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From the Editor

We are very fortunate to have a new institutional home for *Contemporary Rural Social Work*, The University of North Dakota at Grand Forks. The University of North Dakota is located in one of our most rural states, and has a long track record of involvement with rural issues.

Our goals are to have the Journal function as a publication site for rural research and theoretical articles related to rural social work, as well as for short articles related to social work practice in rural areas by practitioners. We also will add case studies related to rural social work and other teaching materials as these are received. The reason for the addition of teaching materials is that there are many sources for urban materials and few sources for rural social work.

Photographs and poetry related to rural issues are also of interest as are other materials that relate to the infinite variation of the rural experience.

We anticipate that we will be able to publish two to three issues a year.

Peggy Pittman-Munke, Editor-in-Chief
A Conceptual Model for Rural Social Work

Michael R. Daley

Abstract: As long as social workers have considered rural social work unique from other fields of practice there has been a search to capture the essence of rural social work. Is it a rural-urban dichotomy, is it geographically or community bound, and what are the principles that guide rural practice? Answers to these questions are important to education for future social workers and rural practice. The author examines key issues in rural social work and their influence on rural social work.

Introduction

Since the 1970s a growing body of literature indicates that social work with rural populations has enough unique characteristics to be viewed as a distinct field of professional practice. In this regard social work with rural populations differs from similar types of work with urban groups in significant ways (Carlton-LaNey, Edwards, & Reid, 1999; Ginsberg, 2005; Johnson, 1980; and NASW, 2006). Yet despite the growing belief that rural social work is somehow distinct, the profession still struggles with how to frame those differences, and the literature contains some interesting contradictions.

The idea that rural social workers view their field of practice as fundamentally different from their urban colleagues is not surprising. Mellow’s (2005) work on rural professionals indicates that they typically do differentiate themselves on a number of dimensions from their urban peers. The classic dilemma in which social workers find themselves is that the impersonal aspect of the relationship and the formal expertise emphasized in the professional model of helping are often in conflict with social norms of rural communities that value personal attributes and reliance upon those relationships for help.

Professional education, particularly in social work, has derived from urban models and is often centered in urban areas (Daley and Avant 1999; Daley and Avant, 2004). Since social workers enter the profession through formal education, if the models of professional education and often the centers of professional education focus on work with urban populations, what is the best way to adapt the preparation of social workers to best fit rural practice? If we do not adapt our models and methods of preparation for rural social work, then we are leaving many social workers to figure this out on their own, a very non-professional way to proceed. If we cannot or do not specifically identify the differences between working with rural and urban populations, then one may ask are these areas of practice really so different?

The answers may lie in how we define and conceptualize rural social work. The purpose of this paper is to address some of these issues by examining the concept of rural social work and the different ways in which it is viewed, by exploring the theoretical models upon which rural practice may be based, and by making suggestions for an integrative approach that resolves some of these apparent contradictions.

Defining Rural Social Work

One of the key issues that must be considered in any discussion related to rural social work is how the term “rural” is defined because rural can have many connotations. There are multiple definitions of rural, and all of them are more or less appropriate for use. Unfortunately, some confusion and even contradiction can be generated when “rural” is used as a unitary concept without adequate explanation of the definitional context in which it is used. In others words, it may sound like we are talking about the same thing under the rubric of rural when we may be discussing either similar or even very different kinds of concepts.
Perhaps the most appealing definition of rural is the absolute approach based on population size. This type of definition relies on a population threshold that makes rural urban classification of communities relatively straightforward. Thus, a community is clearly rural or urban. Even here we are confronted with varying population thresholds.

Olaveson, Conway and Shaver (2004) discuss three population thresholds that are in use at the present time. These thresholds include 2,500; 50,000; and one based on population density that was introduced in the 2000 census. Thus, once a community rises above an arbitrary population figure or density, it no longer is considered rural. So if a community reaches 50,000 or 50,001, it becomes metropolitan, yet if it is only 49,999, it is non-metropolitan. One may speculate whether a variation of one, ten, a hundred, or even a thousand is a meaningful difference in determining a distinction in the characteristics of a metropolitan or rural community. An additional concern is that the use of this type of absolute method for community classification as either rural or urban has led us to reinforce the idea that the rural and urban classification for communities is a dichotomy.

While these population thresholds produce an apparent level of certainty about whether a community is rural or not, they only partially address the kinds of issues that are most relevant for most rural social workers. Social workers are more concerned about the behavioral effects on individuals, families, and groups; organizational structures; and community activity that result from the rural community than they are about its actual size. While there is a general belief about the association of community size with its structure and functioning the nature of this association fairly general. Thus, absolute numbers do not give us a good picture of the community because communities are very complex entities composed of a number of elements. For a clearer picture of what matters to social workers, we may also need to consider sociological definitions of rural.

The term “rurality” has been used by sociologists for over forty years to refer to the type of community that exhibits rural characteristics (Bealer, Willitis, and Kuvesky, 1965). The concept of rurality assesses communities in structural terms. The rural community is then composed of the structural dimensions of occupations, ecology, and sociocultural elements. This is a relativistic definition of rural (Bealer, Willitis, and Kuvesky, 1965) that some would argue taps the kinds of issues that confront social workers in rural practice directly.

The occupational aspect of rurality examines the types of employment by suggesting that rural communities have higher concentrations of workers who confront the physical elements and convert its products into economic goods. Agriculture, hunting, fishing, and logging would be examples of this type of activity. The ecological component of rurality examines the distribution of people across a geographic area. The belief is that these density patterns affect a number of characteristics like anonymity, division of labor, heterogeneity, social interaction, and symbols of status (Bealer, Willitis, and Kuvesky, 1965). The sociocultural dimension of rurality consists of both culture and patterns of social interaction. This would include norms, ideals, and patterns of communication.

Daley and Avant (2004) and Olaveson, Conway, and Shaver (2004) have discussed the concept of rurality in social work. Daley and Avant (2004) indicate the use of a relative definition of rural community based on a person-in environment perspective is well suited for rural social work. Olaveson, Conway, and Shaver suggest continued refinement of the use of the absolute population density measures to make the assessment of the “rurality” of an area more accurate. Clearly for social work purposes, we must consider both absolute and relative measures to accurately reflect the type of variables critical to social work with rural populations.
Having considered a basic framework for assessing the rurality of a community, this paper moves on to consider how to social work with rural populations may be conceptualized. This discussion will focus around two major issues. First, is rural social work practice a function of community or population? Second, what is a good model for understanding rural social work?

**Rural Social Work: Revisiting the Concept of Practice**

Perhaps the most basic dialogue in the field of rural social work is the one that contrasts rural social work as social work in a rural community with one that defines rural social work as social work with rural populations. One school of thought is that rural social work is generally confined to rural or small communities. Many of the more recent publications on rural social work contain this concept in their titles (Carlton-LaNey, Edwards, & Reid, 1999; Ginsberg, 2005; Scales and Streeter, 2004). This perspective leads social workers to focus on aspects of resource development, building on community strengths or assets, and community building.

Daley and Avant (2004) take a more inclusive perspective is that rural social work is work with rural people, wherever they are found. This approach suggests that rural people may be found in communities that may not meet the general definitions of small towns or rural communities. Thus populations who identify themselves as rural and exhibit rural culture, norms, and behaviors may be found in pockets in urban communities, rural areas that have been absorbed by urban encroachment, or in rural communities that have experienced recent growth. Even though people have changed their location or the environment has changed, these populations still approach life and seek help from a rural perspective. One example of this could be found in the Gulf Coast area in the Southeastern United States. Many residents there grew up in rural communities that were heavily dependent on fishing and agriculture for employment. The growth of tourism and resort development has fundamentally changed this region in several respects although the rural culture of the residents often remains.

The idea that rural social work is social work with rural populations compatible to the perspective of rural social work as work in rural communities. Clearly many rural people live in these rural communities and even many states still have significant rural populations (Lohmann and Lohmann, 2005). But communities are rarely entirely homogeneous and elements of rural communities often exist with urban areas and vice versa (Mellow, 2005).

The rural population approach to rural social work suggests a broader array of interventions and areas of interests because social workers are working with individuals, families, groups, and organizations as well as communities. Schnore (1966) suggests that the rural-urban variable exists on at least two levels, that of the community and that or the individual. Social workers in developing generalist models of practice expand the areas of interest to five systems including individuals, families, groups, organizations and communities. Since there is broad agreement that a generalist model is the one best suited to rural social work, (Daley and Avant, 2004; Ginsberg, 2005; NASW, 2006; and Locke and Winship, 2005) a model of practice that embraces all of these systems seems most appropriate.

**Rural Social Work: Revisiting Models of Practice**

The preferred model for rural social work appears to be related to the way in which this field of practice is conceptualized. Authors who view this field as a community issue tend to favor community based models of intervention, while the population perspective suggests a broader based range of interventions – usually a generalist approach. A brief discussion of these models appears appropriate at this point.
Martinez-Brawley (1993) suggests a community oriented approach to rural social work that includes integration of services and use of informal as well formal helping networks. Belanger (2005) views rural communities as in need of financial, physical and human capital. She suggests that social workers use the social capital that exists within rural communities to promote positive changes for the community. White and Marks (1999) present a strengths-based model for rural practice that emphasizes building capacity within the community for development activities. Jacobsen (1980) also presents a model of rural social work that is based on community development.

What these models of rural social work have in common is a shared focus on work with the rural community in order to strengthen the ability to solve local problems. In essence all suggest that a form of locality development based on varying assumptions as the preferred method for rural social work. Unfortunately, these community based approaches to practice offer little specific guidance to social workers in rural practice who are engaged in direct practice with individuals, families and groups.

NASW (2006) in its policy statement on rural work recognizes that social workers are well suited to helping rural people with their lives, sustaining their families, and use their strengths to make a positive change in their lives. Daley and Avant (2004) present a model of rural social work that is based on a systems-based strengths perspective that incorporates social exchange theory. In this model social systems provide the framework for understanding problems and developing strategies for addressing them. Social exchange theory provides a basis for understanding the dynamics the interactions and behavior within and between systems. The strengths perspective adds an overall approach for using and building strengths in rural systems that are too often viewed as deficient or dysfunctional.

The model present by Daley and Avant (2004) is broad based and gives a framework work working with individuals, families, groups, organizations, and communities. While this model includes community based social work as a method of intervention, it provides a framework for direct practice as well. In addition, this approach appears quite consistent with the generalist model of social work that is recommended for rural social work.

Rural Social Work: The Paradox

Rural work is a field of practice about which we have learned much in the last thirty years. Yet, there is much we still need to learn in order to address some paradoxes about our understanding of this field. Perhaps the most perplexing of these paradoxes is the lingering question – Is rural social work a distinct field of practice? Despite the volumes literature that has been written in recent years there is still not consensus on the answer to this question.

Several sources are quite clear in their support for rural social work as a field of practice distinctive from other fields of practice (Ginsberg, 2005; Lohmann and Lohmann, 2005; NASW, 1999). Usually this distinction is framed in terms of a rural-urban comparison. However, others are just as clear in their position that there is little difference between rural and other types of social work (Memerstein and Sundet, 1998; York, Denton, and 12 Moran, 1998). In fact, Ginsberg (2005) who lists eleven basic principle of rural social work begins his discussion with “the first important principle is that social work with rural populations …is simply good social work”. This raises the question – Is there really a difference?

It is likely that question is generated by the way in which it is being framed. If one looks at through the lens of a rural-urban dichotomy, there should be differences between the two that are clearly evident. These differences should manifest themselves in obvious differences in the way the rural and urban social works go about the business serving people. But clear differences of this kind do not appear to exist. The important question is why?
The most likely answer is that the rural-urban concept is not a dichotomy. Rural and urban communities rarely exist in the real world in a pure form and elements urban communities can be found in rural communities and vice versa. For example post offices which operate across the country are bound by formal policies and procedures from which they are not free to deviate. Formal policies are more characteristic of urban communities, yet small town post offices are bound by them too. The same may be true of other organizations and institutions that operate from a national, state, or regional base. If rural communities are not pure in type, then the differences between rural and urban communities should be less pronounced. By extension the differences expected between rural and urban social work may not be as great as one might expect.

Gemeinschaft and Gessellschaft is an important sociological theory that is used to explain the differences between rural and urban communities. Gemeinschaft is associated with rural communities and their emphasis on personal relationships. Gessellschaft is associated with the impersonal relationships characteristic of the urban community (Martinez-Brawley, 1990). Yet Mallow (2005) states that that Gemeinschaft and Gessellschaft communities rarely exist in pure form. Rather elements of each type of community tend to become part of the other resulting in a blended type of community.

As communities are truly neither rural nor urban it becomes necessary to talk of a rural-urban continuum rather than a dichotomy. Then communities should be assessed on a Gemeinschaft-Gessellschaft continuum as well.

**Conclusion**

How does the foregoing affect the concept of rural social work? One must consider that if communities are a blend of rural and elements that this affects the practice of social work with either communities or populations classified as rural. In addition if blending is part of the character of a community, then some degree of blending is likely occurring in rural social work practice.

So while it may seem contradictory to discuss rural social work practice as just good practice while identifying distinct principles of rural social work, there is really no inconsistency. Indeed good social work practice and principles cut across all areas of practice. But as many authors correctly discern, there are a number of ways that good social work must be adapted to be most effective in work with rural populations and communities. The adaptations usually specify learning the culture and communication patterns of the community, paying attention to specific areas of ethical risk such as dual relationships, and becoming a generalist and developing a wide range of intervention skills. While these kinds of adaptations may not appear major to some, they often require a great deal of learning and change on the part of the social worker. But focusing on the rural aspects of practice are essential to the delivery of effective services, much as professionals must adapt their practice to effectively help in social work with children, mental health, or the elderly.

This paper has revisited the concept of rural social work as presented in the literature. What has been proposed is that rural social work is a field of practice that is directed towards work with rural people as well as work with and in rural communities. While many definitions of rural community are based on absolute population numbers, it is often more useful to consider more relativistic definitions of rurality. Models of rural social work often emphasize work with the community, yet a broader based model for working with all of a population’s systems is more consistent with the generalist approach that this recommended in the literature. The rural-urban dichotomy in community and in rural practice that is frequently discussed is likely an oversimplification and most communities and populations contain some elements of blending. Hopefully this discussion has contributed to a better understanding of rural social work so that we can continue to develop new approaches and ideas, and advance this field of practice.
References


**Author’s Note**

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FOREVER CHANGED: THE TRANSFORMATION OF RURAL AMERICA THROUGH IMMIGRATION

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ABSTRACT: This qualitative case study reveals the impact of immigration on one rural Midwestern community and its longtime residents. The 123 phone interviews and sessions conducted with two focus groups provide compelling insights into residents’ perceptions of immigration and immigrants as well as their ensuing personal and collective struggle with and adaptation to an immigration process that forever changed the community. The residents offer prudent insights for policy makers, immigrants, and other communities facing similar challenges. While the focus of the study is on the macro conversion of the community through the eyes of its residents, the author stresses the need for social workers to refresh their professional roots in community organization and highlights the vital role they play in helping communities adapt effectively while negotiating the needs of residents and immigrants alike.

INTRODUCTION

America is a country founded by immigrants yet one that has repeatedly revolted against them. The country’s historical struggle with its dependence on immigrants and the love-hate relationship surrounding related issues is real. Yet one cannot overlook the reality that “the impact of immigration on the economy and on society is shaped not only by characteristics of immigrants themselves, but also by basic features of the society that those immigrants have joined” (Reitz, 2002 p. 1). As rural communities pursue business ventures to revive their sagging economy, counter population decline, and maintain political representation, the consequences of this pursuit often include a flood of immigrants, migrant workers (documented and undocumented), and refugees that bring with them an overwhelming number of social needs that communities are unprepared for. It is a forced relationship that neither group really wants, but desperately needs to negotiate in the interest of survival. This negotiation process presents the social work profession with an opportunity to refresh its roots in community development and organization, while mediating the competing needs of residents and immigrants.

