that the field of social gerontology provides a useful model of successful public sociology in action. First we present our understanding of what is meant by public sociology, as described by its major proponent (Burawoy, 2004; 2005) and some of its skeptics (Brady, 2004; Nielsen, 2004; Tittle, 2004). We then introduce the relatively young field of social gerontology. We describe its historical and theoretical development and comment on the theoretical debates as well as the underlying values that have animated its basic and applied research agendas. Next we provide four examples of social gerontology as public sociology in action. We then identify several factors that have made social gerontology successful in achieving the goals of public sociology. Finally, we summarize the ways in which social gerontology can inform the development of public sociology.

The Pursuit of Public Sociology

Pointing to a growing divide between sociology and the world it seeks to understand, Burawoy (2005) argues that sociology is in danger of losing its connection to civil society and thus losing sight of its primary purpose. The discipline needs to re-establish a public sociology oriented toward society's problems and the practice of its unique knowledge if it is to again be taken seriously by the public, policymakers, the mass media, and others. To this end, Burawoy conceptualizes a division of sociological labor representing a matrix of four kinds of knowledge that are nevertheless interdependent: professional, critical, policy, and public. To regain its relevance and vitality, professional sociology, in particular, needs to pay heed to the emancipatory values of its critical side.

Debate has centered largely around whether or not public sociology is desirable or, at its extreme, unethical and an abuse of professional authority. Proponents of public sociology argue that sociological work should be relevant to the public, that sociologists are accountable to the public, particularly at state-funded universities, and that public sociology is a natural and necessary counterpart to professional sociology (Burawoy, 2004). Opponents of public sociology argue that working to better society assumes both a consistency of values across sociologists and a consistency of findings in sociology that do not exist, and that the pursuit of public sociology undermines professional or scientific sociology (Nielsen, 2004; Tittle, 2004). If a public sociology as proposed by Burawoy (2005) is desirable, how can a sociology of this kind be developed? The relatively young field of social gerontology provides an example of how this can occur.

The Multidisciplinary Field of Social Gerontology

The Goals of Social Gerontology

Social gerontology is a multidisciplinary field grounded in the sociology of age but informed by psychologists, policy and public health researchers, medical and social work practitioners, demographers, and economists, among others. A central aim of social gerontology since its inception as a discipline, has been to understand and improve the lives of older adults, and to ameliorate the "problems" of aging (Achenbaum, 1995). Thus social gerontologists are interested in the impact of socioeconomic, political, and cultural forces and conditions on the processes of aging, and in the statuses and well-being of older people. Social gerontology explores the ways in which the older population and the diversity of the aging experience affect and are affected by social structures (Hooyman and Kiyak, 2005). Research in social gerontology addresses many domains of social life and behavior, including family relationships, health and disability, and older adults' social participation. Social gerontologists are also interested in social inequality by age—the unequal treatment of older people and in the deleterious effects of ageism. The recognition of diversity and inequality has been crucial to the development of the field, and are incorporated in theory and practice.

Social gerontology is oriented around the "so what?" question: a concern for applying findings to improve the lives of older persons and their families. Social gerontologists often look to public policy as a way of making these improvements. Indeed, much of gerontological research is aimed at influencing public policy for the benefit of publics. Because it is involved in basic as well as applied research, the field has devoted and enthusiastic audiences. Its activities range from traditional quantitative and qualitative sociological research to direct community-based research and service, to advocacy for the elderly before agencies and lawmakers. Thus social gerontologists have been doing much of what Burawoy suggests is public sociology long before it was labeled as such.

In social gerontology, distinctions between professional, critical, policy, and public domains are blurred, even as ideal types, particularly between policy and public. Perhaps this is because of social gerontology's multidisciplinary origins and its common vision of ameliorating the problems of old age. Often, the same scholars are responsible for conducting basic research and communicating that research to various publics. In social gerontology public priorities are more than just "moments" (Burawoy, 2005); they crosscut the domains of labor. This may be because each domain, to the extent domains are distinguishable at all, sees itself as accountable to the well-being of older people and their families.

