

Executive Summary: SGS Priorities Survey 3.0



OVERVIEW

The Southern Gerontological Society (SGS) Survey Subcommittee disseminated the first Society-wide SGS Priorities Survey in 2018. Recommendations from this initial survey led to substantive outputs, including the development of dedicated conference tracks, a peer-reviewed publication with subsequent presentations, a webinar series, and the establishment of the Gerontological Education and Advocacy Committees. To capture evolving regional needs, the survey subcommittee has repeated the priorities survey every three years. This executive summary outlines Survey 3.0's methodology, content, respondent demographics, key findings, emerging organizational priorities, and recommendations for future action.

SURVEY DESIGN

The survey was developed in Qualtrics and distributed to SGS members and stakeholders across three scheduled email campaigns in July and August of 2024. Of the 211 individuals who began the survey, 87% (N=185) completed all questions.

The survey had a total of 14 questions. Questions 1 through 5 asked respondents to rank the five most important topics in each category using a scale from 1 (least important) to 5 (most important). Topics were listed alphabetically within five categories related to aging in the South: Health and Well-Being (13 topics), Environment (16 topics), Society (9 topics), Technology (12 topics), and Emerging Concerns (12 topics). Each category also included "Other" to allow respondents to write in additional topics of personal or professional relevance.

At the end of each category section, respondents were invited to provide an open-ended response describing their personal or professional experiences that may have influenced their rankings. Questions 6 and 7 were also open-ended, asking respondents to identify the highest priority SGS should address over the next three years and to describe the role SGS should play in addressing these priorities, respectively. The survey concluded with demographic questions, including SGS membership status, profession, state they reside in, geographic location, gender identity, race, and ethnicity.

DATA ANALYSIS

To analyze topic scores for Survey 3.0, means were calculated for each category (Questions 1-5) from completed surveys (N=144). A score of 1 was given to a topic perceived by respondents as least important, while a topic given a score of 5 was perceived as highest importance. Open-ended responses from Survey 3.0 were uploaded into MAXQDA24 qualitative analysis software for systematic coding. We also conducted a comparative analysis of responses from Survey 1.0, Survey 2.0, and Survey 3.0 to understand the longitudinal trends across the three datasets.

RESPONDENT DESCRIPTION

Demographic questions at the end of the survey addressed respondents' SGS membership status, profession, gender, race and ethnicity, geographic location, and state of residence. The majority identified as female (73%), white (69%), and not Hispanic or Latinx (96%).

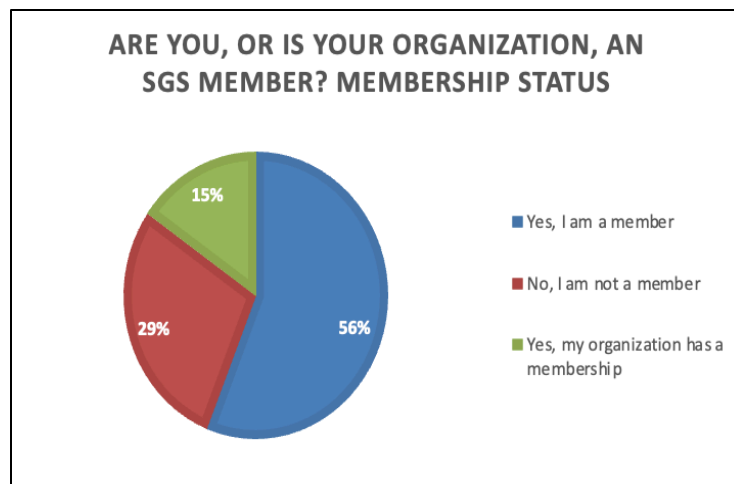


Figure 1. Membership

Fifty-six percent were individual SGS members, 15% held an organizational membership, and 29% indicated that they were not members. Professionally, most respondents reported being educators (44%), followed by researchers (33%) and practitioners (31%). Respondents were allowed to select more than one professional identity. For example, some selected both a student and a practitioner or retired and an educator.

Eighteen U.S. states are represented, with the highest concentrations from Georgia (22%), North Carolina (18%), and Virginia (17%). Approximately 93% of the responses reside in 11 states within the southern region of the U.S. The remaining 7% reported living in California, Iowa, Nebraska, New York, Ohio, Pennsylvania, Wisconsin, and countries outside the U.S.

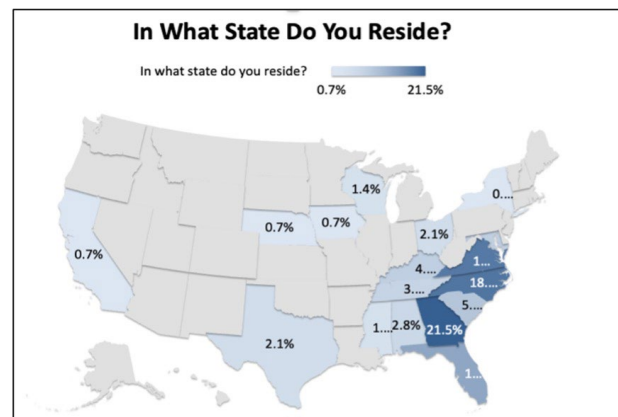


Figure 2. Residence

PRIORITY ISSUES & ROLE OF SGS

Findings from Questions 1 through 5 offer insight into the evolving priorities of SGS members and stakeholders. The top three topics within each category and additional topics of importance are summarized in Figure 3. A full description of the quantitative and qualitative results from each category are provided in the Full Report.