This study takes place in Lexington, Nebraska, which was once a typical rural community—predominantly white, agricultural, with a middle- to lower-class population. A meatpacking plant moved to the town in the early 1990s and initiated the recruitment and employment of a large wave of immigrants. This event propelled the community into a historic change. The company employed over 2,000 workers, causing an eventual demographic shift and a total reversal of majority and minority groups. A special census was requested by city officials and conducted in February of 1993. The results of the census showed that in a little over two years this community had grown from 6,011 to 8,544, “an increase of 1,943 or 29.6%” (Gouveia & Stull, 1997, p. 3). In 1990 Caucasians made up approximately 97.74% of the total population in Lexington, while Hispanics were only .0498%, Blacks .00045%, and other races .0163% of the total population (Census Bureau, 1990). Within ten years the county seat grew from an agricultural community of about 6,011 in 1990 to a spectacular 10,011 in 2000 (Census Bureau, 2000). In 2000, Whites made up 46.3%, Hispanics 51.2%, Blacks 1.17%, and other races 30.8% of Lexington’s total population (Census Bureau, 2000). However, according to city officials, the census is inaccurate, as a substantial number of immigrants are not recorded due to their lack of participation (cause by fear of government crackdown) and inability to understand official forms and documents.
The purpose of the study is to tell the story of Lexington as voiced by long-term residents, gain a deeper understanding of their experience, and offer insights that can benefit other communities. Despite the community’s pursuit of the meatpacking company and its preparations for the imminent changes involved, Lexington found itself unprepared for the immigration process that unfolded. The study is significant as it provides helpful lessons for lawmakers, communities, and social institutions facing similar challenges. It is especially important to generalist social workers who “…engage in a planned change process …respect and value human diversity …identify and utilize the strengths existing in people and communities …. [and] seek to prevent as well as resolve problems” (Suppes & Wells, 2003, p. 7).

**Literature Review**

Immigration is not a new phenomenon, and public perception of immigrants and their impact on municipalities is no different today than it was in the early development of our American nation. Moreover, community work and the assimilation of early immigrants into American society are at the very roots of the social work profession. The book *Twenty Years at Hull-House* chronicles the early struggles of European immigrants and the heroic efforts of Jane Addams, who pioneered the settlement house movement to promote their adaptation to the new world (1998). Sidel’s introduction to the book notes how the very definition of the term “American” has evolved from its original reference to Anglo or White Anglo-Saxon Protestant individuals (1998). It narrates the challenges facing early immigrants, the harsh stereotypes they confronted, and their impact on American cities in the late 1800s. The first few waves of immigrants coming from Germany, Ireland, and Scandinavia were already established when the poorer Italian, Polish, and Balkans entered America and struggled with social and economic conditions (1998). Jane Addams advocated empowering communities to address social change. This advocacy is echoed in the International Federation of Social Work (IFSW) definition of social work, which also focuses on the macro role of social workers and states “the social work profession promotes community change, problem solving in human relationships and the empowerment and liberation of people to enhance well-being” (IFSW, 2000). Immigration and its impact on communities is relevant not only to the social work profession; it begs professional engagement and action beyond mere advocacy.

Several theories have been proposed to explain communities’ reaction to immigration. Group Conflict is one such theory. It hypothesizes that negative feelings between different groups of people are the result of competing interests that result in judgment and exclusion of the out-group (Esses, Dovidio, Jackson, & Armstrong, 1998). The in-group represents the citizens already established in the community, while the out-group refers to the immigrants moving into the community. Group Conflict theory maintains that measures taken against the out-group are aimed at eliminating competition through “out-group derogation, discrimination, and avoidance” (Esses et al., 2001 p. 4). Out-groups are usually considered and viewed with more hostility than the in-group members. This discrimination is referred to as in-group-out-group bias (Lee & Ottati, 2002). Group Conflict theory complements the concept of resource stress, which “refers to the perception that, within a society, access to a desired resource is limited” (Esses et al., 2001, p. 4). This viewpoint could be as simple as the idea that immigrants move into communities and take jobs from citizens. Because immigrants are accepted into society more easily when their presence is not considered a threat to community resources, they face a paradox. If these immigrants become successful and affluent citizens, they may be suspected of attaining these accomplishments at the expense of their neighbors; however, if they fail, they become a drain on society. Esses et al. indicate that competition is at the center of group conflict, and assimilation of the out-group and in-group is a way to avoid or eliminate this conflict (2001). Conflict is more likely to occur when inter-group goals are different from societal goals, thus leading to negative behavior on the part of residents (Esses et al, 1998).
Group conflict and resource stress are not the only factors that potentially affect the community’s perceptions of immigrants and immigration; social identity also plays a vital role. Perceptions of the existence of an in-group and out-group arise from “motivation to maintain a positive sense of Social Identity” (Lee & Ottati, 2002, p. 2). Dividing people into sub-categories, “increases perceptions of group differences and causes in-group members to favor their own group with higher rewards while penalizing out-groups” (Chandler & Tsai, 2001, p. 2). Residents in a community will begin to discriminate against out-groups if they feel their existing social identity is being threatened. Anti-immigrant attitudes can lead to extreme eruptions of violence. In Omaha, Nebraska, in 1909, Greek immigrants were taken from their homes and beaten as their houses were burned to the ground (Jaret, 1999). Social identification theory maintains that people are “motivated to avoid social isolation or disapproval and to seek self-enhancement and self-validation” (Chandler & Tsai, 2001, p. 2). Therefore, communities look to maintain a positive social identity and preserve the balance that exists in their society. Pratto and Lemieux report that immigration leads to two outcomes: group inclusion or group threat. This result, again, is consistent with group conflict theory regarding feelings of dissension over resources (Pratto & Lemieux 2001). When group goals are in agreement among immigrants and residents, group inclusion can ensue. Moreover, “group inclusion speaks to the basic needs of belonging with others and defining one’s identity in reference to others” (Pratto & Lemieux, 2001, p. 2). These two theories, Group Conflict and Social Identification, explain why many people may be threatened by the arrival of immigrants.

Mulder and Krahn use the Scarce Resources theory to note, “competition for scarce resources leads to reduced public acceptance of immigrants, especially by those who feel they have the most to lose (e.g., the unemployed or the working poor)” (2005, p. 422). They compare this observation to the Contact Theory established in 1962 by Gorden Allport. This theory proposes that “those who have the most contact with immigrants will come to know them better, feel less threatened by them, and be more likely to accept them as part of their community” (2005, p. 422). Maulder and Krahn find that education plays a major role in changing attitudes towards immigrants, and make a note of Guimond, Palmer and Begin (1989) and the influence of education reformers such as John Dewey who highlighted the role of education in addressing and solving social problems such as racial intolerance.

Interestingly enough, “the American public expresses positive and approving attitudes toward immigrants who came earlier, but expresses negative sentiments about those who are coming at whatever time a survey is being conducted” (Simon & Lynch, 1999, p. 3). This tendency accounts for the now receptive attitudes toward previous out-groups such as Italians, Irish, and Eastern Europeans and discriminatory perceptions toward current out-groups such as Mexicans and Cubans. Another factor that affects an individual’s view of immigration and immigrants is the color of that individual’s skin. Research has shown that Blacks, in particular, were anti-immigrant because of the rights granted to immigrants that were previously denied to Blacks (Jaret, 1999, p. 4). Whites are found to be proponents of limiting immigration, although 60 percent of non-whites were also in favor of reducing immigration (Chandler & Tsai, 2001, p. 8). Factors such as income, race, and fear of crime do not seem to significantly influence people’s attitudes towards immigration (Chandler & Tsai, 2001).

Citizens view immigrants as a cultural threat and the introduction of newcomers as the promotion of new traditions. Immigrants are sometimes viewed as “a menace to cherished cultural traditions” (Chandler, & Tsai 2001, p. 6). Pratto & Lemieux note that in areas with high concentrations of immigrants, prejudice is fueled by the view of immigrants as a threat to cultural norms, uncomfortable social interaction, and negative stereotypes (2001). The real or perceived threats posed by immigrants are evident across the country as many states have formally affirmed
English as their official language (Jaret, 1999). These states include Nebraska, South Dakota, and California. The media influence beliefs over immigration when intense reporting of a difficult economic market promotes competition for resources and leads to more unfavorable attitudes towards immigrants (Esses et al., 2001). Perception of immigrants is greatly shaped by the economic climate of the community, and the perception of a depressed local economy can fuel anti-immigration attitudes and the fear that immigrants take jobs away from long-term residents (Chandler & Tsai, 2001). Educational level has the greatest impact upon perceptions of both illegal and legal immigration, as those with higher levels of education tend to be more in favor of immigration (Chandler & Tsai, 2001). Political alignment is another major influence, with those leaning to the left of the political spectrum more supportive of immigration, whereas those leaning to the right are more likely to oppose or favor limiting it (Betts, 2005).

Despite the tremendous community attention, media coverage, and existing literature related to immigrants and immigration, an exhaustive search uncovered no practical studies related to the direct attitudes and experiences of citizens towards immigrants and immigration. Many studies focus on the changes in the community’s landscape, with total disregard to the attitudes, perceptions, and experiences of residents. Even studies that focus on the impact of immigration on rural communities seem to overlook the direct experiences of the residents whose lives and communities are changed forever through immigration. The uniqueness of this groundbreaking study lies in its attempt to fill this gap and present a more personal account of how immigration is changing the face of rural America and the life of its citizens.

Methodology

This qualitative case study explores the attitudes and experiences of residents regarding the consequences of immigration on their rural community. The study’s objective is to provide an accurate and in-depth sketch of the community from the perspective of long-term residents, to view the situation through their eyes, and give voice to their stories. While the viewpoint of immigrants is equally crucial, its inclusion within this study would undermine the depth and breadth of information sought from each group and the presentation of results. The enormous quantity of data produced by such a study would result either in a lengthy text exceeding manuscript length requirements for journals, or in superficial coverage of each perspective, thus sacrificing quality. Consequently, while the absence of the immigrants’ perspective will be a shortcoming of this study, it is deserving of a special follow-up study.

A qualitative research format is most suited for this purpose which posits that “reality is subjective and multiple as seen by participants in a study” (Creswell, 1994, p. 5). Qualitative research focuses upon a process or phenomenon as experienced by participants, reality as they perceive it, and the subjective nature of their perspectives. Of interest in this study is the process of community change as perceived and reported by long-term residents who experienced the consequences of immigration over time. Long term residents are defined as those people who have resided in the community for fifteen years or more, witnessed the precursors of change, and continue to live through the consequences that immigration brought to their community. Fifteen years was chosen as a timeline, as it dates from the emergence of the immigration movement into the community. A purposeful selection process was used and participants were located by a city directory provided by the Area Chamber of Commerce. The directory lists in street order the participants’ names, addresses, phone numbers, and the year they established residency in the community. The number of households listed in the directory as having established residency before 1991 was 1,083, and phone contact was attempted with all of them. Of the 1,083 numbers dialed, 731 potential participants were unavailable or didn’t answer the phone, 39 numbers were no longer in service, 188 residents declined participation, two terminated part way through the interview, and 123 completed the interview. Table 1 shows the profile of participants, which
shows the average residency in the community for all participants as being 44.56 years and the ethnicity as 98.4% white and 1.6% Latino.

Table 1

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<tr>
<td><strong>Years of Residence</strong></td>
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Income levels reflect the placement of most participants as middle to working class, with 35.2% having income levels at $50,000 or more, 12% between $35,000-$49,999, 21.2% at $25,000-$34,999, 32.0% at 10,000-$24,999, and 5.6% at $10,000 or less. The majority of participants have at least a high school diploma. One hundred percent of the population surveyed used English as the primary language in their home; a few families used Spanish as a secondary language. All but one citizen identified the meat packing plant as a determining factor in bringing immigrants to the community.

Due to the sensitive and controversial nature of the topic, phone interviews were chosen as more appropriate than face-to-face interviews for data collection because an oral medium provides participants a higher degree of anonymity and a reduced sense of anxiety or fear of judgment. Phone interviews used a standard, IRB-approved in-depth questionnaire with thirty questions. The interview ended with an invitation for respondents to participate in one of two focus groups aimed at further exploration of their perspective of immigration’s impact on their community. The average phone interview lasted approximately 17 minutes, with a maximum time of 40 minutes and a minimum time of 9 minutes. The interviews followed the same format and all participants were asked the same questions; the researcher read from a typed script and transcribed responses directly into a computer. The questionnaire began with two screening questions age/adult status and the length of residency in the community. Participants responded to a standard questionnaire that included thirty items related to the following areas: ethnicity, household income, education level, language(s) spoken, population description, factors promoting immigration to the community, immigrant groups, impact of immigration on the community, educational system, health care system, criminal justice system, social service system, businesses and banks, feelings about immigration, view of immigrants, changes in the community, attitudes towards immigrants, concerns about immigration, positive aspects of immigration, advice for other communities facing a similar situation, information for policy makers, information for immigrants, feelings about the impact of immigration, community adjustment to immigration, and willingness to participate in a focus group.
Upon completing the phone surveys, each researcher individually read and coded results from a computer printout. Both researchers took notes during the focus group sessions and later compared responses. To accomplish a triangulation of results, sources were sought outside the primary research completed by the researcher. Online sources as well as books and articles were used to establish the validity of the research. The United States Census Bureau was extremely helpful in locating past and current demographic statistics for the community. Researchers separately identified trends or themes for the community.

Focus groups are highly instrumental in providing direct information related to a product, process, or phenomenon. Krueger notes that “attitudes and perceptions relating to concepts, products, services or programs are developed in part by interaction with other people” (1994, p. 10). Focus groups allow people to listen to the thoughts and feelings of others, which helps them to better define their own position (Krueger, 1994). A focus group allows a free exchange of ideas among community members. Therefore, two focus groups were organized in the community on to meet on a weekday, and participants who agreed in the phone interviews to participate were invited to attend. Upon attending the group session, all participants were provided with an informed consent to read and sign. The form outlined their rights, potential risks, and future uses of the study. Both researchers attended the focus group and facilitated a fairly structured process in which twelve questions were asked. The focus group questions expanded on areas addressed in the phone interviews and covered the following: immigration’s effect on the community as a whole, areas of impact, current perceptions of immigration and immigrants, potential business and service impact, influential changes, factors influencing one’s view of immigrants, future outlook, impact of policy changes, the community response to immigration, feedback for incoming immigrants, and implications for other communities.

The focus group sessions were audio-taped for later transcription and analysis. The first focus group consisted of five community members who had lived an average of 29.2 years in the community. The second focus group consisted of six participants; however, only four of the participants had actually participated in the survey. The remaining two group members were spouses of the participants. This group had been living in the area for an average of 39.75 years. All participants in both groups were Caucasian, spoke English, had at the least a high school diploma, and all but one had an annual income over $50,000.

Upon completion of data collection through phone interviews and focus groups, the researchers worked independently to analyze the data and identify themes. The researchers compared their analyses of phone interviews and focus groups then compared the resulting themes. Triangulating information, comparing and contrasting all responses, and sorting and coding were important for data analysis. The triangulation of the data from phone interviews and focus groups with the observations of researchers was intended to fortify the validity and reliability of information. Wiggins (1998) posits that the collection of evidence from multiple sources along with the cross-checking of results provides a more accurate outcome. Other research supports the need for redundant information from a variety of sources to confirm the validity and reliability of findings (Jacob, 1990; O’Malley & Valdez Pierce, 1996; Maxwell, 1996; Wiggins, 1998). Sorting and coding involved the search for recurring themes, phrases, and descriptions. Since qualitative research is concerned with process and meaning rather than outcome, the goal of this study is to gain insight into the residents’ attitudes, perceptions and experiences related to immigration’s effect on their community. Although the outcome may reflect the experiences of residents of other rural communities facing similar circumstances, generalization is not a major concern or goal. However, the outcome may be one that residents of rural communities facing similar circumstances may be able to relate to and understand. Furthermore, the change that this community experienced is not unique and may be representative of similar change processes elsewhere.
While Table 2 provides in-depth coverage of the precipitating factors that brought immigrants to the community, the immigrants’ origin, and a description of the community as provided by participants, a brief summary is provided here.