The Problem of Aging

Social gerontologists—whether as scientists, practitioners, or policymakers—concern themselves with three sets of issues as they attempt to analyze and understand the phenomena of aging. The first set concerns *the aged*: the population of those categorized as elderly in terms of their length of life lived or expected life span. Most gerontological research in recent decades has focused on the functional problems of aged populations, seen as medical disability or barriers to independent

living. How can we better address the needs of elderly people? How can they live healthier and more fulfilling lives? How can we identify and mitigate the pernicious effects of ageism? A second set of issues focuses on *aging* as a developmental process. Here the principal interest is in the conditions and problems that accumulate during the lifespan and cannot be understood separate from developmental experiences and processes across a lifetime.

A third set of issues involves the study of *age* as a dimension of structure and behavior. Social gerontologists are interested in how social organizations are created and changed in response to age-related patterns of birth, socialization, role transitions and retirement or death. The phenomena to be explained relate to how institutions such as labor markets, retirement and pension systems, healthcare organizations, and political institutions take into account or deal with "age." Rapid population aging and higher old age dependency ratios will create major challenges for states and economies over the next half-century. Less obvious but equally important is the profound effect that population aging will have on social institutions such as families. A major question concerns the provision of care for the growing numbers of very old people. Is it primarily the responsibility of families? Of individual's themselves? Or the responsibility of government? Through their research, social gerontologists concern themselves with these challenging societal issues. While these three sets of research issues are quite different in focus and inquiry, they are nonetheless interrelated in research and practice.

The Young Science of Gerontology

Gerontology emerged as a distinct field of study in the United States only a half-century ago, following World War II, when scientists from biology, psychology, and human development founded the Gerontological Society of America. Since its beginnings gerontology's scholarly and scientific interests have been broadly defined, because old age was considered "a problem" that was unprecedented in scope and complexity (Achenbaum, 1987). To understand and explain the multifaceted phenomena and processes of aging required the scientific insights of biology and biomedicine, psychology and the social sciences. Over time the field expanded beyond these core disciplines to include anthropology, demography, economics, epidemiology, history, the humanities and arts, political science, and social work, as well as the many professions that serve older persons.

As it developed, gerontology endeavored to define itself as a "science" (Achenbaum, 1995). Today science is the reigning paradigm for conducting research and developing theoretically based, cumulative knowledge in the field. Science and theory guide recommendations for policy and interventions. Thus, theory is necessary not only in the conduct of basic research concerning phenomena of aging, but also in application—in practice—in order to design effective interventions to assist older adults and effectively deal with the countless problems associated with aging and old age.

Theoretical Development in Social Gerontology

We shift to a discussion of theories in social gerontology not only because they reflect the progression of ideas in our field over time, but also because current

theoretical perspectives show a loose correspondence with Burawoy's (2005) professional and critical types of sociologies.

While most social gerontological research is scientific and quantitative, interpretive and critical approaches and qualitative and narrative methods have become more common in recent years. Arguing that science and positivistic approaches are limited for understanding aspects of aging, social gerontologists with critical and social constructionist perspectives suggest that there are nonscientific ways to examine, interpret, and develop knowledge about aging. Further, critical theorists argue that such knowledge should be emancipatory. To be sure, social gerontologists have engaged in heated debates over the virtues of science in developing and applying knowledge and whether human behavior can be understood at all in terms of laws, causality, and prediction—not unlike the debates in sociology. In our field, researchers in the interpretive tradition focus on describing and understanding how social interactions proceed and on the subjective meanings of age and aging phenomena (Gubrium and Holstein, 1999). This perspective posits that knowledge of the social world derives from the meanings individuals attach to their social situations. In addition, individuals are seen as active agents who can change the nature of their social environments, thus casting doubt on the possibility of finding any general scientific explanations of human social organization (Turner, 2003).

Like the aging process itself, theoretical development is embedded in institutional and historical contexts. Achenbaum (1995) observes how the development of gerontological theories paralleled the historical construction of gerontology around new scientific methods and medical practices that would be used to address the "problems" associated with declining health and growing old. Not surprisingly, the biomedicalization of aging is still a guiding research paradigm, while using science to help ameliorate of the problems of older people remains a central goal.