Health and Well-being <ul style="list-style-type: none"> • TOP 3: 1) cognitive impairment/dementia, 2) chronic illness, 3) mental health • <i>Additional Topics of Importance:</i> health literacy, end-of-life, health disparities
Environment <ul style="list-style-type: none"> • TOP 3: 1) affordable housing, 2) aging-in-place, 3) social isolation • <i>Additional Topics of Importance:</i> transportation, long-term services and supports, other housing issues (e.g., accessibility and quality)
Society <ul style="list-style-type: none"> • TOP 3: 1) poverty and income inequality, 2) informal/formal caregiving, 3) elder abuse/neglect/exploitation • <i>Additional Topics of Importance:</i> minority aging, role of faith communities as a support resource, representation through voting access
Technology <ul style="list-style-type: none"> • TOP 3: 1) personal assistive technologies, 2) personal mobility aids, 3) internet access • <i>Additional Topics of Importance:</i> telehealth, medical alerts, mobile technologies
Emerging Concerns <ul style="list-style-type: none"> • TOP 3: 1) loneliness, 2) funding for aging programs, 3) aging services workforce (eg., size, capabilities, training) • <i>Additional Topics of Importance:</i> income, Medicare, advanced care planning

Figure 3. Summary of Results from Categories 1-5

A top 10 list was created by ranking all topics in the survey from the highest to the lowest based on their total mean scores (Table 1). There were three ties, meaning that two topics had the exact same mean score, therefore there are a total of 11 topics on the list. Notably, there was representation from each of the five categories.

Table 1. Overall Rankings in Survey 3.0

Overall Ranking	Topic	Average	Category
1	Affordable housing	4.55	Environment
2 (tied)	Loneliness	4.46	Emerging Concerns
	Cognitive impairment/dementia	4.46	Health & Well-Being
4	Funding for aging programs	4.42	Emerging Concerns
5 (tied)	Personal assistive technologies (e.g., hearing aids, glasses, grabbers)	4.35	Technology
	Aging in place	4.35	Environment
7	Social isolation	4.33	Environment
8	Poverty and income inequality	4.31	Society
9	Transportation	4.30	Environment
	Long-term services and supports (LTSS)	4.28	Environment
10 (tied)	Aging services workforce (e.g., size, capabilities, training)	4.28	Emerging Concerns

Note. More than ten topics are listed in Table 6 due to ties for the second, fourth, and eighth rankings. Bolded rows indicate ties in ranking.

In Question 6, respondents were asked to identify the highest priority for SGS to consider over the next three years. Results from Survey 3.0 confirm that stakeholder priorities continue to shift over time. Figure 1 highlights 11 topics that appeared in the Top 10 lists of two or more survey waves (Surveys 1.0, 2.0 and 3.0).