Table 2
Precipitating Factors, Immigrants Origin & View of Community

<table>
<thead>
<tr>
<th>Precipitating Factors to Immigration</th>
<th>Immigrants National Origin as noted by participants</th>
<th>Description of Community</th>
</tr>
</thead>
<tbody>
<tr>
<td>-98.3% noted that processing plants and work availability as driving force.</td>
<td>Continents mentioned: 99.18% said Mexico &amp; Central and South America</td>
<td>-48% of participants noted Hispanics are currently the majority</td>
</tr>
<tr>
<td>-One person noted willingness of the community to accept immigrants.</td>
<td>12% said Africa.</td>
<td>-23.2% note that community is diverse, mixed, multi-ethnic</td>
</tr>
<tr>
<td>-One did not know.</td>
<td>5.6% said White/Europe.</td>
<td>-7.2% Feel like the minority now, with some feeling discriminated against</td>
</tr>
<tr>
<td></td>
<td>26.4% Asia.</td>
<td>-4.0% Feel the community is split down the middle</td>
</tr>
<tr>
<td></td>
<td>Specific countries mentioned: Sudan 49.5%, Somalia 24.8%, “Blacks” (including African Americans) 22.7%, “Tall Dark People” 7.2%, Liberia 4.0%, Nigeria 2.4%, Ivory Coast .8%, Tanzania .8%, Kenya .8%, Ethiopia .8%, &amp; “State of Texas” .8%.</td>
<td>-7.2% See the community as growing negatively, “overpopulated,” “unbalanced,” “bad,” “too many immigrants,” &amp; “terrible”</td>
</tr>
<tr>
<td></td>
<td></td>
<td>-8.8% Report division in the community</td>
</tr>
</tbody>
</table>

Results

Survey Outcome

All but two participants noted that the meat processing plant was the reason for the high number of immigrants coming to the community. It was pointed out by 99.18% of participants that immigrants in their community come from Mexico, and Central and South America. Other continents mentioned were Africa and Asia, as well as a small minority of immigrants coming from Europe. In describing the community, 48% of participants explained that Hispanics are now the majority in their community, 23.2% described their community as “diverse, mixed, and multi-ethnic,” and a smaller percentage of participants observed that although they are Caucasians, they now feel discriminated against and view the community as “negatively overpopulated.”

Participants in the study seemed to view immigration as a double-edged sword and were divided over its impact on their community. Of the participants, 54.82% indicated that
immigration positively affected the community, while 47.57% noted a negative effect on the community. A few reported not having much of a choice in what happened to their town, that the city “fathers” or planners made the decision to bring in the corporation without the consent of its citizens. On a more personal level, 17% felt more positive about their community as a result of immigration, while 43.5% expressed negative feelings, 22% had mixed feelings, and 7.25 either weren’t affected or had no comment. Since the average residency of participants was 44.56 years, many of the participants represent an older generation and expressed a general sense of confusion and frustration at the changes in their town. The community seemed different from the one they grew up in; they are not able to overlook immigration’s negative impact on taxes, property values, the school system, medical system, social services, and crime. One resident that has been living in the community for 65 years noted, “We have major problems with every facet of the community. People are leaving here in mass exodus; it is not a nice place to live anymore.” Older generations view the situation differently than the younger. A participant who had been living in the community for 44 years shared a more positive view: “When IBP [meat packing company] first opened I wanted to leave, but now that the Hispanic families are coming and wanting a home and to be part of the community it’s positive, even more so with Tyson [meat packing company].”

As for their view of immigrants, 51.6% of participants reported mixed feelings regarding immigrants; 33.06% held a positive view and 11.2% a negative perception. For the most part, immigrants were viewed as hardworking people seeking a better life, but negative community changes were attributed to their presence. Comments such as “They are good people” or “For the most part, they are nice industrious people,” and “By and large, they are very, very nice people. Very good to deal with and an asset to our community” were tempered with other comments such as “75% are human trash–the rest are good people,” “If you put on your sombrero you can get away with about anything,” and “The ones that are coming now want to change our way of thinking and we are just in the way.” Interestingly enough, when participants were asked about the general attitude towards immigrants in their community, 47.5% believed that it was negative, 26.6% thought it was mixed, and 18% thought it was positive. This shows a divergence between people’s feelings about immigrants versus their view of the community’s response.

Table 3

Participants View of Immigration’s Impact on Community Systems

<table>
<thead>
<tr>
<th>System</th>
<th>Highly Impacted</th>
<th>Very Impacted</th>
<th>Somewhat Impacted</th>
<th>No Impact/Don’t Know</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community as a Whole</td>
<td>59.34%</td>
<td>31.70%</td>
<td>8.94%</td>
<td>-0-</td>
</tr>
<tr>
<td>Schools</td>
<td>85.36%</td>
<td>11.29%</td>
<td>3.25%</td>
<td>-0-</td>
</tr>
<tr>
<td>HealthCare</td>
<td>63.41%</td>
<td>21.13%</td>
<td>2.43%</td>
<td>-0-</td>
</tr>
<tr>
<td>Criminal Justice</td>
<td>60.97%</td>
<td>26.97%</td>
<td>10.56%</td>
<td>1.6%</td>
</tr>
<tr>
<td>Social Services</td>
<td>68.29%</td>
<td>21.95%</td>
<td>8.13%</td>
<td>1.6%</td>
</tr>
<tr>
<td>Businesses</td>
<td>60.97%</td>
<td>25.2%</td>
<td>11.38%</td>
<td>1.6%</td>
</tr>
<tr>
<td>Commerce/Banks</td>
<td>20.32%</td>
<td>26.82%</td>
<td>28.45%</td>
<td>23.4%</td>
</tr>
</tbody>
</table>

The reader is referred to Table 3, which summarizes the participants’ perceptions of immigration’s impact on the community systems. Most impacted were the schools, followed by social services and health care. Businesses and the criminal justice system were equally
impacted. More specifically, participants discussed the negative impact on businesses as the face of their downtown changed.

With the explosion of the immigrant population, many white businesses lost their customer base and were forced to close or move out of the community. Their space was quickly filled with immigrant-managed businesses such as clothing and food stores. Participants reported, “They’ve tried to take all the businesses in town” and cited “downtown stores I don’t care to go to cause they’re all Hispanic or Laotian.” Education and schools underwent the second most commonly reported change. While participants expressed the desire to secure a good education for all children, they had concerns that the needs of Caucasian students are taking a back seat to those of immigrant students who present a different set of needs. Participants note, “Our schools are bursting at the seams, education took on a whole new outlook,” Schools are overcrowded,” and “It’s just the overall change of a larger population. The schools are just not equipped to handle those students. We need to pass the school bond.” The third most commonly reported change in the community involved housing, with participants noting a shortage of housing and deteriorating conditions of already available housing. Comments such as “houses are tore up, not a nice community anymore” and “people are renting houses and not taking care of them, they are turning into slums” seemed common. Several participants expressed concerns for law enforcement and the increase in crime rate. Some participants noted that they now keep their doors locked and one has even considered purchasing a gun for protection. Finally, 9.6% of participants mentioned the flight of white residents out of the community due to the influx of immigrants; one even said, “Normal people are leaving” with another sharing that “the integration has not been good.”

Participants expressed various concerns regarding the changes that immigration brought to their community. Topping the list of concerns were the presence of illegal immigrants and the need for effective and timely reform in the Immigration and Naturalization Services. Only 12% expressed no concern about immigration in the community; however, most reported that illegal immigration is a serious problem. One noted, “I think we should be doing what the sheriff is doing in Arizona, sending illegals back and sending the bill to the Federal government because they are supposed to protect the borders.” Some expressed irritation. “They boast about being illegal, they are proud of being illegal,” and “… send them back or something, I think we will be overrun by illegals and will not have a chance.” Others reported fear: “… the Hispanic people are going to take over the white people’s living quarters” and “if something isn’t done about them abiding by our rules, all the whites will move out.” A few remarked that they would like all illegal immigrants sent back or held accountable. Fueling their concerns are the taxes that continue to skyrocket in order to support new schools and services to accommodate the influx of incoming immigrants. A widespread belief is that some immigrants avoid paying their share of the taxes by sharing space with multiple families in a single dwelling, thus undermining the tax base of the community. In the eyes of the residents, these people are cheating the system and shifting the burden to taxpayers.

While the negative aspects of immigration seemed overwhelming for the majority of participants, 78% were able to recognize positive side effects. Only 22% of participants failed to see any beneficial outcomes. A majority of participants recognized that immigration brings a cultural awareness that many rural agricultural towns rarely experience. One participant commented, “I think it’s given us an awareness of other peoples. Just because this is the way we’ve always done it doesn’t mean we can’t try it another way.” Several participants stated that the immigrant workforce is doing jobs that Caucasian residents wouldn’t do, thus sustaining the meat-packing plant and community. Many seem excited about the expansion of cultural horizons and appreciate the richness that diversity brought to their community. These participants shared
The Transformation of Rural America through Immigration

comments such as “We realize we are part of the world” and “It’s been enlightening—people have learned quite a bit about the rest of the world. We used to be quite insulated.” Twenty-two percent of participants note economic benefits, such as a higher tax base, higher yields from sales taxes, and the mere fact that the community has become alive again.

Most participants expressed uncertainty and concern when considering the community’s future in light of immigration. Twenty-three percent had no clear vision for the future, 21.13% do not see much change from the community’s current status, 21.13% believe the community will go "downhill,” 12% project continuing growth, 10.5% were positive about the future, 6.5% fear that immigrants will take over the community, 2.4% emphasize that the future depends on government action or inaction related to immigration, and the remaining 3% didn’t respond. When prompted to offer advice to other rural communities facing similar challenges with immigration, the majority of participants stressed the importance of preparation, as well as researching and visiting other communities. More specifically, 24% stressed the importance of research and preparation, 23% did not know how a community could prepare for such an incredible change, 20% stated the importance of keeping an open mind and welcoming immigrants into the community, 15.44% advised against allowing meat-processing plants into the community, and .8% (one person) advised moving out of the community. One recurrent issue raised by several participants in this category is the importance of maintaining English as the “language of the land” or community, and enforcing the teaching and usage of English among incoming immigrants.

When prompted for recommendations for policy makers, one of the most prevalent issues that participants continually emphasized was the stress that immigration places on the community’s infrastructure. Specific concerns included taxes; adequate housing; services in healthcare, welfare, education, and law enforcement; and the impact on local businesses. Illegal immigration was another major concern that participants believed policy makers were out of touch with as it relates to rural communities. While most didn’t offer specific solutions, some asserted that immigration laws should be eased into, with more restrictions on illegal immigrants. One said, “I think we need to control them better; they need to be citizens and speak English.” “We are too easy to let them have their own way and language and not demand anything of them,” and “Don’t give in to immigrants. Lexington has catered to them. We are nobodies anymore.” The general theme in this category is one of anger and resentment toward immigrants and frustration with the lack of empathy on the part of policymakers.

Participants were asked to offer advice to incoming immigrants and all but 3.2% eagerly obliged. A recurring theme mentioned by 41.4% of participants related to the English language and its use at the very least in public contexts. While participants seemed to sympathize with the difficulty in learning a language, they want to be able to communicate with immigrants. Whereas some recognized the importance of keeping one’s culture, 46% would prefer that the immigrants assimilate, adjust to life in America, and abide by local rules and regulations. Eighteen percent specifically stated their desire for immigrants to feel welcomed into the community. Six percent were critical of immigrants and stressed immigrants’ obligation to care for their property, contribute to the community, and keep in mind that “there is no free ride.”

The researchers invited participants to select one of the following responses that best fit how they feel about their community because of immigration: My community is better, More interesting, Worse, Forever changed, or free response. Five percent believe their community is better because of immigration; 24.39% believe their community is more interesting because of immigration; 11 percent believe their community is worse, and 64.22% believe their community is forever changed. About eight percent (8.1%) offered their own assessment, stating, “They have helped, but they have run a lot of people out of town and several businesses out of town,” “Our community is devastated because of immigrants,” and “It couldn’t be any worse if it had to be.”
Participants were asked to assess their community’s adjustment to immigration and seemed to fall along three lines: 58% viewed their community’s adjustment as effective or positive; 24.4% viewed the community’s response as negative and challenging; and 18% viewed the adjustment as an ongoing process with positive and negative attributes. Some positive comments were, “Overall we’ve handled it fairly well” and “I feel that Lexington has really accepted them and done everything they could possibly do, and are still doing that.” Some negative comments were, “I really don’t think it has adjusted; it is overwhelmed and tolerated. They haven’t immigrated; they’ve invaded” and “It’s bent over backwards for them, given them anything and everything their little heart’s desire.” As for those who believe that the adjustment is continuing, “I don’t know that it’s completely adjusted yet” and “As a whole, it’s still in the process. We’ve gone through different stages of adjustment.” The survey ended by offering participants the opportunity to provide additional input. Fifty-four percent made no additional comments, while the rest elaborated on issues related to language, housing, services, crime, and the increased cultural awareness of the community.

Focus Groups

Two focus group sessions were conducted in an effort to gain a deeper understanding of the attitudes and experiences of participants. The group process was fairly fluid, and all participants responded to all questions. The average group session was approximately two hours and could have been extended much longer, as members were eager to share. This section details the outcome of both groups, and direct quotations will be used to best reflect the sentiments of members. The groups began by discussing the impact of immigration on their community as a whole and the feedback was mostly positive. “If you are going to have a community, you need people” and “Immigration has done wonders for the community” best described how members felt. Group members couldn’t overlook the benefits of immigration, and as one stated, “There were a lot of vacant houses, so many who didn’t have jobs…, with immigration you start to see life coming back into the community.” However, they also commented on the fact that the community was ill prepared for the wave of immigrants and suffered because of it. “People are not comfortable with new [newcomers or immigrants], a lot of white flight, which has subsided now.” As for the particular areas in which immigration impacted the community, participants seemed to point out more negative aspects such as the burden on schools, “stress on public resources,” and money leaving the county to immigrants’ homeland. Comments such as “We are the United Nations of Nebraska” and “Watched the children’s colors change; it’s getting to be more of a melting pot” reflect some of the positive feelings of the members.

Of interest to the study were the initial changes that residents observed as immigrants entered the community. The responses were interesting as participants shared the following comments: “All of a sudden there were a lot more people,” “low riding SUVs,” “traffic,” “loud music,” “hearing Spanish spoken on the streets,” “having to translate in my head,” and “trash on my side of town.” Many participants indicated having no prior opinion of immigration until it became real to their community. One noted that prior to immigration the community lost a major industry, and it had been proposed that someone should write the following sentence on the water tower: “Last one to leave town, turn off the lights.” This reversal of the community’s economic fortunes explains the sense of appreciation and respect that participants expressed towards immigrants, including their desire to create a better life for their families and the tremendous challenges they confront. They described the immigrants as “children of God,” “incredibly brave people,” and “accommodating people.” They appreciated their determination and noted, “I wouldn’t have the courage to leave my country” and “They probably suffered a lot of the things that our ancestors suffered entering Ellis Island.” Some of the participants noted that getting to know the immigrants has influenced their personal outlook on immigration. “The plight of
immigrants opens your heart… it personalizes it” and “instead of being critical, you become more compassionate.” Yet a predominant regret seems to revolve around the perception that the community may have catered too much to immigrants with little attention to their need to learn the U.S. culture.

Although participants recognized the contributions of immigrants and that “immigration is needed for commerce,” they hold the government and industry responsible for bringing immigrants to communities without supporting the accommodations that localities and their tax payers are forced to bear. Blaming the government is a major theme that emerged in both focus groups, as members indicated that immigrants are used “when it is convenient for the U.S. …” “Our immigration laws in this country are totally messed up.” One participant asserted, “I believe in immigration now—we need reform and to demand of government fairness for all immigrants.”

Participants provided mixed reviews regarding the impact of immigration on businesses and services. On one hand, the population has increased, diversity has enriched and added to the excitement of shopping, and many services have been upgraded to meet new demands. Yet the community seems divided: “The white people have tried to isolate themselves and the immigrants haven’t felt welcomed.” Some of the most influential changes in the community relate to community members banding together to address community needs. One member stated, “It made us look at ourselves more, ask what would you do in that situation. Immigration helped the community to cooperate with each other.” New stores, churches, and educational approaches were positives, but the increase in unfunded state and federal government mandates and increased crime rate proved strenuous for the community.

Participants were proud of their Lexington’s response to the large number of immigrants and recognized that there had been “a lot of growing pains.” Despite initial shock and anxiety, community leaders and members “stepped up to the plate.” They felt optimistic for the future of their community and foresaw additional growth, the need to attract more industry, more skilled labor, and the need to market their community. The future will see needs for additional housing, hotels, and restaurants. Some of the concerns for the future related to the possible relocation of the meat-processing plant, which would have a devastating effect on the community. Another major concern focused on changes in national immigration laws, especially the deportation of illegal immigrant. Participants noted, “It took Lexington fifteen years to stabilize, it would destabilize the community,” “It will rip this town apart.” Another added, “If 20 percent of workforce is illegal….that is 400 people gone….to see 200 houses vacant, wow” and “Economy nationwide could not stand to ship all back, it would collapse,” “We’ve got to have them—who else would do the jobs they do for the wages they do and work hard?”