As social gerontology developed in the post-World War II period, it drew theoretical insights from the prevailing theoretical paradigm of the time, structural functionalism, as well as symbolic interactionism. The most explicitly developed of these theories, disengagement theory (Cumming and Henry, 1961), explained human aging as an inevitable process of individuals disengaging and adaptively withdrawing from social structures in anticipation of the person's inevitable death, a functional process ultimately beneficial for individuals and the social system. Disengagement theory created a firestorm of criticism. The theory had attempted to explain both macro- and micro-level changes with one "grand theory," but when tested empirically its validity and generalizability claims were not be supported. While many older people appear to be "disengaging" or withdrawing from their social connections and activities, many are not. Activity theory (Lemon, Bengtson, and Peterson, 1972) represented an alternative explanation of aging. Its legacy, reflected in the concept "successful aging," has reappeared in a best-selling book (Rowe and Kahn, 1998) but has been criticized for its excessive individualism and discounting of social diversity and inequalities (Schmeechle and Bengtson, 1999). Modernization theory as applied to aging (Cowgill and Holmes, 1974), and subculture theory (Rose, 1965) also emerged during this formative period. One outcome of the profound criticism of disengagement theory was to curtail further attempts to develop a general theory of aging. Interestingly, modernization theory has recently resurfaced, although more limited in scope (Aboderin, 2004).

In the 1970s a second generation of theories of aging emerged, many based upon older more general sociological or rational choice theories: continuity theory (Atchley, 1993) and social breakdown/ competence theory (Kuypers and Bengtson, 1973), both coming from symbolic interactionism; and exchange theory (Dowd, 1975), a rational choice perspective. Two macro-level perspectives included age stratification theory (Riley, Johnston, and Foner, 1972), drawing from structural functionalism, and the political economy of aging (Estes et al., 1984), a conflict perspective. Since the late 1980s many of these theories have been refined and reformulated, and a third generation of theoretical perspectives emerged (Hendricks, 1992).

Contemporary Theoretical Perspectives in Social Gerontological

A brief review of the major theories used in the social gerontology today reveals the pluralism and diversity of today's thinking about the "why" and "how" of phenomena of age and aging. Some of these theoretical perspectives appear more closely related to Burawoy's (2005) category of "professional" sociology while others are more aligned with "critical" sociology. We have not included theories from the social psychology and psychology of aging, some of which are used in combination with the theories listed below when testing competing hypotheses.

Life Course Perspective. This perspective is the field's most widely cited theoretical framework. It generally corresponds to the professional domain of social gerontological labor. While there is debate as to whether the life course is a "theory" or an orienting perspective, it represents a convergence of thinking in sociology and psychology about processes at both macro- and micro-social levels of analysis and for both populations and individuals over time. Researchers using this perspective are attempting to explain: (1) the dynamic, contextual, and processual nature of aging; (2) age-related transitions and life trajectories; (3) how aging is related to and shaped by social contexts, cultural meanings, and social structural location; and (4) how time, historical period and cohort shape the aging process for individuals as well as for social groups (Bengtson and Allen, 1993; Elder, 1992; Elder and Johnson, 2002). This approach is multidisciplinary, drawing content and methods from sociology, psychology, anthropology, and history. The life course approach is also explicitly dynamic rather than static, attempting to focus on the life cycle in its entirety while allowing for deviations in trajectories. Typically seen as a "mainstream" perspective, the life course perspective is often used by critical theorists in their research designs but who then cross typological boundaries to critically evaluate findings (Dannefer, 2003).

Social Exchange Theory. Social exchange theory also falls into the professional social gerontology quadrant. Frequently used in the study of intergenerational relations and support, this micro-level theory attempts to explain exchange behavior between individuals of different ages as a result of the shift in roles, skills, and resources that accompany advancing age. Developed and extended by Dowd (1975), social exchange theory draws from sociological formulations by Homans (1961) and Blau (1964) and work in economics that assumes a rational choice model of decision-making behavior. It explicitly incorporates the concept of power differences. A primary assumption is that various actors (such as an elderly parent and an adult child) each bring resources to an interaction or exchange and that such ex-

changes are governed by norms of reciprocity, an obligation to repay the receipt of valued assets, services or sentiments. Repayment may be deferred for decades, as when a parent's investment in his or her adolescent child is repaid by that child in midlife when the parent is old and frail (Silverstein et al., 2002).