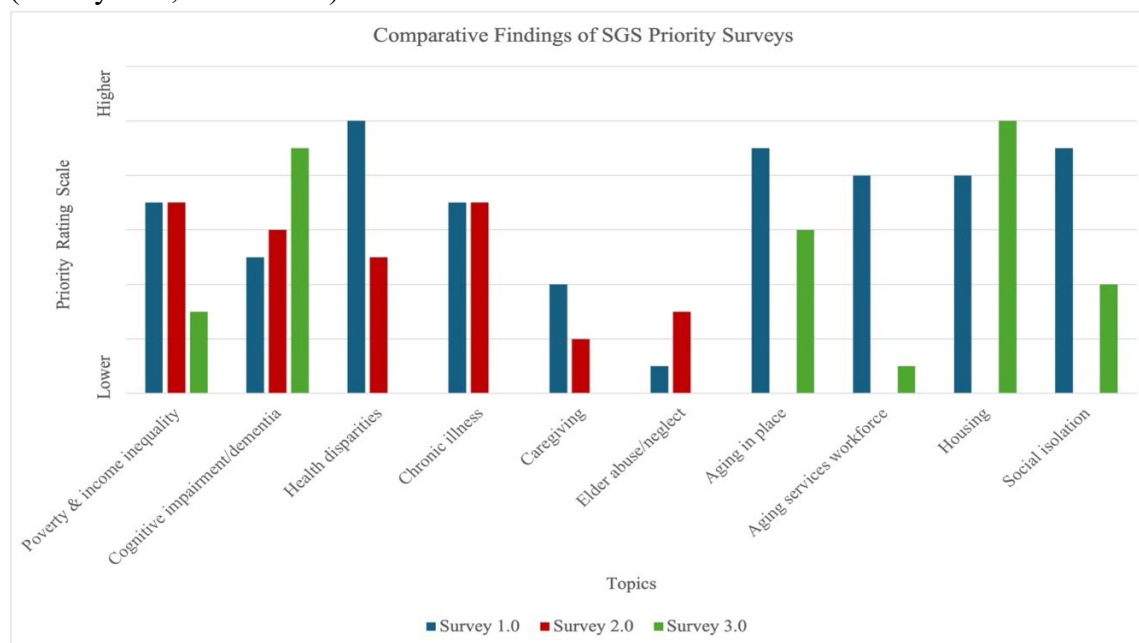


Figure 4. Comparative Findings of SGS Priority Surveys

In the bar graph (Figure 4), each topic is shown along the horizontal axis, and the bars are color-coded to represent each survey wave. The vertical axis reflects each topic's ranking, with longer bars indicating higher priority. Topics with three bars appeared in the Top 10 across all three waves, while those with only two bars were ranked in the top 10 in just two waves. This visual allows for easy comparison of how topic rankings have shifted over time. For example, *Cognitive Impairment/Dementia* has steadily increased in priority over the three survey waves while *Poverty and Income Inequality* recently decreased in Survey 3.0.

It is also essential to interpret the graph within the context of societal changes, as reflected in the qualitative survey responses. For example, while the general trend indicates that *Poverty and Income Inequality* has declined in importance over time, this view becomes more nuanced when considering the lasting impacts of the COVID-19 pandemic and the current political climate. Insights from the mixed methods analysis suggest that, although poverty is no longer ranked as highly, it remains a persistent underlying factor that influences other rising concerns, such as housing affordability and chronic health issues.

Question 7 asked respondents what role they thought SGS should play in addressing the priority(ies) they identified in Question 6. Responses to Question 7 spanned many topics such as education, training, and research, offering more detailed suggestions on ways SGS might respond. Advocacy was mentioned most frequently (48%), followed by Education (42%), Collaboration (23%), Funding (16%), and Outreach (3%). Twenty-four percent expressed that SGS should be active in all roles. Further discussion and learning are needed on the most pertinent issues identified to develop targeted strategies for areas where SGS can have the greatest impact (e.g., providing expertise, funding, etc.).

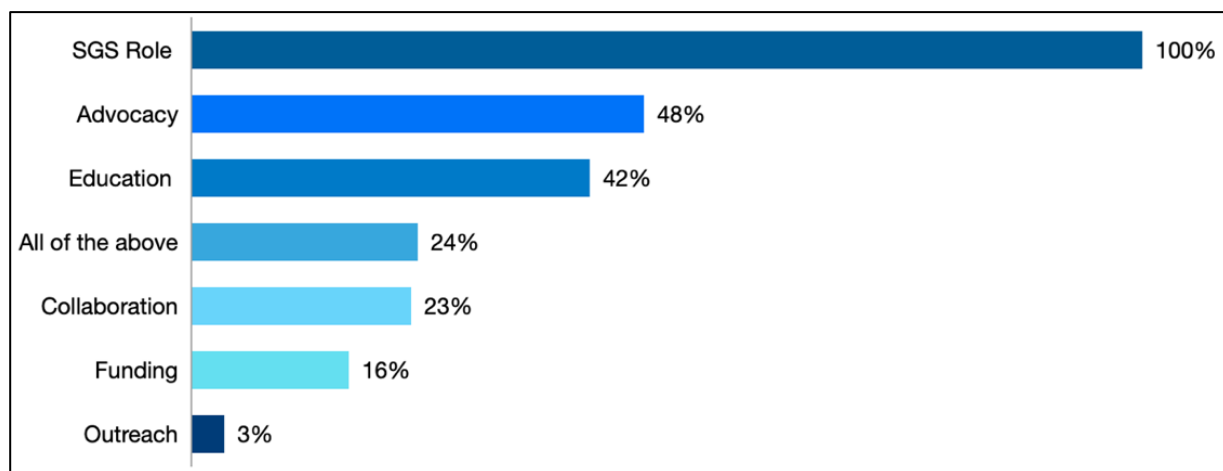


Figure 5. Results for Question 7, "What Role Should SGS Play in Addressing these Priorities?"

RECOMMENDATIONS

Based on the priorities identified in SGS Survey 3.0, the survey subcommittee offers the following recommendations, organized around five interwoven empowerment evaluation principles. The SGS Survey 3.0 Full Report further breaks down each recommendation into actionable steps to advance gerontological research, practice, and education in the southern region of the United States.

- **Recommendation 1:** Raise Awareness of Affordable Housing & Economic Insecurity Issues
- **Recommendation 2:** Promote Advancing Dementia & Chronic Illness Support
- **Recommendation 3:** Encourage Programming that Fosters Social Connection and Community Belonging
- **Recommendation 4:** Advocate for Expanded Access to Aging Services & Funding
- **Recommendation 5:** Foster Inclusion Across Regions & Populations
- **Recommendation 6:** Conduct SGS Priorities Survey every three years to track evolving priorities that guide SGS's strategic planning, programs, and advocacy efforts