Participants were asked to provide suggestions for incoming immigrants and in response urged them to learn the language, to be patient with local residents who may be struggling with the changes to their community, respect the culture of the land, and work to become actively involved in the communities they enter. They encourage communities that may be facing similar immigration challenges to “be flexible,” “patient,” “open minded,” “look for the good, there will be bad and hard times,” and to recognize that despite any preparation, there will be surprises. Most importantly, they recommend educating community members about incoming immigrants and the potential changes they will bring, along with learning from the experiences of other communities to avoid making costly mistakes.

**Discussion**
The outcome of the study reveals the personal journey, growing pains, current struggles and future fears of long-term residents whose community was forever changed because of immigration. Their community was transformed in every sense: the majority population became the minority, English took a back seat to Spanish, Hispanic stores replaced white downtown businesses, and diversity became an inescapable reality. The residents’ story reveals the reality of endangered rural communities fighting to survive, seeking continued existence through the recruitment of industries that mainly employ vulnerable immigrants in pursuit of a better life. The interdependent reality of rural communities and incoming immigrants creates an environment filled with paradoxes, forced relationships, and seemingly endless adaptations for both. The study further exposes the residents’ need to process their transformation as a community. The absence of such a process promoted their willingness to participate in the study, especially through the anonymity of phone conversations and the safety of a focus group format with likeminded residents. Their struggle reveals the aftermath of community culture shock, collective identity crisis, and the makeover resulting from both. Moreover, the outcome confirms the many theoretical elements discussed in the literature review, namely the competing interests and struggle for social identity noted in the group conflict theory (Esses et al., 1998), the in-group-out-group bias (Lee & Ottati, 2002), and group inclusion or group threat as outcomes of immigration (Pratto and Lemieux, 2001).

The community’s distress is compounded by the overwhelming and continuous needs that immigrants bring with them and the call for communities to accommodate them. Despite the cultural erosion of a traditional way of life, this is a price that communities are more than willing to pay in order to preserve their existence. While forced, at least initially, relationships seem to be one avenue for promoting tolerance, understanding, and mutuality. Residents seem to appreciate the economic contribution of immigrants to the community but regret the astonishing price they had to pay. The Caucasian majority culture, English language, community solidarity, community complexion, a sense of safety and familiarity, and lower taxes were sacrificed to preserve the community. Having gone through years of struggle and achieving the growth they had hoped for, long-term residents are now fearful that the same government that abandoned them in their time of need and betrayed their trust will now pull the rug from under them. They oppose any governmental policy changes that would undermine the stability and success they’ve achieved. The issue of illegal immigration is a concern they want the government to take corrective action on and to halt. However, they desire fair treatment for the legal immigrants who are now part of their community.

While total assimilation seems like an ideal solution for most participants, they realize that it is unrealistic and instead wish for the immigrants to meet them halfway. They want immigrants to respect American culture and language, take an interest in their new communities and contribute to their progress, and to appreciate the struggle of immigrants who have come before them. They want immigrants to understand the sacrifices made by the community and its residents to accommodate their needs and to be accountable for their own needs and actions as well. The researchers cannot overstate the significance of language in breaking down barriers, promoting cross-cultural communication, and supporting long-term community solidarity.

The study highlights the need for social work intervention and the impressive role social workers can play by utilizing their knowledge and skills. This is an opportunity for the profession to revive its role in developing communities, enriching their resources and promoting the healthy adaptation of citizens. Focusing on strengths, providing consultation and education, assessing resources, framing solutions, mediating, and networking are just a few of the social work skills that would be helpful in bringing together immigrants, longtime residents, and community leaders in promoting solutions as communities address immigration. Advocacy,
social action, and the promotion of economic justice can be neutrally utilized to benefit communities, residents, and immigrants as they engage in collective redefinition of their identities and mission. Social workers can be employed by communities to work with meatpacking companies to make policy and program provisions that are fair to communities and immigrants. They can be employed by many agencies to encourage multicultural practices, bridge gaps, connect people with resources, and ensure that all voices are heard. The roles and possibilities are endless for social workers in community development and practice, and communities are desperately needing and seeking professionals with such expertise. In fact, as a consequence of immigration, rural and urban Midwestern communities are now hiring school social workers to problem-solve adaptation issues and work toward more responsive services for students and families. One of Lexington’s churches hired a social worker specifically to help the immigrants and community members. This strategy demonstrates recognition of the knowledge and expertise that social workers possess and can employ in community development and practice. Police departments and other community agencies that were reluctant to hire social workers in the past are now open to hiring them. However, social workers shouldn’t wait for an invitation, and need to proactively market their skills and educate communities in their unique role and relevance.

This groundbreaking study and its fresh presentation of residents’ perspectives does have some limitations as it made no distinctions for gender, age, or immigrant generation status of longtime residents. The crucial perspective of immigrants, legal or illegal, is absent and deserves its own in-depth research analysis to bring about a more holistic understanding of the immigration issue. The inclusion of immigrants’ perspective in this study would have resulted in superficial coverage of all views that would undermine content and quality while making the manuscript too lengthy for publication in a scholarly journal. Since immigration seems to have a unique impact on rural communities, a model is needed to help communities plan for the immigrants’ arrival and the adaptation of both the immigrants and local residents. Several participants noted that religion and churches played a strong role in changing their views and actions in reference to immigrants and it would be interesting to explore such an impact. The implications of this study are far reaching for community and state leaders who design programs and policies impacting rural settings and their residents. Policymakers need to heed the call of rural residents to draft policies that are compassionate toward all people and take into account the limited resources of rural communities and their desire to survive. Finally, immigrants should understand that while their struggle is unique to them, it is not new to the country and that successful adaptation is best accomplished through their involvement and partnering with residents as they jointly confront local, national, and global challenges.
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A Retrospective Study of Teen Pregnancy in West Virginia from 2003 -2008:

A Descriptive Analysis

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Abstract: In 2006, West Virginia surpassed the national average birth rate for teens ages 15 to 19 years old. Through the use of the state wide Birth Score data, this article presents a retrospective examination of 8,094 teens who gave birth in West Virginia during the years of 2003-2008. Descriptive data on health issues such as prenatal care, infant birth weight and mortality, as well as demographic characteristics, such a racial background and Medicaid status are presented. Implications of these health issues are discussed along with special considerations for health providers who work within the Appalachian region.

Keywords: Appalachia, teen pregnancy, teen childbearing, descriptive analysis

Introduction

Nationally, teen pregnancy and childbearing continues to be a challenging social problem that has both economic and health consequences. Taxpayers are paying approximately $9.1 billion dollars a year to assist teen mothers and their children in meeting their economic and health needs (Martin et al., 2009). The financial burden is considerable primarily because teens who have children are less likely to finish high school, are more likely to live in poverty and to also receive long-term public assistance. Further, teenage mothers are also less likely to complete job trainings or specific skills trainings (McCave, 2008).

Health care costs are high due to the increased risks for teen mothers and their children. First, there are numerous health risks associated with a teenage pregnancy. Although there are potential risks associated with pregnancies regardless of the mother’s age, teenagers experience these risks at higher rates. One reason for this is because adolescents are more likely to experience psychological distress at being pregnant, deny the pregnancy, and subsequently delay seeking prenatal care (Dawley, 2009; Guttmacher, 2010). Pregnant teens are also more likely to smoke, have anemia, have a sexually transmitted disease (STD) diagnosed along with their pregnancy, and have a preterm delivery, as compared to adult pregnant women (Chapman & Shepherd, 2008; Dawley, 2009).

Second, there are postpartum risks for teen mothers. There is an increased rate of post-partum depression, increased risks for lung and cervical cancer, a greater likelihood of a premature death, and a greater threat for substance abuse in the future (Chapman & Shepherd, 2008; Dawley, 2009; McCave, 2008).

Third, there are also heightened risks for infants born to adolescent mothers. These risks include an increased likelihood of a low birth weight, along with neonatal and post-neonatal death, as well as poor nutritional health (Chapman & Shepherd, 2008; Dawley, 2009; McCave, 2008). In later years, children who are born to teenage mothers are more likely to have cognitive and health disorders. These children are also at a greater risk for experiencing neglect and abuse throughout their life, particularly for children who are born prematurely or if they are repeatedly ill (McCave, 2008). Moreover, females born to teenage mothers are more likely to become pregnant in adolescence (Dawley, 2009).
Teenage Births as a Concern in West Virginia

In 2006, in West Virginia and across the nation, teen birth rates for those aged 15-19 increased for the first time since 1991 (Martin et al., 2009). In 1991, the national birth rate for teens ages 15-19 was 68.0 (per 1,000 births). This had dropped to 40.5 in 2005, however, in 2006 the teen birth rate increased to 41.9. In West Virginia, teen birth rates for this same age group surpassed the national average both during 2005 (43.4) and 2006 (44.9) (Martin et al., 2009). Within this age group, the national birth rate was higher for those ages 18 and 19 years old (73.0) compared with those ages 15 to 17 years old (22.0). This pattern was also reflected in West Virginia, with the older age group experiencing a birth rate of 80.4, compared to a birth rate of 21.4 for the younger group. Within West Virginia, the largest increase in births over time has been experienced by 18-19 year olds (Chapman & Shepherd, 2008). Compared with this age group, West Virginian teens ages 17 and younger have had fairly consistent birth rates between the years of 1997 and 2007.

In 2004, West Virginian taxpayers paid over $38 million for the costs of teen childbearing (National Campaign to Prevent Teen Pregnancy, 2006). Of that $38 million, $23 million (61%) was spent on the costs of teen childbearing within West Virginia, while the remaining $15 million (39%) was national teen childbearing costs absorbed by West Virginia taxpayers. This averages out to an annual cost of $1,010 per teen birth in West Virginia for those births to 18 and 19 year olds. However, this is lower than the average annual costs for a child born to a teenager aged 17 and under, which is $3,480 per teen birth (National Campaign to Prevent Teen Pregnancy, 2006).

According to the West Virginia Health Statistics Center (2008), during the years of 2002-2006, the average state adolescent birth rate for teens 10-19 years old was 21.7. There were 25 counties in West Virginia that had a higher teen birth rate than the state average. Of those 25 counties, 13 had the highest teenage birth rates (24.1 to 34.7 per 1,000 females). Following this, 12 counties had a teenage birth rate of 21.8 to 24.0. Those under the state average included 15 counties with a teenage birth rate of 17.8 to 21.7, with the remaining 15 counties in the lowest category ranging from a rate of 10.2 to 17.7 (West Virginia Health Statistics Center, 2008).

Given the importance of this social problem, both nationally and in the state of West Virginia, this researcher examined retrospective data on recorded teenage births occurring in West Virginia during the years 2003-2008. The research question of the study was: What are the demographic and health characteristics of teens ages 12 to 18 who gave birth in West Virginia during 2003-2008?

Methodology

Retrospective data was used from the West Virginia Birth Score program. The statewide Birth Score Program is unique to West Virginia; it was designed to screen newborns for risk of infant death within the first year and provides a mechanism for early referral to services (Mullett, Britton, John, & Hamilton, 2010). Since 1998, all West Virginia hospitals and facilities that provide birthing services are required by law to participate in the program. The statewide data that is collected is managed at West Virginia University School of Medicine. Answers on the Birth Score screen add up to a total score and those with a "high birth score" (scores over 99) are automatically referred to services, either through Medicaid funded services or private community services. In addition to the Birth Score screen, during hospitalization for the birth, mothers are asked additional questions when they obtain the Birth Certificate for their child.

The cases from the dataset that were selected included adolescent girls between the ages of 12 and 18 who gave birth in West Virginia between the years of 2003 and 2008. A descriptive analysis of these young women was conducted. Variables included demographic as well as health-related variables. An additional variable on infant mortality was also requested, which
came from a related statewide dataset. This study was approved by the West Virginia University Institutional Review Board.

Results

Demographic Variables

The total sample for this analysis included 8,094 adolescents. All resided in West Virginia during the time of their delivery. There was an even distribution of number of births during the years of 2003-2008, with the yearly range falling between 1305 births (during 2005) and 1396 births (during 2003). In looking at payment method, a majority of the adolescents used West Virginia Medicaid to pay for the birth (84.6%, n = 6848). In regards to race, 92.4% of the teens were Caucasian and 5.4% were African American. The remaining cases (2.2%) were teens who identified as Latina, Asian, Native American, or bi-racial.

The breakdown by age showed that nearly half of the adolescents (49.6%, n = 4012) were 18-years-old when they gave birth. Following this, 27.8% (n = 2249) were 17 years old, and 14.6% (n = 1185) were 16 years old when they gave birth to their child. A smaller percent were those ages 14 or 15 years old when they delivered (7.7%, n = 624). The remaining were 12 or 13 years old (.3%, n = 24). From the sample, 16.5% (n = 1334) were married, with a majority of those young women (65.5%, n = 874) aged 18-years-old. Of the remaining teens who were married, nearly a quarter (24.7%) were 17 years old, with 8.5% of those married 16 years of age. The remaining 1.3% of those married were 14 or 15 years old.

According to West Virginia Health Statistics Center (2008), the 55 counties in West Virginia were broken up into four categories during the years of 2002-2006 based on the range of adolescent birth rates within each county. These rates spanned a range from 10.2 to 34.7 (per 1,000 births). Nearly half of the adolescents who gave birth in West Virginia during 2003-2008 (45.4%, n = 3678) delivered in one of the 13 counties that were in the category of counties with the highest teen birth rates.

Health-Related Variables

Of the 8,094 adolescents, just under half (49%, n = 3970) of the infants were given a “high” birth score on their screen. The seven indicators that are assessed during this screen to provide the total score include: birth weight, maternal age, infant’s sex, feeding intention, previous pregnancies, maternal education, and nicotine use during pregnancy. When examining the frequency distribution of infant birth weight, a total of 10.4% (n = 843) of the infants were considered to be low birth weight. Within this group, 6.7% (n = 543) of the infants had a low birth weight of 2001 to 2500 grams, 2.3% (n = 183) had a very low birth weight of 1501 to 2000 grams, and the remaining 1.4% (n = 116) had an extremely low birth weight of less than 1500 grams. Infant mortality occurred in .6% (n = 52) of the infants. From the sample, 12.4% (n = 1002) of adolescent mothers reported a prior living birth and 7.1% (n = 571) of the teens did report one or more prior abortions. In looking at prenatal care, a majority (73.3%, n = 5934) of the young women began prenatal care in the first trimester, while 20.4% (n = 1650) began prenatal care in the second trimester. Only 3.1% (n = 254) started in the third trimester. The remaining 3.2% of teens (n = 256) did not report their prenatal care information.

Discussion

Nationally, teen pregnancy rates have fallen over the last two decades due to increased access to birth control methods (McCave, 2008). Within West Virginia there was a 24% reduction in teen pregnancy between the years of 1991 and 2004 (National Campaign to Prevent Teen Pregnancy, 2006). Despite this trend, teen birth rates have increased for the first time since 1991, both across the country as well as in West Virginia. During the years of 2003 to 2008, there were

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8,094 adolescents between the ages of 12 and 18 years who gave birth in West Virginia. Given the recent increase in teen birth rates, results from this descriptive analysis of adolescents who gave birth in West Virginia over the past several years provides directions for where additional research and resources should be focused.

**Prenatal Care**

While a majority of the adolescents did seek prenatal care in their first trimester (73.3%), one-fifth did not do so until the second trimester (20.4%). In comparison, in 2006, the CDC reported that 82.8% of women in West Virginia who sought prenatal care did so in their first trimester (2009). This higher percent may in part be due to the age of this study’s population, as opposed to CDC data, which includes women of all ages in West Virginia. Still, the general medical consensus is that prenatal care during the first trimester provides an early opportunity for both health promotion efforts as well as risk assessments (Braveman, Marchie, Egerter, Pearl, & Neuhaus, 2000). This is particularly important for adolescents, who are at a higher risk of medical complications for themselves and their infants. Further, the federal government has stated in Healthy People 2010 that an objective is to have 90% of pregnant women access prenatal care in the first trimester. Barriers to accessing early prenatal care for low-income women have included: having an unplanned or unwanted pregnancy, not having a usual primary care source prior to the pregnancy, and lack of education (Braveman et al., 2000). In considering both this recommendation by the government as well as by the special health and economic concerns for pregnant teens, it is important that efforts are made to improve access to prenatal care in West Virginia for pregnant teens as well as educating teens about the importance of seeking prenatal care early.

**Birth Weight and Infant Mortality**

The issue of low birth weights for infants born to adolescent mothers is a concern across the nation. During 1990 to 2006, the incidence of low birth weights increased for females who had singleton births and who were under the age of 20 (Martin et al., 2009). In 2006, the national average of infants born with low birth weight to mothers between the ages of 15 and 19 was 10.0%. This is just below what was found in this West Virginia sample, in which 10.4% of the teens gave birth to an infant with a low birth weight.