Age and Society Paradigm (Age Stratification Perspective). One of the oldest traditions of macro-level theorizing in social gerontology (Riley, Foner, and Waring, 1988), this perspective's intellectual roots can be traced to structural functionalism, particularly the works of sociologists Sorokin (1947), Mannheim (1922/1952), and Parsons (1942). It too aligns more closely with professional social gerontology. There are three components to this "paradigm": studying the movement of age cohorts across time in order to identify similarities and differences between them; exploring the interdependence of age cohorts and social structures; and examining the asynchrony between structural and individual change over time. A major concept is that of structural lag (Riley, Kahn, and Foner, 1994), which occurs when social structures cannot keep pace with the changes in population dynamics and individual lives. Women's experience of work/family stress because of the unavailability of adequate childcare programs is an example of structural lag. Using this theoretical perspective, Riley and Loscocco (1994) argue that a more age-integrated society—where activities of work, family caretaking, education, and leisure are not strictly segmented by age—can compensate for structural lag.

Critical Perspectives of Aging. Critical perspectives in contemporary social gerontology include several theoretical perspectives: the political economy of aging, feminist gerontology, theories of diversity, humanistic gerontology, and strands of social constructionism. Most social gerontologists using one of these critical perspectives are in fact engaged in critical scholarship—following Burawoy's scheme (2005), although a critical theorist may also do professional social gerontology.

Critical Gerontology. Coming primarily out of the Frankfort School of Critical Theory (Horkheimer and Adorno, 1944; Habermas, 1971), and post-structuralism (Foucault, 1977), critical theories of aging share a common focus on criticizing "the process of power" (Baars, 1991). Critical gerontology has developed two distinct patterns in social gerontology, one which focuses on humanistic dimensions of aging, and the other on structural components. Moody (1993) proposes humanistic critical gerontology has four goals: (1) to theorize subjective and interpretive dimensions of aging; (2) to focus on praxis (involvement in practical change) instead of technical advancement; (3) to link academics and practitioners through praxis; and (4) to produce "emancipatory knowledge." A second strand emphasizes that critical gerontology should create positive models of aging, focusing on the strengths and diversity of age in addition to critiquing positivist knowledge (Bengtson, Burgess, and Parrott, 1997).

Political Economy of Aging Perspective. Drawing from Marxism (Marx, 1867/1967), conflict theory (Simmel, 1908/1950) and critical theory (Habermas, 1971), the political economy of aging perspective seeks to explain how the interaction of economic and political forces determines the unequal allocation of resources, thereby shaping the experience of aging that results in older persons' loss of power, autonomy, and influence. Variations in the treatment and status of the elderly can be understood by examining public policies, economic trends, and social structural factors (Estes, 2001). Life experiences are seen as being patterned not only by age, but also by class, gender, and race and ethnicity. These structural factors, often

institutionalized or reinforced by economic and public policy, constrain the opportunities, choices and experiences of later life. The political economy of aging perspective is also concerned with how ageism is constructed and reproduced through social practices and policies, and how it negatively affects the well-being of older people (Bytheway, 1994).

Feminist Theories of Aging. Feminist gerontology gives priority to gender as an organizing principle for social life across the life course that significantly affects the experience of aging (Calasanti, 2004; McMullen, 1995). At the macro-level of analyses, feminist theories of aging combine with political economy to examine differential access to the key material, health, and caring resources which substantially alters the experience of aging for women and men (Arber and Ginn, 1995). For example, from a feminist perspective, family caregiving can be understood as an experience of obligation, structured by the gender-based division of domestic labor and the devaluing of unpaid work (Stroller, 1993). At the micro-level, a feminist gerontology perspective holds that gender should be examined in the context of social meanings and every-day experiences, reflecting the influence of social constructionism.

Social Constructionist Perspectives. Social constructionism is the second most frequently cited theoretical approach in the major social gerontology journals (Bengtson, Burgess, and Parrott, 1997). Contemporary constructionist researchers in social gerontology may be engaged in professional labor, but more frequently in critical labor. These perspectives come from a long tradition of micro-level analysis in the social sciences: symbolic interactionism (Mead, 1934), phenomenology (Berger and Luckmann, 1966), and ethnomethodology (Garfinkel, 1967). Using hermeneutic or interpretive methods, social constructionism focuses on individual agency and social behavior within social institutions—such as the family, or retirement centers—and particularly on the subjective meanings of age and the aging experience in everyday life. Researchers working in this tradition emphasize their interest in understanding, if not explaining, individual processes of aging as influenced by social definitions and social structures. Examples include Gubrium's (1993) study of the subjective meanings of quality of care and quality of life for residents of nursing homes, which explored how each resident constructs meanings from her or his own experiences. These meanings emerge from analyses of life narratives and participant observation.