In West Virginia, according to researchers examining the Birth Score data from 2001 to 2009, having a low birth weight as a newborn was “the strongest predictor of mortality in the first year of life” (Mullett, Britton, John, & Hamilton, 2010, p. 18). The infant mortality rate within this study’s adolescent population was 6.42 (per 1,000 births). This is slightly lower than the West Virginia state average between 2004-2006 (7.07), and also similar to the national average during this same time period (6.68), both of which included women of all ages (Matthews & MacDorman, 2010). Health providers within West Virginia should examine how to better target pregnant teens and to explore interventions that are successful at reducing the incidence of a low birth weight infant, which would reduce the infant mortality rate for this age group.

**Birth Score**

Of the 8,094 adolescents, just under half (49%, n = 3,970) were given a “high” birth score on their screen. This means that these adolescents had at least two or more of the seven indicators on the screen that indicated that the infant was at a greater risk for death in the first year in life. These indicators include birth weight, maternal age, infant’s sex, feeding intention, previous pregnancies, maternal education, and nicotine use during pregnancy. Fortunately, because of the Birth Score Program, 98.5% (n = 3,911) of those adolescent mothers with a “high” birth score across West Virginia during the years of 2003-2008 received referrals for post-delivery services aimed at reducing poor health outcomes for both the mother and infant. In considering future
research efforts, a next step may include examining this referral process in greater depth, so as to
determine the percent of adolescents who actually enroll and complete services after they are
referred. Following this, research that links these services to positive health outcomes would be
beneficial for establishing best practices for high risk teen mothers and their children.

Payment Method

In looking at payment method, a majority of the adolescents used West Virginia Medicaid to
pay for the birth (84.6%, n = 6848). This is much higher than the West Virginia state average,
which in 2010, reported that 50% of all births in West Virginia were covered by Medicaid
(National Women’s Law Center, 2010). This higher figure may be due to the Medicaid eligibility
of these adolescents. In West Virginia, only the income of the adolescent is considered for
perinatal Medicaid services, as opposed to considering the income of the adolescent’s parent
(Ranji, Salganicoff, Stewart, Cox, & Doamekpor, 2009). Additionally, any pregnant female in
West Virginia who has an income at 150% of the federal poverty level (with assets considered) is
eligible for Medicaid perinatal services, which also covers 60 days of post-partum services.
Given that West Virginia has a lower percent of residents who have graduated from both high
school and college compared to the national average, as well as a higher percent of its residents
living below the poverty line, it is likely that these adolescents will need to rely on Medicaid
services to cover their perinatal and post-partum costs (US Census Bureau, 2010).

Race

Similar to the rest of the country, racial minority groups in West Virginia, particularly
African American and Latina teens, are overrepresented both in terms of teen pregnancy and also
birth rates. African American teenagers in West Virginia are disproportionally represented in the
number of teenage pregnancies with “103 pregnancies per 1000 young African American teens
vs. 66 pregnancies per 1000 white teens” (Chapman & Shepherd, 2008, p.4).

In this study, 92.4% of the teens who gave birth were Caucasian and 5.4% were African
American. The remaining cases (2.2%) were teens who identified as Latina, Asian, Native
American, or bi-racial. In 2009 African Americans comprised 3.7% of the state population (US
Census Bureau, 2010). This highlights that while a majority of births were to Caucasian women,
African American teens were proportionally over-represented as teen mothers in the state.
Assessing whether current interventions are culturally sensitive and relevant to West Virginian
teens who are African American is a critical next step.

Teen Pregnancy and Motherhood in Appalachia

West Virginia is unique in that it is the only state in the country that is entirely in Appalachia
(Reel, 2001). One of the reasons for West Virginia’s high rate of teen pregnancy and births can
be attributed to the rural characteristic of the state. According to Skatrud, Bennett, and Loda
(1998), “teen pregnancy is an issue embedded within the social problems that affect rural societies
as a whole—poverty, social and cultural isolation, lack of economic opportunity, and family
disruption” (p. 24). They also assert that adolescents within rural communities have increased
stigma, a lack of privacy, as well as a lack of diverse resources to choose from, in terms of public
and private options. There is also the issue of lack of transportation, which can affect the ability
of a teen to access services (Perkins, LaGreca, & Mullis, 2002).

Culturally, becoming pregnant and marrying early continues to be the norm within some
Appalachian communities. In a small qualitative study completed in West Virginia, Reel (2001)
found that being a mother was viewed as being central to being a woman and that childbirth in
adolescence was at times viewed as an ordinary event. Having a child in later adolescence
allowed for additional adult freedoms, which for some, was viewed positively. Yet at the same
time, those who had their children in high school indicated that it resulted in adult responsibilities
they were not ready for, as well as missing out on key rites of passage, such as attending prom or graduation. The women in this study reported that having a child at 20 or 21 was an ideal age, as opposed to earlier in adolescence as well as later in late twenties or early thirties. Once pregnant, these women were encouraged to keep the child or place the child for adoption, usually with extended family; abortion was not typically an acceptable alternative (Reel, 2001).

Due to lack of formal resources as well as cultural norms and values, rural communities utilize natural helping networks, as well as other informal services such churches and extended family and kin (Stuart, 2004). Cultural norms and traditions are important as well, particularly when rural young women are more likely to get married earlier and not attend college, when compared with their urban peers (Poole & More, 2004). Marrying earlier can be both an intergenerational phenomena and also it can be an indicator of poor economic opportunities. Both of these characteristics may influence teen pregnancy, as teens may be more likely to get pregnant if they are expecting to marry soon or if it is a part of an intergenerational family pattern. Rural women are also less likely than their urban peers to attend college. According to Foster (as cited in Watkins, 2004, p. 65), “in rural areas, more than any other geographic setting, conformity is strongly urged, if not demanded. Deviation from the ‘traditional way of living’ is strongly discouraged.” Further, since seeking higher education often means leaving their close-knit, small community of family and friends, it may be that young rural women who get pregnant are not forced to negotiate this potential conflict.

Conclusion

Adolescent child bearing continues to persist as a social problem across the nation. In West Virginia, there were 8,094 adolescent females who gave birth during the years of 2003-2008. West Virginia is a unique state in that it is the only state entirely in Appalachia, which creates distinctive issues around the causes of teen pregnancy and the experience of teens who are mothers. It also is the only state with the Birth Score Program, which allows for the statewide data collection on all pregnant women in the state from year to year. Several areas for future research and intervention emerged, including improving access and education for early prenatal care, culturally sensitive interventions for African American teens in the state, as well as reducing low birth weight infants and infant mortality. With a better understanding of the demographic and health characteristics of West Virginia adolescent mothers and their infants, health providers will be better equipped to provide the necessary services for teen mothers, their infants, and the communities in which they reside.
References


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A Case Study of Health Risk Behaviors in a Sample of Residents in Rural Appalachia

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Abstract: The purpose of this paper was to examine health risk behaviors from a sample of adults living in one of the nation’s poorest counties in Central Appalachia. A descriptive secondary analysis of data collected for a public health surveillance project was conducted to determine the most pressing health problems and risk behaviors affecting this unique population. Residents reported high rates of hypertension, back pain, and sleep problems. They also reported very low levels of physical activity. A discussion of results is provided, including a comparison of the study population to information from national surveys. The limitations of the study and implications for social work practice, policy and research are also discussed.

Keywords: Appalachia, rural, poverty, health social work, health risk behaviors

Introduction

Health risk behaviors can be defined as volitional involvement in established patterns of health behavior that limits the potential for achieving overall good health (Lindberg, Boggess & Williams, 2000; Resnick & Burt, 1996). Health risk behaviors are an area of great importance to social workers because overall physical health affects the general quality of life and well-being of the clients and communities served by the profession. Furthermore, there is a relationship between access to healthy lifestyles and social justice, which is of utmost concern to the profession of social work, as the profession’s foundation is rooted in efforts to promote social justice for those it serves. Health risk behavior can affect both current and future health outcomes, resulting in a variety of implications related to the need for social work services. For example, results from one study indicate that health risk behaviors can affect a person’s health status up to 20 years later and behavioral health choices have a significant influence over later health outcomes (Johansson & Sundquist, 1999). Also, health risk behaviors influence the need for levels of social work services based on the overall healthiness of the individuals and communities being served.

Health risk behaviors vary across communities. For example, the health risk behaviors of college students will vary compared to the health risk behaviors of rural, suburban and urban adults. Because of such differences, health risk behavior studies must be conducted in a variety of settings so that social workers will be aware of the specific health needs present in the specific communities they are serving. Knowledge of community health risk behaviors is essential for social workers who engage in the development of community health prevention programs and treatment planning. Assessments of health risk behaviors can assist social workers to develop evidence based health intervention plans that are tailored to the specific health needs of the clients and communities that are being served.

The purpose of the current study, then, was to examine many specific health risk behaviors that have not been previously studied in a rural, Appalachian population in order to begin to fill a gap in the social work knowledge base in this area, with the goal of developing a social work best practices approach to addressing such behaviors in the future. The descriptive results of a study
that examined the health risk behaviors of a sample of residents from rural Perry County, Kentucky are presented here. Most research surrounding rural Appalachia focuses on attitudes towards health, health beliefs, cancer behaviors, obesity and inactivity (Kentucky Institute of Medicine, 2007; McMillan, et al., 2007). The results of this study build on the information available related to such variables and contribute to the literature base by adding information related to health risk behaviors previously understudied in this specific population.

Review of the Literature

Researchers have begun to identify the unique health needs present in rural communities, although there are still limitations related to the scope of knowledge specifically available on rural health risk behaviors. For example, health researchers recently found that rural residents often postpone seeking health treatments due to barriers such as a lack of access to health insurance and greater rates of poverty, while fear of doctors, mistrust of hospitals and affordability concerns were all associated with a lack of treatment compliance and negative health risk behaviors of rural respondents, when compared to urban respondents in the same study (Harju, Wuench, Kuhl, & Cross, 2006). Results from another study indicate that women in rural areas have higher rates of breast cancer mortality likely due to their lack of overall access to healthcare and their lower levels of economic stability (McMillan, et al., 2007). Evidence indicates that Americans can benefit from healthier diets and regular exercise, but research suggests that rural residents in particular have difficulty incorporating such behaviors into their lifestyles and that health behaviors are very difficult to change and maintain, due to the barriers present in rural environments and a lack of will to change (Bowden, Shaul & Bennett, 2003). Thus, the task remains that social workers must identify the barriers present in the communities where they practice and then identify the best way to overcome such barriers with a best practices approach.

Suggestions for improving health risk behaviors have begun to emerge in the literature, although actual best practices recommendations are not fully developed. Atkinson and colleagues (2007) found that low-income mothers in rural areas report a need for community programs and interventions related to nutrition, physical activity and maintaining a food budget. The question remains as to how to best provide these community programs to these mothers. Other studies also indicate that a focus on increasing physical activity involvement is an important solution to negative health risk behaviors in rural areas, as obesity and inactivity have been found to be more prevalent in this population when compared to the general population (Boeckner, Pullen, Walker, & Hageman, 2006; Felton, et al., 1998). The best way to approach increasing physical activity remains a question. Social workers are in a unique position to participate in addressing these needs, as they are present throughout communities in a variety of settings and they are trained in social justice approaches to community programming. Thus further research in this area is called for to provide social workers with the knowledge related to how to effectively address community needs.

While research on the health behaviors of rural residents is limited, the study of rural Appalachian health risk behaviors is even more inadequate. The definition of Appalachia can be found in the Appalachian Regional Act of 1965, which identifies Appalachia as a specific region encompassing 399 counties in 13 states, including both rural and more urban areas, with a history of remoteness and economic instability mainly associated with outsider exploitation of natural resources (Appalachian Land Ownership Task Force, 1983). Although the area defined as Appalachia contains some more urban areas, the area is generally considered remote and encompasses mostly rural populations.

Because of the uniqueness of this area, the health behaviors of Appalachian residents are likely also unique, and health behaviors in Appalachia are understudied and the area is
underserved (McMillan et al., 2007). Available health research on this population indicates that residents have limited knowledge related to cancer risks, have limited understanding of the importance of screening tests, have a basic mistrust of the healthcare system, have a fatalistic attitude towards illness, have a propensity towards the use of religion to deal with illness, and possess health beliefs that are often different from those of Americans in other areas of the country (McMillan et al., 2007; Rosswurm, 1996; Walker, Lucas & Crespo, 1994).

The county where this study took place is located in Central Appalachia, the poorest part of the Appalachian region, in Perry County, Kentucky. Census data from 2004 indicates that 26% of county’s residents were below the poverty threshold, as compared to 16.3% for the state, and 12.7% for the U.S., overall (U.S. Census Bureau, 2008). This county was recently identified as ranking 117th out of 120 Kentucky counties on health risks, indicating that it is one of the top three most health challenged counties in the state (Kentucky Institute of Medicine, 2007). Health recommendations suggest that this county needs to reduce smoking rates, promote physical activity and promote preventive health screenings (Kentucky Institute of Medicine, 2007), thus identifying a need for social workers to engage in community planning that incorporates these identified needs. However, social workers need more knowledge related to other detailed health risk behaviors for residents in this county, in order to provide social workers with adequate knowledge for specific health risk community planning, in this community and similar communities. While the information from the current study cannot be generalized to the population in other Appalachian counties, it does provide information that may be useful when studying the specific health risk behaviors in other Appalachian communities.

Method

In April 2006, the University of Kentucky Prevention Research Center (UKPRC) and its Community Advisory Board, the Kentucky River Community Advisory Board (KRCAB) initiated a surveillance project in Perry County, Kentucky. The KRCAB serves as a formal link between communities in Appalachian Kentucky and the UKPRC. The KRCAB is composed of community members and leaders from communities identified as having significant health disparities, in comparison to other Kentucky communities. Traditionally, surveillance activities have been defined by the reporting of notifiable diseases. Based on initiatives from the Centers for Disease Control and Prevention (CDC), surveillance has also become a process of monitoring health risk behaviors. This process of behavioral surveillance allows public health professionals to monitor trends in health risks and respond with the implementation of timely and appropriately targeted prevention programs. Trends in health risks are particularly important and are monitored best by prospective studies that identify those at risk and monitor them over time.

Recruitment and retention of participants is often problematic for surveillance projects and is particularly challenging in low income, medically underserved populations. A variety of strategies have been used to recruit and retain participants for surveillance projects, including direct mail, telephone solicitation, and partnerships with physicians and public health departments. All of the strategies have had limited success. Interestingly, none of the strategies has the capacity to provide information to individual participants. The first phase of the surveillance project was designed to assess the efficacy of Health Risk Appraisal (HRA) as a recruitment tool for engaging and retaining participants for surveillance. HRA has been used in health education and health promotion programs for decades. In essence, the HRA collects information about an individual, compares the information with population data, and develops probability-based descriptions of selected current and future risks to health for that specific individual.

Health risks commonly covered by HRA include major chronic diseases, accidents, obesity and exercise. Feedback to the individual is one of the key features of HRAs, and it provides a
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The feedback provides individuals with information on their health risks due to their family history and their own behaviors, as well as information on benefits that they may accrue from behavior change. The individualized nature of HRA feedback is an important feature and it was hypothesized that providing such feedback would increase recruitment and retention.

The HRA data collection and feedback portion of this project has been completed. The information provided to the original researchers was so rich in relation to this population that the current researchers decided that a secondary analysis describing the health risk behaviors reported by this group would be a significant contribution to the knowledge base in this area. A secondary analysis of data collected from the Health Risk Appraisal (HRA) Study was conducted to develop a descriptive profile of health risk behaviors of these rural Appalachian adult survey participants.

**Sampling Strategy**

In April 2006, the UKPRC and the KRCAB purchased a mailing list of Perry County residents 18 years and older and randomly selected 501 individuals. A recruitment letter was mailed to all individuals, instructing them to return their letter to a UKPRC staff member if they were interested in the study using the stamped envelope provided and to indicate the best days and times to reach them. The UKPRC staff called interested individuals, obtained informed consent, and conducted telephone interviews. At the end of the interviews, participants were randomly assigned to either receive personalized feedback or a general health pamphlet. Personalized feedback was created using the Personal Wellness Profile (2011), a software application that assesses health risk and then motivates participants to make improvements in their health and lifestyles. All participants were mailed either personalized feedback or a general health pamphlet. UKPRC staff then conducted follow-up interviews at 1, 6, and 12 months. Due to low response rates, the mailing was repeated with another sample of 500 in July and recruitment was completed with a third sample of 6000 in October.