This diversity of perspectives alerts social gerontologists to be concerned with the connections between scientific inquiry and the social milieu at particular points in time that influence how a subject matter is conceived. In recent years, interpretive and critical social gerontologists have called attention to these connections (Hendricks and Achenbaum, 1999), cautioning researchers to be more reflective on their own values or biases as they interpret findings, develop interventions, and make policy recommendations.

Epistemological Debates and Gerontological Values

Critical perspectives in social gerontology (including political economy of aging, feminist gerontology, and many variants of social constructionism) challenge the mainstream scientific approach as a principal source of knowledge. The understanding of meanings and the analysis of power and domination in social relations

and structures are seen as important as "objective knowledge" in the understanding of social phenomena (Bengtson, Burgess, and Parrott, 1997; Moody, 2001). Critical theory assumes that values cannot be separated from "facts" and that all research is value-laden. While acknowledging researchers' values, science assumes that objective knowledge not encumbered by values is both possible and desirable. Thus critical perspectives and the quest for emancipatory knowledge in social gerontology operate under different assumptions than positivism and science about the subject and the purpose of aging research. At the same time, there is a growing recognition that the insights provided by these nonscientific approaches about the experience of aging, what it means to grow old and be old, and about issues of social justice for the aged, have filled gaps in the knowledge base obtained through the positivist paradigm, and we feel they have enriched the field of social gerontology. An example is the contribution of Barbara Myerhoff's (1976) classic ethnographic study of Jewish elders, *Number Our Days.* Social gerontology continues to see epistemological debates surrounding different kinds of knowledge and the use of theory. However, we suggest that one way to address such differences is to regard these perspectives as providing complementary lenses that can broaden our understanding of the multiple facets of aging.

These differences in epistemology have not created hard battle lines in our field, however, in part because there is implicit agreement by most on the important goals of social gerontology, and also because the field is still young; its pioneers, some of whom are still alive, remind the field of its original vision and purpose. Coming out of its history and culture, gerontology's foundational values—to help older people and alleviate their problems—derive not so much from critical awareness as from adherence to progressive ideals and the use of science to improve conditions for humankind and alleviate suffering. Nevertheless, as the critical culture of social gerontology has evolved, these values have been complemented and explicated.

Because social gerontology developed simultaneously as an active area of scientific research, policy, and practice, researchers are often called upon to act as public social gerontologists; they must be able not only to explain the relevance of their results for improving the lives of older persons, but also to *use* their knowledge to design effective policies that will improve the lives of older people and their families. The latter mandate is epitomized by the words of Maggie Kuhn, founder of the Gray Panthers' movement and a tireless advocate for older people, in an address before the Gerontological Society of America: "We have enough research! We have enough theories! What we need are more programs to help senior citizens in need!" (Kuhn, 1983).

Examples of Public Sociology in Social Gerontology

In the following section we present four examples of "public sociology" in the field of social gerontology.

Research on Grandparents Raising Grandchildren

The issue of grandparents raising grandchildren provides one example of social gerontology's public sociology in action. Here, research on the growing number of grandparent caregivers initiated a public dialogue among older persons, service providers and interest groups, and policy researchers, eventually leading to a federal program and a range of community support programs. This process began when

demographic analysis at the early 1990s showed a surprising 44 percent increase in the number of children living with grandparents or other relatives over the prior decade (Saluter, 1992). A group of social gerontologists with backgrounds in sociology, public health, and social work began to explore qualitatively the characteristics of these grandparent caregivers and the reasons for this trend (Minkler, Roe, and Price, 1992). Guided by feminist and critical sensibilities, advocacy objectives were incorporated into the research design (Roe, Minkler, and Barnwell, 1994). The researchers involved grandparent subjects in all phases of the study as well as a community advisory group composed of local health and social worker professionals and individuals working with grandparents of young children. The goal was to maximize respondent benefit from the experience of participating in the study. The researchers shared their findings with their grandparent participants and elicited their suggestions in the development of policy recommendations (Roe, Minkler, and Barnwell, 1994).

The researchers found that more than one in ten grandparents had cared for a grandchild for at least six months, and most were engaged in an even longer-term commitment. Although grandparent caregiving occurs among all gender, class, and ethnic groups, single women, African Americans, and low-income persons are more likely to become custodial grandparents (Fuller-Thompson, Minkler, and Driver, 1997). Additional research has found that substance abuse, teen pregnancy, AIDS, and incarceration all contributed to this problem (Dressel and Barnhill, 1994; Jendrek, 1994; Minkler and Roe, 1993). It became clear that grandparent caregivers faced unique challenges with negative consequences for both grandparents and grandchildren, resulting in unmet needs for social services (Burton, 1992; Dowdell, 1995; Minkler et al., 1993; Roe et al., 1996).

Research on grandparent caregivers attracted the attention of aging service professionals, leading to the involvement of the Federal Administration on Aging and several aging interest groups, including AARP and Generations United. Cooperation between researcher, practitioner, and advocacy communities resulted in a variety of community, state, and federal programs, most notably provision for grandparent caregivers through the 2000 amendments to the Older Americans Act under the National Family Caregiver Support program.

Centers for Applied Gerontology

The Edward R. Roybal Centers for Research on Applied Gerontology is a second example of public sociology in social gerontology. Authorized by Congress in 1993 and sponsored by the National Institute on Aging, the Roybal Centers' mandate is to move social and behavioral research findings out of the laboratory and into programs, practices, and policies to benefit the lives of middle- and older-aged people and their families (National Institutes of Health, 1997; Pillemer et al., 2003). The Roybal Centers reflect a growing interest by federal agencies in translational research: translating basic behavioral research findings into research interventions to improve real-world practices (National Institute of Mental Health, 2000). There are currently ten Roybal Centers for Research on Applied Gerontology (National Institute on Aging, 2004). Located at major universities and research institutions, each Center focuses on a different thematic area (such as mobility and driving, enhancement of late-life functioning, social support and involvement in meaningful roles, exercise adherence, compliance with medical orders, and use of technology).

Reflecting the aims of a public sociology, the Roybal Centers interact with multiple publics. Protocols for each Center call for broad-based expertise involving collaboration across disciplines as well as between researchers, practice professionals, and older people and their families. Several projects feature collaboration between scientists and organizations involved with older people, such as healthcare agencies, community-based services, state and local government agencies, the AARP, and others. Findings from some of the research are being tested at several large organizations that have an interest in more effective ways to meet the needs of older people, as employees and as consumers (National Institute on Aging, 1993).

Participatory Action Research. A third example of public sociology is participatory social gerontology. Biggs (2005) reports that gerontological researchers in the United Kingdom are more frequently turning to older participants in their studies as a way to examine the lived experiences of elders in an environment of growing concerns over the distribution of government resources and equity between age groups. This is part of a larger effort toward more participatory research in program development and evaluation that gives more control and ownership to those being investigated (Evans and Carmichael, 2002). In the United Kingdom there is increasing recognition of the importance of involving elders and other service users in service planning and policy development (Department for Work and Pensions, 2004). Older people are acknowledged to have direct insight into the effects of services, and this insight can provide policymakers with evidence that is not biased by professional interests (Biggs, 2005). Involving older people in research and service planning can uncover stereotypic assumptions. For instance, the Older People's Steering Group (2004) found that many policy and practice assumptions are still based on seeing older people as a burden or as patients whose rights are annulled by their need for health and social services. Equally unacceptable is to conceptualize "successful aging" (a term currently in vogue in both the United Kingdom and the United States) as a continued ability to compete with younger people in physically demanding activities. The group recommends that older people should have the strongest voice in deciding what makes a good quality service, and whether it is being delivered.

Feminist Gerontology. As a final example of public social gerontology, Ruth Ray (2004) presents the case for a feminist gerontology that is more self-reflexive, urging feminist gerontologists to become more self-conscious about their age identities and the images of aging that underlie their own work. Feminist gerontologists are concerned with the extent to which the standpoint of the researcher—in terms of age, health, place in the life cycle, race, gender, class—affect what is being studied and how the findings are interpreted and reported. For example, in caregiver research that may involve collaborating with caregivers to create the meaning of care, feminist researchers needs to be aware of their own ideas and fears about the care recipient's illness, such as Alzheimer's disease, lest the care recipient be seen as a victim whose identity is defined only by his or her disease and the problems it causes for others (Ray, 1996).