**Results from Sampling and Mailing Efforts**

The total sample included 7001 individual addresses. UKPRC staff identified and removed four duplicates and mailed 6997 letters. Of these, 395 letters (5.6%) were returned to sender due to an incorrect address; one letter was returned with “not interested” specified on the letter; and 18 letters (0.25%) were returned because the individual was deceased. The remaining 6583 letters (94%) represented eligible participants. Among these, 381 letters of interest were returned, representing a response rate of 5.8%.

Of the 381 individuals who returned letters of interest: 1) 124 (33%) were removed for reasons that varied, including three telephone attempts with no contact; a disconnected phone number; the individual was no longer eligible (i.e., the person moved to a different county), etc.; 2) 54 (14%) were contacted and declined the offer to participate; and 3) 203 (53%) were enrolled. Among the enrolled, 104 (51%) were randomized to receive personalized feedback and 99 (49%) were randomized to receive a general health pamphlet.

The purpose of this secondary data analysis was to examine the aggregate of respondents’ self-perceptions of current health and self-reported health behaviors. Univariate statistics are reported to provide a descriptive profile of the sample.

**Findings**

A total of 203 surveys were completed. One hundred fifteen (57%) respondents were female and 199 (98%) identified themselves as Caucasian. The mean respondent age was 51 (SD=13.4).

Findings are reported in the categories of general physical health and familial and personal health history; emotional health; and health behaviors. Responses that indicate particularly high
levels of health risk for the subject county, as compared to statewide and national trends, are highlighted.

**General Physical Health**

Respondents reported numerous health concerns. Twenty-four percent felt they had ‘serious health problems’. Thirteen percent reported their current general health as poor, and an additional 25% reported general health as fair. A large percentage of respondents also related high levels of familial history for several risk factors: Hypertension (71%), heart ailments (47%), diabetes (45%), and high cholesterol (44%).

**Personal Health History**

A large proportion of respondents reported a personal history of specific health problems: high blood pressure (44%), chronic back pain (37%), chest pain (28%), shortness of breath (21%), temporary sensation of numbness or tingling (30%), frequent urination (24%), and sleep problems (50%). Twenty-four percent said that, over the past month, their health problems had either limited their ability “quite a bit” (14%), or that they could not do daily work at all (10%).

**Emotional Health**

Somewhat fewer respondents reported significant emotional problems. Sixty-six percent stated they felt that they were coping “fairly well” or “very well”, with the remaining 34% reporting some difficulty coping. The most frequently cited emotional problems included: feeling tense or anxious (possible symptoms of anxiety disorder) (28%), feeling frustrated or impatient (26%), and inability to stop thinking about problems (23%).

**Health Behaviors**

Twenty-five percent of respondents reported regular tobacco use. Thirty-three percent reported frequently using prescription or nonprescription medications to aid relaxation or sleep. Fifty-eight percent of respondents reported receiving no aerobic exercise in a typical week. Seventeen percent of respondents had not received a physical exam within the past five years.

For items specific to women’s health, 21% of women had not received a pap test within the past 3 years, and 31% had not received a mammogram over this period. Thirty percent said they do not practice monthly breast self-exams.

**Barriers to Physical Activity**

Respondents were asked a series of questions regarding personal walking behaviors, as well as community factors that serve to either encourage or discourage walking. Respondents reported several barriers to walking. For instance, 151 (75%) reported the unavailability of sidewalks, and 142 (70%) said that it was not possible for them to walk to work or school from their homes. Forty participants (20%) reported feeling unsafe when walking in their neighborhoods. However, 155 (77%) reported the availability of walking paths or parks in the community. Eighty-six respondents (43%) said they would like to be personally notified if a walking group was to become available in the future.

See Table 1 for a comparison of the above results with some state and/or national information, when available, on health complaints and health behaviors that were also reported in the current study. Although different methods were utilized to gain the information from the state and national datasets, and thus are not directly comparable, such information is helpful in providing a context for discussion related to the scope of the problems and it facilitates a better understanding of the results from the Perry County study.
### Table 1

*State and National Comparisons of Health Complaints and Behaviors*

<table>
<thead>
<tr>
<th>Type of Health Problems</th>
<th>Current Sample</th>
<th>Kentucky</th>
<th>U.S.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Back pain</td>
<td>37.0%</td>
<td>unavailable</td>
<td>29.5% (comparable age group)</td>
</tr>
<tr>
<td>Hypertension</td>
<td>44.0%</td>
<td>unavailable</td>
<td>23.0% (comparable age group)</td>
</tr>
<tr>
<td>Tobacco use</td>
<td>25.0%</td>
<td>29.0%</td>
<td>21.0%</td>
</tr>
<tr>
<td>Lack of Exercise</td>
<td>58.0%</td>
<td>32.0%</td>
<td>24.0%</td>
</tr>
<tr>
<td>Pap test within past 3 years (n=114)</td>
<td>79.0%</td>
<td>83.0%</td>
<td>82.4%</td>
</tr>
<tr>
<td>Mammogram within past 3 years (n=114)</td>
<td>69.0%</td>
<td>77.0% (comparable age group)</td>
<td>69.5% (within past 2 years)</td>
</tr>
<tr>
<td>Problems with anxiety or tension</td>
<td>28.0%</td>
<td>unavailable</td>
<td>18.1% suffer from anxiety disorders</td>
</tr>
<tr>
<td>Difficulty coping</td>
<td>28.0%</td>
<td>unavailable</td>
<td>26.0% suffer from diagnosable mental health disorders</td>
</tr>
<tr>
<td>Regular alcohol use</td>
<td>12%</td>
<td>20%</td>
<td>23%</td>
</tr>
</tbody>
</table>

*a* Comparison given when available  
*b* National Center for Health Statistics (2006)  
*c* Kentucky Institute of Medicine (2007).  
*d* Hall., Uhler., Coughlin, & Miller, (2002)  

### Discussion

#### State and National Comparisons

Table 1 provides a comparison of the percentage of selected health problems reported by respondents to statistics in the State of Kentucky, when available, and then in the US, overall. In general, residents of Perry County Kentucky reported higher levels of health problems and
involvement in negative health risk behaviors when compared to residents of other counties in Kentucky and residents of the overall United States. For example, residents of Perry County reported a lack of involvement in exercise at over double the rates of the overall United States (58% compared to 24%). Residents of Perry County reported that they experienced back pain at higher rates than the overall U.S. population as well (37% compared to 29.5%), and higher rates of hypertension (44% compared to 23%).

The results of the study suggest that certain measures of the general physical health of this sample are poor in comparison to national levels of health. In addition, the personal health histories of these rural residents indicate that they do not report a history of health behaviors that are associated with positive future health outcomes. Interestingly, their emotional health seems comparable to the emotional health of the nation overall. Yet, the national information available in relation to emotional health is sparse and focused mainly on diagnosed mental illness, thus these comparisons should be interpreted with caution. Furthermore, the health behaviors reported by these residents are concerning in comparison to national information. Of particular concern is the lack of exercise reported by respondents, as the number of respondents reporting that they do not get aerobic exercise in any given week is double the number reporting this nationally. Of additional concern is the fact that one quarter of respondents report regular tobacco use. While this is lower than the state overall (25% compared to 29%), this is higher than the national average and certainly an area of concern to social workers, considering the various and severe health problems associated with tobacco use (Stevens, Colwell & Hutchinson, 2003).

It should be noted that the current respondents did not report high rates of regular alcohol use; 88% reported seldom or rarely drinking alcohol. Although tobacco use in this group was higher than national estimates, it was lower than the average for the state of Kentucky.

A recent Kentucky Institute of Medicine (KIM; 2007) study also found Perry County’s population to suffer from high rates of cardiovascular death, total mortality, premature death, and high rates of lung, colorectal and prostate cancer, in addition to the results reported in the current study. The negative health risk behaviors noted in this current study, in particular the low rate of physical activity, likely contribute to the overall poor health of this community represented in the KIM study.

**Study Limitations**

The complex sampling recruitment strategy, initiated via the U. S. mail, that was used in the original public health survey resulted in a low response rate (5.8%), but, the resulting sample size itself was large enough to provide a substantial amount of valuable descriptive information from a unique and under-researched sample. The authors suspect that the small number of people who did respond to the mailings generated in the original surveillance project did so because they are concerned about their health, they wanted feedback about their health, or they were very conscious of health and thus desired feedback about their health status. On the other hand, those who chose to respond may have significant health problems that they wished to receive information about, so they may represent residents of this county with the most illness. Thus, in this situation, it may either be the healthiest or most health conscious people who responded to the survey or it may be the sickest individuals who chose to respond. Based on the information obtained there is no way of knowing what was unique about those who chose to respond, and thus the current study should be considered exploratory in nature and serve as a basis for the additional research that is needed in this area.

Despite the limitations presented by the low response rate, the authors chose to examine the reported health behaviors of this group because no data is available examining such a variety of specific health behaviors in a sample of Central Appalachian residents, thus the knowledge gained from this secondary analysis provides valuable preliminary data that can inform future...
research efforts with more representative samples. It is unknown if the profile of the study sample is representative of the adult population of the county, and it is unclear if those who self-selected into the study are similar to the larger county population. Therefore, generalizations regarding the health status and health behaviors of the larger population are tentative. The benefits of the current study come in light of a lack of information related to health risk behaviors in rural Appalachian populations, and this case study provides detailed health information for a fairly large sample of residents of an impoverished rural Appalachian county, and is therefore a contribution to the literature. However, this information should be considered preliminary. A larger probability sample from the county would be needed in order to confidently describe the county’s adult population in regard to these variables. Thus, this study should be considered exploratory and should serve to make the case that additional research in this area is needed.

Additionally, comparison data from state and national samples are provided as a general reference regarding the relative health and health risk behaviors of the study sample. As previously mentioned, the statewide and national surveys employed very different methods than did the current study, and therefore, these comparisons should be interpreted with caution. The value of the current study lies in the level of detail provided by participants regarding their familial and personal health histories, their current health, and current health related behaviors, and the implications for social workers practicing in this community.

**Implications for Social Work Practice**

The lack of physical activity reported by rural, Appalachian residents of Perry County, Kentucky is consistent with other studies of rural areas (Aronson & Oman, 2004; Patterson, Moore, Probst, & Shinogle, 2004) indicating that lack of involvement in exercise is prevalent in such populations. The lack of physical activity reported by residents of Perry County, Kentucky is likely the most important health risk behavior that needs to be addressed by social workers who are working in this area, as it has recently been associated with poor health behaviors (Kentucky Institute of Medicine, 2007), it has consistently been associated with many of the other health problems reported by rural residents in other studies, and it has been defined as a leading health indicator for Americans overall. Interventions that promote physical activity in rural populations are warranted, as regular exercise is recommended for preventing disease and promoting healthy lifestyles (Aronson & Oman, 2004; Osuji, Lovegreen, Elliott & Brownson, 2006) and social workers are in a prime position to take the lead in such interventions due to their placements in a variety of settings throughout rural communities. This is extremely important as research indicates that when health behaviors change from inactivity to increased physical activity, overall health can be greatly improved, and increased physical activity is a protective factor against poor health, even in individuals who are overweight or those who smoke (Johansson & Sundquist, 1999).

Specific social work interventions to increase physical activity for this community at the macro level should include social work involvement in community advocacy efforts that address the barriers reported by case study respondents. In particular, social workers could spearhead community efforts to create safe and accessible walking opportunities in this and similar communities. Ideally, social workers could be employed specifically for this purpose. Local health departments are in good positions to write grants to secure funding for such positions. Social workers in health departments could team up with nurses and others working in the health departments to identify possible funding sources and submit grant applications that might fund such positions.

Social workers in Perry County, Kentucky should be enlisted to conduct community assessments to ascertain the limitations that may be present in the community that contribute to the lack of physical activity. Once barriers are identified, social workers can then advocate for
the changes that are necessary. Advocacy efforts should incorporate local customs and knowledge as research indicates this is an important component for community programs targeted towards improving health (Tate et al., 2003), especially with rural and Appalachian populations. Furthermore, other study results have shown that women report that when they have no one to exercise with they are less likely to engage in physical activity (Osuji et al., 2006). Thus, if a specific community assessment indicates that social isolation is also found to be associated with lack of exercise in Perry County, Kentucky, then social workers can organize walking groups through churches, public schools, health departments, and/or local lodges such as the Elks, and/or other trusted organizations. If populations with similar interests, such as parents at the elementary schools, could be connected and organized into walking groups for example, these efforts could go far to eliminate the social isolation that inhibits physical activity and also provide emotional connectedness for the residents of these communities. Since social workers are trained in community assessment skills and they are present in a variety of settings, this is an area where social work could greatly contribute to increasing the overall health of the Perry County community and possible other Appalachian communities, as well.

While there is an obvious need to increase physical activity as identified in this case study, additional health risk behaviors have been identified that also need attention. Residents in this case study reported high levels of tobacco use, which is a health risk behavior widely known to be associated with a lack of good health (Osuji et al., 2006). At the macro level, social workers can take the lead in designing community education programs that promote smoking cessation. Social workers at the micro level can employ their clinical skills to provide treatment programs and lead support groups targeted towards smoking cessation, as social workers are often specifically trained in this type of intervention. Appropriate interventions for Perry County, Kentucky, might be as simple as designing a program that goes around to churches educating congregations on the benefits of smoking cessation and informing individuals what type of help is available and where it can be accessed. Clinical smoking cessation groups could also be offered in a variety of community settings to increase accessibility and decrease potential stigma. Social workers in health departments and medical clinics in this county could advocate offering over the counter smoking cessation medication either free or at a reduced cost based on income, and incorporate such aids into smoking cessation groups. They could seek grant funding, or funding provided from tobacco taxes that would facilitate this effort, as even over the counter cessation aids might be considered prohibitively expensive to impoverished residents in this area. Social workers who are employed in health departments and medical clinics in the area could provide consultation and referrals for residents wishing to stop smoking.

Lack of exercise and high levels of tobacco use were not the only health risk behaviors identified by the residents of Perry County, Kentucky that social workers should be concerned about, as residents also reported a lack of seeking health screenings. Twenty-one percent of female respondents in this study reported not having a pap test in the last 2 years while 31% reported not having a mammogram. The pap exams were slightly behind state and national averages, and the mammogram results were comparable to the national average. This population does not seem to be atypical in terms of the results of these particular health screenings, but nationally, social workers should be concerned about the fact that approximately one in five women may not be getting regular screenings. The health consequences of missing such important health screenings can be dire. Thus, efforts from social workers to improve rates of preventive health screenings are important. Social work advocacy efforts to encourage preventive screenings in this county should be increased when possible, yet the appropriate ways in which to do this are unknown. Some suggestions would be to get social workers to work with community residents to find out their opinions on the best ways to promote and increase screenings so the community will be aware of the availability of and importance of such screenings. An increase in knowledge could be enough to encourage residents to make the effort
to seek out screening services, as it is noted by researchers that community participation is essential for designing effective health services (Tate et al., 2006). An increase in screenings could possibly improve health in the areas where health problems were reported to be high, as 24% of respondents in the current study indicate that their current health problems such as pain, symptoms associated with heart disease and sleep problems significantly limited their activities.

Roughly one third of respondents report problem with anxiety, tension and difficulty coping, thus indicating problems related to emotional health that may affect the ability to achieve good overall physical health. At the micro level, social workers in any setting could assess for emotional health issues that may contribute to a lack of concern for positive health behaviors. By providing clients who are not already receiving interventions related to emotional health with treatment, or referring clients for assistance in these areas, emotional health could be improved and thus a desire to improve one’s overall health could also be improved. This is important in light of findings from another study indicating that negative health risk behaviors often take place in the context of depressed mood (Paxton, Valois, Watkins, Huebner, & Drane, 2007). Social workers in all settings should have the skills to use rapid assessment instruments to gauge the levels of emotional and physical health in their clients so that treatment and referrals can be provided for clients who are not already receiving such services. The use of rapid assessment instruments is beneficial for social workers who wear many hats in rural areas as they provide a great deal of information in the short time it takes to administer them. An example of an effective rapid assessment instrument that can give a social worker information in a variety of areas related to emotion health is the Global Assessment Scale (Hudson, 2007). This particular scale provides information in several areas related to emotional health including suicide risk, drug use and abuse, interpersonal problems, family problems and self-esteem, while it takes only about five minutes to administer to a client. Such scales can help social workers identify problems that may limit a client’s ability to be concerned with good physical health behaviors.

**Implications for Social Policy**

Results from studies such as the one presented here point to a need for more intensive efforts to address negative health behaviors in Appalachia and other isolated rural communities. Federal health dollars need to be dedicated to improving overall health behaviors in Appalachian communities by funding research for community health assessments and for social workers to conduct these assessments and implement the identified changes. Thus, social workers should advocate for this whenever the opportunity arises. Sending emails and letters and placing phone calls to federal lawmakers to draw attention to this issue is a good place to start. Local, state and federal budgets need to include funding that places a social worker in every hospital and clinic serving Appalachia whose purpose is to work with other health professionals to increase physical activity in the area. For example, in Kentucky social workers could advocate for an increase in the cigarette tax that would generate funds that could be dedicated to improving health risk behaviors in Appalachian communities. It is important for social workers throughout Kentucky and in similar states to advocate for such by contacting state lawmakers. Funding also needs to be provided for changes in infrastructure that will promote physical activity in Appalachian communities. For example, public parks need to be added or enhanced in areas where physical activity can take place. Sidewalks need to be a priority in Appalachian communities to enhance walkability. Social workers in Perry County and other similar communities could advocate for this by attending local city council meetings, and arranging meetings with local officials to use their expertise to draw attention to the importance of the issue. Fundraising efforts at the local level are also important. Social workers could recruit assistance with fundraisers from church groups or community college students to raise money for the purpose of adding exercise areas to public parks or to help organize exercise groups.
Mobile screening centers are an important way of reaching isolated residents in communities like Perry County. In light of the overall health behaviors reported by residents in this sample, screening for health problems in order to catch them early seems appropriate. Social workers could advocate for local health departments to divert some of their funds to increasing mobile screening centers. Such units bring access to cancer, cholesterol and other physical health screenings to isolated residents who may not fully embrace the value and importance of such screenings. All mobile health units should be staffed with a social worker who can administer rapid assessment instruments to assess for health risk behaviors and emotional health problems, and then make referrals to connect clients to treatment resources for all identified health problems. Social workers could be conducting these assessments while mobile screening nurses are conducting the physical health assessments, thus providing very thorough and cost effective screenings in one mobile screening visit. If funding for these social work positions is not available, health departments could work together to identify possible grant opportunities for such positions. Social workers could also work with area colleges and universities to identify individuals with grant writing skills to assist with these efforts. Social workers could also organize to advocate for local and state policy change that provides access to health insurance for all residents, as well as greater access to continued care for populations who experience barriers to seeking health care.

Directions for future research

More research is needed into social, economic, and intrapersonal factors related to health risk behaviors in rural Appalachia. The current study identifies lack of physical activity as very problematic for the adults surveyed. Respondents also reported high levels back pain and hypertension, perhaps as a result of low physical activity. However, much more information is needed regarding perceptions about the benefits of, and barriers to, physical exercise in impoverished rural communities. Future research efforts should seek to identify social, economic, and intrapersonal predictors of inactivity, and to examine possible interactions among of these factors. Only when social workers have a thorough understanding of various influences on physical activity will they be able to develop optimal macro and micro interventions toward raising activity levels and improving community health.

Conclusion

Both BSW and MSW level social workers need to be at the forefront of decreasing health risk behaviors in Perry County, Kentucky and other similar communities. Social workers are generalist practitioners with a social justice mission who can be effective in many health related settings ranging from mental health to community health practice. They are educationally trained to practice in both micro and macro areas and are more plentiful than nurses and more economical to employ than doctors. Social workers are uniquely trained to approach problem solving from a holistic perspective that takes into account the different levels of a problem on a micro-mezzo-macro level. Without a commitment from rural social workers towards improving the health risk behaviors in areas like Perry County, efforts to improve overall health in such communities are likely to fail. This paper is essentially a call to action for social justice in these remote and underserved communities. If this profession does not make the effort to improve health risk behaviors in Perry County and similar communities, what other professionals can be expected to fight for a socially just approach to health promotion that is necessary for good health in overlooked communities?
References


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Social Work Student Interests in Rural Practice

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Abstract: This study of BSW and MSW students (N = 122) in the School of Social Work at New Mexico State University reports student attitudes, concerns and interest in rural social work practice and rural social work practice curriculum. Strong support for rural social work practice and concomitant rural curriculum was evidenced by 93% who believed that social workers should practice in rural areas and 22% who ideally want to practice only in a rural community. Originally conceptualized and conducted to gather background data in support of a rural social work practice curriculum minor, its broader implications for rural social work practice curriculum are reported and discussed. Special attention is paid to implications for social work educational programs in rural states.

Keywords: rural, curriculum, practice, student interests

Introduction

Social work is fundamentally a profession born from the social problems related to the industrial revolution in the great cities. The founding mothers of the profession saw urban living as contributing to disenfranchisement and oppression. Jane Adams addressed the problems of Chicago (Addams, 1909), while Mary Richmond worked to resolve issues, first in Baltimore, then with the Philadelphia Charity Organization Society, and lastly within New York. Richmond developed social casework as built on a foundation of addressing problems that were rooted in environmental conditions and social experiences. Those conditions and experiences were related to life in large urban centers (Ehrenreich, 1985).

In contrast to social work as an urban profession, however, social work practice in rural communities has gained a role in social work because of the needs and vulnerability of the rural populations. Some of these populations include those employed in the agricultural work sector (e.g., migrant farm workers) and the working class poor. Given the existence of high-risk populations in rural areas that could be well served by the profession, it is therefore important that schools of social work respond to the need for effective training to serve these groups. Many schools of social work are located in rural states and already focus on the needs of their state populations in terms of rural poverty, limited health care access, geographic isolation and social isolation.

This study examined the interest levels of graduate and undergraduate social work students for post-graduation rural-based social work practice. The objectives of the study were to assess student interest, attitudes and concerns about practice in rural communities and to identify specific rural focused curriculum options from a student perspective. These curriculum options were limited to out-of-department electives, accessibility to a minor or concentration in rural practice, and practicum or field work related.

The value of this study is that it contributes to the limited extent knowledge on rural social work practice from a student perspective. Many of the few existing articles about rural social work practice are dated. Further, this study beneficially examines student opinions about unique practice skills which are consistent with rural cultures. In consideration of the demographics of social work students it would be advantageous to examine their professional interests.
The current study was conducted on the campus of New Mexico State University (NMSU) in the southern half of New Mexico. The location of the university was relevant to the findings as New Mexico presents a profile similar to many other rural states. There are three urban centers (Albuquerque, Santa Fe, & Las Cruces) each with populations in excess of 50,000. Yet, approximately two of every three residents in the state live in rural communities (U.S. Census Bureau, 2007). On the main campus, approximately 18% of NMSU social work students came from urban centers of El Paso or Cuidad Juárez (a population center of 2.5 million within 50 miles of the NMSU main campus).

**Literature Review**

Some literature exists that examines the importance of rural social work practice (e.g. DeWeaver, Smith, & Hosang, 1988; Lohmann & Lohmann, 2005). Social work educators have struggled since the 1920’s with rural social work practice inclusion (Martinez-Brawley, 1985). In addition, there has been attention paid to rural social work practice theory (Ginsberg, 1993) and curriculum development recommendations for educating social work students in preparation for practice in rural settings (e.g. Levin, 1974).

Social work education programs and educators have been surveyed in reference to the relative interest in and inclusion of rural social work practice curriculum (DeWeaver, 1984). The profession’s literature contains a record of the social work profession’s struggle to develop, maintain and expand such rural curriculum (Martinez-Brawley, 1985). Others have examined rural practice educational content as it relates to the characteristics of the social work profession, the encompassing goals of the profession and higher education, and to the organization of the higher education institution to which the social work program is anchored (Campbell, 1982). However, after reviewing the literature, no publications were located that examined student attitudes and interests for rural social work practice.

**Methods**

An assessment was conducted during the spring semester of 2006 to determine social work student interest, attitudes and concerns about rural social work practice and curriculum options from a student perspective. This study was a descriptive, cross-sectional design. For convenience, only students enrolled at the main NMSU campus in Las Cruces, New Mexico were included in the study. The instrument was administered to graduate and undergraduate social work students during either a social work practice or social work research class. The instrument consisted of two pages with 23 items total: five items reflecting sample demographics, ten items reflecting student interests in rural social work practice, and eight items inquiring about preferred curriculum options. Even though the survey was completed during class time, students were not given an incentive for participating in the survey.

The instrument was not normed, nor were items adapted from existing surveys. Instead, items were created to be responsive to a curricular self-study for possible development of rural social work minor at NMSU. Ultimately, findings are not generalizable. However, readers may find value in these findings for curriculum self-study and development.

**Results**

**Demographics**

A total of 122 graduate and undergraduate social work majors completed the survey. Forty-two percent (51) were juniors, 30% (36) were seniors, and 28% (34) were MSW students. The majority were undergraduates (88, 72%) and the remaining were graduate students (34, 28%). Twelve percent (15) were male and 88% (106) were female. The median age of respondents was
27 years (mean age: 29.9 years, standard deviation 9.3 years). Respondents ranged 36 years in age with the youngest being 20 years of age and the oldest being 56 years.

Eighty-six percent (101) reported having either family or friends who were living in rural areas, and 14% (17) did not have family or friends in rural areas. Some respondents had lived in rural areas as long as 50 years and some had never lived in rural areas. The median number of years that the respondent had lived in a rural area was seven years (mean, 11.3 years; standard deviation, 11.3 years). Importantly for a rural state, seven percent (8) of respondents had or currently have a Title IV-E child welfare stipend. Title IV-E graduates in New Mexico are likely to have child welfare employment in a rural community.

Social Work in Rural Communities

The majority of respondents (93.4%, 114) believed that social workers should practice in rural communities; 5.7% (7) believed that ‘maybe’ social workers should practice in rural communities; and 0.8% (1) believed that social workers should not practice in rural communities. After graduation, 54.2% (64) ideally want to practice in small urban cities, 23.7% (28) ideally want to practice in a large urban cities, and 22.0% (26) ideally want to practice in a rural area.

Ninety-seven percent (108) believe (agree or strongly agree) that it is important for social workers to understand rural cultures. Only 2.7% (3) strongly disagree with the need to understand rural cultures. When compared to urban practice skills, the majority of respondents (86.4%, 97) believed that rural social work practice requires specialized practice skills. The remaining 12.6% (14) either disagree or strongly disagree with a need for specialized skills in rural practice. Additionally, 34.2% (38) disagree or strongly disagree with the statement “I like the energy and excitement of living in a big city.” The remaining 65.8% (73) agree or strongly agree with the above statement.

Potential problems associated with rural community life were also identified. The three rural issues of greatest concern included: 30.3% (37) were concerned about lower pay in a rural; 27.3% (33) were concerned about being more isolated; 24.0% (29) were concerned about being further away from family or friends. Of lesser concern: 23.0% (28) identified increased travel time in a rural area and 6.7% (8) were concerned about being able to relate to people in rural areas.

Social Work Curriculum for Rural Practice

Sixty-one percent (67) of respondents believed that ‘a little bit’ of rural-focused content should be included in the social work curriculum. Thirty-nine percent (43) thought that ‘a lot’ of rural-focused content should be in the curriculum and none of the respondents felt there should be no rural-focused content in the curriculum. When asked if the NMSU School of Social Work should provide a concentration in rural practice, the majority (68.2%, 75) agreed, an additional 20.0% (22) strongly agreed, and 11.8% (13) disagreed with having a rural social work second-year MSW concentration.

Practicum (field experience) was another area assessed for student interest. The majority (97.3%, 107) either agreed or strongly agreed that field experience should be offered at rural agencies. Only 2.7% disagreed that field experience should be offered in rural agencies. When specifically asked, if offered a stipend to off-set travel costs, would they (the respondent) consider a field placement at a rural agency, 67.2% (74) stated that they might agree to a rural placement, whereas, 20.9% (23) disagreed and another 11.8% (13) strongly disagreed.

To offer a graduate minor in rural social work, it would be likely that a course would be required in the NMSU College of Agriculture. Respondents were asked if they would consider completing an elective offered by the NMSU College of Agriculture. Thirty-six percent (40) stated ‘yes,’ another 44.1% (49) said ‘maybe,’ and 19.8% (22) said ‘no.’
Lastly, respondents were specifically asked if they would consider completing a minor in rural social work practice. Thirty-one percent (34) stated ‘yes,’ another 45.0% (50) said ‘maybe,’ and 24.3% (27) said ‘no.’

Several factors were identified that influenced student interests. In a 2x2 cross-tabulation with Pearson chi square statistics, it was identified that graduate students were statistically significantly more likely than undergraduates to find a rural community as their ideal practice setting ($x^2 = 4.9, df = 1, p = .027$). Also, descriptive cross-tabs counts revealed that those students who have lived a greater number of years in rural areas, as well as those with friends/family in rural areas, were more likely to ideally want to practice in a rural community. Furthermore, while not statistically significant ($x^2 = 2.9, df = 1, p = .086$), those who viewed a rural community as an ideal practice setting were more likely to want a greater amount of rural focused content in the curriculum. Gender was not found to be associated with desired practice setting or curriculum content.

**Discussion**

The foremost finding of the study was social work student acknowledgement that professional social work should target and serve rural communities. Almost all believed that social workers should practice in rural communities and 22% (26) view a rural community as their ideal practice setting. Thusly, almost all students believed that they should be prepared through curriculum to meet the needs of rural cultures and communities.

This study identified an important group of social work students who intend upon graduation to only practice in rural communities (22%). For these students, it is imperative that curriculum address rural cultures and specific rural practice skills. If the curriculum lacks rural content, students may lack adequate preparation to confront difficult rural cases, thereby resulting in diminished services to vulnerable high-risk rural populations.

In spite of positive interests in rural practice, curriculum may need to address student negative perceptions of rural practice. These areas of concern were identified and could be incorporated into a rural practice curriculum. Specifically, of most concern was a perception of lower pay within rural agencies. This may be easy to address as many rural agencies are competitive and may offer travel cost incentives. Additional concerns included increased travel time, increased isolation, and greater distance from friends and family. Only 50% were concerned about relating to the populations in rural communities.

It might be desirable to share curriculum through the co-offering of courses with a college or school of agriculture. Doing so may prove to be cost effective, but importantly, may provide a useful resource for working with the large agricultural sector in these communities. Colleges of agriculture understand key aspects of agricultural employment and lifestyles. Additionally, through cooperative extension, colleges or schools of agriculture have branch offices in every county in a state. These cooperative extension offices are a structural part of rural communities where technical information on agriculture is provided along with home economics/consumer sciences, and social service programs are often facilitated. Social work students may engage in essential outreach and networking through such connections.

Student interest in a rural practice “minor” option (at the MSW program level) existed and could be a valuable way to infuse rural content into a broader generalist or specific concentration curriculum. The value of this credential would be to give focus to an advanced generalist curriculum and prepares students to enter practice in a rural setting with rural lifestyles and cultures. These students with rural minors may be viewed as a greater asset to employers. Thus, drawing greater employment opportunities and salary.
Overall, in spite of concerns associated with rural practice (e.g., perception of lower pay, isolation from friends and families, increased travel time), almost one of four choose a rural community for their ideal practice setting. Such interests should be addressed by school of social work in rural states and should be taken into account in curriculum self-studies. Future research should address specific issues for states other than New Mexico and develop larger samples for greater generalization.
References


Authors’ Note

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Who Wants To Do Rural Social Work?

Student Perceptions of Rural Social Work Practice

Amy Phillips, Andrew Quinn, & Thomasine Heitkamp

University of North Dakota

Abstract: In response to growing concerns about the national shortage of rural social workers, the researchers surveyed and interviewed 115 social work students (97 BSW, 18 MSW) to ascertain their career plans and perceptions of rural social work practice. Although more than half reported living in rural communities at the time of their high school graduation, over 70% indicated a preference for practicing social work in or near an urban area. Students articulated multiple incentives that would attract them to rural social work and expressed a clear understanding of how various systems (social service, legislative, community, and educational) could provide these incentives and generally encourage and support rural social work practice.

Keywords: rural social work; rural social workers, social work students

Introduction

In 2009, the North Dakota State Data Center reported that between July 1, 2007 and July 1, 2008 the state experienced both a natural population increase and net in-migration. This was the first such combined increase in almost 20 years (North Dakota State Data Center, 2009). It was also extremely good news for a state in which 47 of 53 counties lost population between 2000 and 2005 (Dorgan, 2007). With a total population under 650,000 and with 68% of its counties containing less than 6 persons per square mile (Center for Rural Health, n.d.), years of rural depopulation and out-migration of young people have resulted in serious consequences for North Dakota communities, particularly rural communities. These consequences include school consolidations, hospital and clinic closures, decreased availability and increased costs of goods and services, and loss of workers (N.D. State Data Center, n.d.). Loss of workers includes social workers, many of whom, as with other professionals, prefer to work in the state’s urban areas or may be leaving the state entirely.