Feminist gerontologists are also concerned with the role of the elderly as research subjects and the extent to which their lived experiences and understandings are incorporated into the development of knowledge in social gerontology. In another instance of engaging in public sociology, feminist gerontologists would feel obliged to question whether academic research and practices might contribute to

older people's adaptation to conditions that really should be changed. And finally, Ray (2004) suggests that feminist gerontologists need to address the general public in their writing and work toward improving the image of old women in the larger culture—that is, to engage in organic public sociology.

Why Social Gerontology Is an Exemplar of Public Sociology

There are several reasons for social gerontology's success in doing public sociology: (1) its experience with working in multidisciplinary teams, (2) its ability to advocate "professionally" for its publics without favoring one group at the expense of another, (3) the unique affinity of its scientific theories and practices with its disciplinary values, and (4) the constructive effects of its continuous questioning of values and ethics.

First, researchers in social gerontology often work in multidisciplinary teams, which might include sociologists, psychologists, social workers, biomedical practitioners, epidemiologists, and others. As Burawoy (2005) notes, the development of public knowledge often comes about through multidisciplinary collaboration, particularly, "participatory action research" that brings communities together with academics from complementary disciplines, where a community defines the issue. Such collaboration between researchers, practitioners and those they serve has marked gerontology since its inception. Working with researchers and practitioners in other disciplines has several advantages. Practitioners may help sociologists determine which problems are "worth solving," creating a didactic connection between research and practice. Also, the experience of communicating across disciplinary boundaries has given social gerontologists tools that may assist them in working with various publics. In addition, working in multidisciplinary teams affords an efficient division of labor in terms of engaging with various publics. Other fields that have traditionally placed a large emphasis on creating change and improving social welfare, such as public health, social work, or public administration, may be in a better position to draw the attention of the public or relevant interest groups and to advance practical applications of sociological findings.

Second, while social gerontology advocates for the well being of older people, in general it refrains from overt political or activist confrontation that can offend its diverse publics. Because older people vote in large numbers and are backed by strong and stable political organizations that actively promote their interests (Binstock and Quadagno, 2001), other activists or lobbying organizations, such as AARP, take on many of these advocating tasks, calling upon social gerontologists for their expert knowledge. Social gerontology recognizes that social science researchers can approach problems and raise issues from various theoretical or epistemological perspectives in a professional manner. When it does support a specific group, such as caregiving grandparents, it typically attempts to do so without denigrating another group or public. Indeed, because the best social gerontological research is likely to consider the motives and interests of all groups (e.g., concerns of healthcare providers and workers in addition to the concerns of older people), researchers are not put in the position of "taking sides."

Social gerontologists do report their research findings to nonacademic audiences. As an example, in a recent issue of *Contexts,* Lisa Berkman (2004) reports a widening gap between the health of the rich and the poor. Berkman is not working to

organize the working poor, nor is she advocating that we develop any specific health care program. However, she is drawing attention to a serious issue and generating debate by suggesting that health in the United States will continue to lag behind other industrialized nations until we address health care coverage for low-income Americans.

Because all of us will eventually be old, social gerontology has focused on issues that affect individuals across the lifespan. Social gerontologists are not only advocates for the elderly, but advocates for all generations, which can lead to successful aging across the lifespan.

Furthermore, the emphasis on diversity and inequality across the lifespan has led social gerontologists to focus on the needs of multiple age, race, ethnic, and income groups.

Third, research in social gerontology can be, and usually is, guided by both scientific theory and values. To suggest that professional sociology is guided exclusively by theory and public sociology exclusively by morals—even as ideal types—in fact emphasizes an unrealistic boundary between professional and public sociology. In reality, as critical sociologists have pointed out, even professional sociologists are likely to include some values and/or morals in their choice of research questions and interpretation of results. Certainly most social gerontologists are concerned about the well being of older people and trying to solve the many problems associated with aging. Sociologists interested in aging, or in any subject area, bring a lifetime of experiences to their work, as well as values, even when that work is driven by scientific explanation. Based on our experience in social gerontology, we believe good public sociology can balance the claims of objectivity and values and examine research findings in light of moral dilemmas without compromising veracity.

If it is public sociology that keeps sociological passion alive, as Burawoy (2005) believes, than it is social gerontology's commitment to help older people and solve the mysteries of age and aging that energizes and inspires, whether the domain is professional, critical, policy, or public. Professional social gerontology does not require a public social gerontology to infuse it with values and passion.

Fourth, researchers in social gerontology have engaged in continuous debates over values and ethics, sometimes heated, yet this has also stimulated ideas and new directions for research. Many of these debates have focused on quality of life and end of life dilemmas, often because these issues raise the specter of limited medical and public resources and economic burden. One of the major debates in our field concerns relations between age groups and the fair distribution of public resources—that is, issues about generational equity. What do we owe the generations that came before us and what do we owe those that will follow us? Is there, or should there be, a balance between what we give and what we receive? This debate has been enriched by dialogue between researchers (Preston, 1984; McKerlie, 2001), interest groups (Americans for Generational Equity, Generations United), the press (Kristof, 1996; Samuelson, 2005), and the public. Thus the critical evaluation of ethical and moral issues has been salient in our field. It is unlikely that we will ever reach a consensus on this ethical and moral dilemma, but the presence of public discussion reminds researchers to be judicious in their policy recommendations and to be aware that benefits to one age group may come at a cost to others.

It is unrealistic to think that as public sociologists we can operate from a common values base, as Burawoy (2005) has suggested. It is easy enough to say we oppose the "erosion of civil liberties, the violation of human rights, the degradation of the environment, the impoverishment of the working class, the spread of disease, the exclusion of ever greater numbers from the means of their existence, and deepening inequalities" (Burawoy et al. 2004: 125). However, as Nielsen (2004) has observed, the decisions involved in making changes and creating improvements in people's lives are far often more complicated and difficult. To use an example from this paper, should the goal of research on grandparent caregivers be to help the caregivers or the children they care for? How should limited resources be distributed? These are not easy questions, and answers can only be found through discussion and negotiation with the multiple publics and stakeholders.

Conclusion

We have argued that social gerontology represents a model of public sociology in action. Social gerontology is a young field with a short history, yet its focus on increasing the well-being of older persons has guided its development in a way that has helped it achieve the goals of public sociology. However, there are several differences between social gerontology and sociology, as it has been described by Burawoy (2005). First, social gerontology is inherently multidisciplinary, built on sociology but borrowing from psychology, social work, biomedicine, demography, and public health as well as other fields. Second, research in social gerontology has blended professional, critical, policy, and public sociologies to a considerable degree so that they often work as an organic whole. The template of four sociologies with four distinct publics, even as ideal types, does not neatly overlay the division of labor and epistemological perspectives of social gerontology.

Third, social gerontologists, perhaps because of their experience with applied scholarship and practice or their strong policy orientation with its focus on the art of the possible, are less likely to be moral crusaders. This may be because the broader field of gerontology, including social gerontology, is overwhelmingly scientific, which tends to dampen a critical activism or expressions of moral outrage. It may also be a matter of style. Working in a multidisciplinary field with multiple publics, social gerontologists have learned to negotiate, to be diplomatic. At the same time, researchers in social gerontology have engaged in debates about values, ethics, and morals, necessary for generating new ideas and forming a consensus and foundation for any successful effort that seeks to improve well-being.

As a multidisciplinary field engaged in basic as well as applied research, social gerontology routinely reaches beyond the academy to engage with, and sometimes create, its publics: older people and their families, students, practitioners, interest groups representing the elderly such as AARP, community-based programs, healthcare organizations, government agencies, schools and churches, and others. This is a continuous interactive process. Social gerontologists engage in public sociology (op-ed pieces, speaking to community organizations, testifying before congress), although most do not directly agitate for change or challenge existing structures.

In many ways, these differences between social gerontology and sociology have allowed social gerontologists to be successful in the two primary goals of public

sociology: engaging multiple publics and working toward improvements in well-being. In an aging world, social gerontology is a dynamic and increasingly important multidisciplinary scholarly and applied field. We believe it has a great deal to offer sociologists as a model of public sociology in action.

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