Rural depopulation does not mean, however, the disappearance of social problems. As detailed by a variety of authors (Locke & Winship, 2005; Openshaw & Halvorson, 2005; Randall, 2005; Slovak, 2005; Winship, 2004), homelessness, poverty, mental illness, violence, substance abuse, and other problems continue to plague rural communities around the country. Social workers are often on the front line in response to these issues, and in some rural communities social workers may be called on to exercise their skills for the larger purpose of community survival (Blakely & Locke, 2008). Unfortunately, the pool of rural social worker professionals appears to be dwindling, and as the National Association of Social Workers (2006) has noted, “recruitment and retention of social workers for rural practice is a major problem for the profession, leading to declassification, resistance to legal regulation, and the siphoning of social work jobs to those with little professional training” (¶ 2). In addition, the geographic distribution of social workers with expertise in more specialized practice areas is uneven. Only 3% of licensed geriatric social workers, 2% of health social workers, and 2% of behavioral health MSWs are working in rural areas (NASW, Center, 2006).

The rural social work workforce in North Dakota appears to be reflecting national trends. A 2007 report by the Western Interstate Commission for Higher Education (WICHE) Mental Health Program noted that “the entire state (46/53 counties, 23 geographic areas and 16 facilities) is
designated as a federal Mental Health Professional Shortage Area” and that North Dakota is 43rd among states in social workers per capita (WICHE, 2007, p. 3). Although the report focused exclusively on behavioral health workers and was not inclusive of practitioners in all fields of social work, data indicated that North Dakota ranked toward the bottom (7th among 12 regional states) in employment of child, family, and school social workers, and 4th among 12 in employment of mental health and substance abuse social workers (WICHE, 2007). The report noted that recruiting and retaining public behavioral health professionals, particularly in rural areas, is difficult due to competition with private sector salaries and to “problems of cultural and rural competence” (p. 16).

An issue in recruiting social workers to rural areas is the unique dynamics of rural practice that raise concerns for potential applicants. These dynamics include extensive travel over great distances to provide service, dealing with the ethical complications of managing multiple and dual relationships, the lack of formal resources in rural areas, the requirement of generalist practice for MSWs who want to work in primarily clinical practice, and the lack of anonymity as a professional (Gumpert & Black, 2005). In addition, rural areas have fewer jobs that pay a living wage and fewer residents with higher education degrees (Belanger, 2005). All of these factors may be off-putting to young professionals who wish to have a reasonable income, access to professional colleagues, and the social opportunities of urban areas. Further complicating the issue are continued questions about the type of educational content that Schools of Social Work should provide in order to best prepare students for the unique practice of social work in rural areas (Lohmann, 2005). Such preparation requires that educators understand the dynamics of rural practice and can translate this competence to their students (Fulcher, 2002).

To understand how a new cohort of social workers viewed the practice of rural social and the likelihood of their engagement in such practice, the authors surveyed and interviewed undergraduate and graduate social work students from across North Dakota and western Minnesota. Students were asked about their career plans, their perceptions of the impediments and incentives to rural practice, and how social work educational programs could better encourage and train rural social workers.

**Method**

**Permission and Access**

In addition to their own university, the researchers received permission from Social Work Program Directors to survey and hold focus groups at one other university in North Dakota and at two Minnesota higher education institutions bordering North Dakota. All four institutions offered BSW programs, with the researchers’ institution also offering an MSW program. Over the course of summer and fall 2008, researchers met with BSW and MSW students at these institutions during regularly scheduled class times, including field seminars.

**Participants and Data Collection**

Ninety-seven BSW students with a mean age of 27.12 participated in the study. Eighteen MSW students with a mean age of 30.39 also participated. In each social work class, researchers distributed consent forms and discussed the purpose of the study with students. All students agreed to participate. Each student received a survey with 12 questions pertaining to demographics, post-graduation employment plans, and their perceptions of rural social work practice (see Appendix A). After students completed the survey, the researchers conducted a focus group interview with the class using a semi-structured interview format with 19 questions that were similar to those asked on the survey (see Appendix B). With permission from the students, a researcher recorded responses to interview questions on a laptop computer. After the interview, students had the opportunity to add additional information to their surveys, prior to returning them to the researchers.
Results

Quantitative Survey Data

Table 1 provides results for survey questions pertaining to post-graduation employment and licensure plans. As Table 1 shows, most BSW and MSW participants intended to find social work employment upon graduation or practice social work in agencies in which they were already employed. Most participants also intended to seek social work licensure, with North Dakota and/or Minnesota chosen most frequently as states of preferred licensure.

Both BSW and MSW participant groups indicated their preferred fields of practice (in the order of most frequent responses) as family and children services, mental health, and juvenile or adult corrections. Violence and abuse services and medical social work were also frequent responses.

Table 1

<table>
<thead>
<tr>
<th>Post-Graduation Employment and Licensure Plans</th>
<th>BSW</th>
<th>MSW</th>
</tr>
</thead>
<tbody>
<tr>
<td>Find or maintain social work employment</td>
<td>89 (91.7)</td>
<td>16 (88.8%)</td>
</tr>
<tr>
<td>Expect to obtain social work licensure</td>
<td>91* (95.7)</td>
<td>17 (94.4%)</td>
</tr>
<tr>
<td>ND and/or MN as planned states of licensure</td>
<td>88* (95.6)</td>
<td>15* (93.8)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Notes</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>*n=95 useable BSW surveys; n=92 useable BSW surveys; n=16 useable MSW surveys</td>
<td></td>
</tr>
</tbody>
</table>

In addition to articulating post-graduation employment and licensure plans, participants answered questions about the size of their home community and the size of the community in which they planned to practice social work. Response categories were based on Rural Urban Continuum Codes used by the United States Department of Agriculture and the frontier designation used by the Western Interstate Commission for Higher Education. The responses to these questions, found in Tables 2 and 3, provide an interesting juxtaposition between students’ communities of origin and their preferred practice location. As seen in Table 2, 55% of BSWs and 47% of MSWs indicated that they had lived in rural areas at the time of their high school graduation (see responses e., f., and g. on Table 2).

Table 2

<table>
<thead>
<tr>
<th>Place of Residence at Time of High School Graduation</th>
<th>BSW*a</th>
<th>MSW*b</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community size</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. A metropolitan area of 250,000 or more</td>
<td>5 (5.2)</td>
<td>0 (0)</td>
</tr>
<tr>
<td>b. A metropolitan area of 50,000-249,999</td>
<td>13 (13.6)</td>
<td>4 (23.5)</td>
</tr>
<tr>
<td>c. An urban/suburban area of 20,000-49,999</td>
<td>13 (13.6)</td>
<td>2 (11.7)</td>
</tr>
<tr>
<td>d. A town or area of 2,500-19,999 adjacent to a</td>
<td>12 (12.6)</td>
<td>3 (17.6)</td>
</tr>
<tr>
<td>metropolitan or urban area</td>
<td></td>
<td></td>
</tr>
<tr>
<td>e. A town or area of 2,500-19,999 not adjacent to</td>
<td>23 (24.2)</td>
<td>4 (23.5)</td>
</tr>
<tr>
<td>a metropolitan or urban area</td>
<td></td>
<td></td>
</tr>
<tr>
<td>f. A rural area of less than 2,500</td>
<td>26 (27.3)</td>
<td>3 (17.6)</td>
</tr>
<tr>
<td>g. A frontier area of less than 7 people per square</td>
<td>3 (3.1)</td>
<td>1 (5.8)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Notes</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>*n=95 useable BSW surveys; b=n=17 useable MSW surveys</td>
<td></td>
</tr>
</tbody>
</table>

When making selections about their preferred practice location, participants could choose more than one response. Overwhelmingly (73% BSW, 72% MSW), students indicated that, despite their rural roots, their preference was to work in or near a metropolitan or urban area (responses a-d in Table 3).
Table 3

Choice of Practice Location

<table>
<thead>
<tr>
<th>Community size</th>
<th>BSW(^a)</th>
<th>MSW(^b)</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. A metropolitan area of 250,000 or more</td>
<td>24 (10.1)</td>
<td>1 (2.5)</td>
</tr>
<tr>
<td>b. A metropolitan area of 50,000-249,999</td>
<td>55 (23.2)</td>
<td>6 (15)</td>
</tr>
<tr>
<td>c. An urban/suburban area of 20,000-49,999</td>
<td>50 (21)</td>
<td>13 (32.5)</td>
</tr>
<tr>
<td>d. A town or area of 2,500-19,999 adjacent to a metropolitan or urban area</td>
<td>46 (19.4)</td>
<td>9 (22.5)</td>
</tr>
<tr>
<td>e. A town or area of 2,500-19,999 not adjacent to a metropolitan or urban area</td>
<td>31 (13)</td>
<td>7 (17.5)</td>
</tr>
<tr>
<td>f. A rural area of less than 2,500</td>
<td>21 (8.9)</td>
<td>3 (7.5)</td>
</tr>
<tr>
<td>g. A frontier area of less than 7 people per square mile</td>
<td>10 (4.2)</td>
<td>1 (2.5)</td>
</tr>
</tbody>
</table>

\(^a\)n= 237 BSW responses; \(^b\)n= 40 MSW responses

Qualitative Focus Group Interview Data

Raw focus group interview data were analyzed using qualitative coding procedures leading to categories and themes (Lincoln & Guba, 1985; Padgett, 1998). After assigning codes (words or phrases) to lines or paragraphs of interview notes, categories and subcategories emerged to describe groups of codes with similar characteristics. By asking descriptive questions about categories (e.g., who, what, where), and examining the data for answers to these questions, “properties” of categories begin to emerge (Strauss & Corbin, 1998) as well as relational statements and themes.

Table 4 contains a sampling of codes as well as the six categories, and corresponding subcategories, produced by the coding process. Examination of codes and comparison of the relationship between categories resulted in the emergence of a number of themes discussed below.

**Theme 1: Student definitions of “rural” reflect the images and features of rural areas and towns.** When asked what “rural” meant to them, participants rarely mentioned the size of a community. Instead, they described many of the physical features associated with rural areas such as dirt roads, absence of stoplights, agricultural and ranching activity, and consolidated schools, laughing when these consolidations were referred to as “schools with 5 letters in the name” (referring to the abbreviated title of schools referencing five small communities). But participants also identified rural as associated with the unique human features of rural communities, noting that “everyone is related,” “you have a street named after your family,” the sense of community, “families bring their kids to eat in bars—and it’s OK,” and that people in rural areas “hold grudges.”

**Theme 2: Student perceptions of “rural” contain contradictions.** Participants discussed various features of rural life, which reflected inherent contradictions. Rural schools were viewed as being either better or worse than urban schools. Participants reported feeling either safer or less safe in rural areas. Rural communities were described as providing a wonderful sense of community, but residents were also seen as “gossipy” and “nosy.” Living in a rural area generally meant having the good fortune to know everyone, but also meant lacking a sense of privacy. Being a rural social worker meant being able to use generalist practice skills, but a social worker was also seen as “having to do everything.”

**Theme 3: The rural social work workforce shortage reflects interplay between rural dynamics and struggles related to rural social work practice.** When asked their opinions about why there may be a shortage of rural social workers, participant responses suggested that the
Table 4

Focus Group Data Analysis

<table>
<thead>
<tr>
<th>Codes</th>
<th>Sub-Category</th>
<th>Category</th>
</tr>
</thead>
<tbody>
<tr>
<td>Expensive groceries</td>
<td></td>
<td>Rural Life</td>
</tr>
<tr>
<td>Relaxed dress</td>
<td></td>
<td></td>
</tr>
<tr>
<td>“town closed down”</td>
<td></td>
<td></td>
</tr>
<tr>
<td>No Walmart</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dirt roads</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tradition</td>
<td></td>
<td>Rural Culture</td>
</tr>
<tr>
<td>Pride</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Resistance to Change</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Close-knit</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Gossipy/nosy</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Jobs</td>
<td></td>
<td>Lack of….</td>
</tr>
<tr>
<td>Diverse people</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Privacy</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Resources</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Services for clients</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Isolation</td>
<td></td>
<td>Distance &amp; Isolation</td>
</tr>
<tr>
<td>A distance from everything</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Boredom</td>
<td></td>
<td></td>
</tr>
<tr>
<td>“can hear the wind”</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Safe</td>
<td></td>
<td>Safe vs. Safety</td>
</tr>
<tr>
<td>Neighbors help out</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Safety issues</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Violence</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dual relationships</td>
<td></td>
<td>Disadvantages</td>
</tr>
<tr>
<td>Confidentiality issues</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Can’t make mistakes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>“Seen as a social worker, not a social person”</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Generalist practice</td>
<td></td>
<td>Advantages</td>
</tr>
<tr>
<td>Know your resources</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Smaller case loads</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Can be creative</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Like rural life</td>
<td></td>
<td>Reasons for choosing rural social work</td>
</tr>
<tr>
<td>“It’s what I know”</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Need a job</td>
<td></td>
<td></td>
</tr>
<tr>
<td>You make a difference</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low salaries</td>
<td></td>
<td>Reasons for SW Shortage</td>
</tr>
<tr>
<td>Cultural differences</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Burnout/stress</td>
<td></td>
<td></td>
</tr>
<tr>
<td>No jobs for spouses</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Good schools</td>
<td></td>
<td>Community resources</td>
</tr>
<tr>
<td>Entertainment</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Access to amenities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Safety</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Quality supervision</td>
<td></td>
<td>Agency supports</td>
</tr>
<tr>
<td>Mentors</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Agency car</td>
<td></td>
<td>Rural Social Work Incentives</td>
</tr>
<tr>
<td>Good salary</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Loan forgiveness</td>
<td></td>
<td>Legislative support</td>
</tr>
<tr>
<td>Resources for clients</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Agency car</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Benefits</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rotation to city</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Job shadow</td>
<td></td>
<td>Training/Education Needs</td>
</tr>
<tr>
<td>Rotational experience</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rural speakers</td>
<td></td>
<td></td>
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<tr>
<td>Rural course</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rural content</td>
<td></td>
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</tr>
</tbody>
</table>

answer lay in an interesting synergy between the dynamics of contemporary rural life in the upper Midwest/Great Plains and the demands of rural social work practice. Participants discussed “rural
flight” and changing family values, which meant that young people were feeling less pressure to stay in or return to their rural home communities. They talked about low salaries, the lack of opportunities, too much travel, and few or no jobs for spouses or significant others. These factors were paired with their perceptions that being a rural social worker meant being an “outsider,” struggling with dual relationships, having little privacy, and being “seen as a social worker and not a social person.” Being a visible professional in a community also raised fears about making mistakes and being stigmatized because of the “regulatory role” that social workers play. There was also significant concern about a conflict in values. One participant asserted that small towns and rural communities tended to be conservative, while social workers tended to be liberal. This conflict was highlighted by the comment that in rural communities, “you can’t put up your gay pride flag.”

**Theme 4: Many of the components of rural communities that would attract students to rural practice are the very things that are disappearing from rural communities.** Participants were asked what would attract them to rural social work and many who were from rural areas mentioned the characteristics that make them feel connected to their homes: the close-knit sense of community, knowing everyone, “cheaper cost of living,” and enjoying activities such as fishing and hunting. But there was also acknowledgment that attractive components would include good schools, activities for their children, local health care facilities, good jobs for self and one’s significant other, a continuum of services for their clients, and a viable pool of people to date or with whom to socialize. Unfortunately, many of these components are rapidly disappearing from rural areas.

**Theme 5: Incentives for rural social work practice fall into three categories: “what I need;” “what my family needs;” and “what the community needs to have in it.”** Although realistic about what rural areas offered both personally and professionally, students also discussed the components of rural communities that would ideally attract them to rural practice. For themselves, participants listed both personal and professional needs such as potential relationships, social networks, a quality and flexible work environment, and good salary and benefits. For their families, they wanted good schools, activities for their children, and jobs for their significant others. They also noted that they would be attracted to communities which offered good schools, low crime, access to shopping (Target stores were frequently mentioned), diverse people, and child care.

**Theme 6: Incentives are concrete, extensive, and reflect an understanding of how systems (policy-making, social service agency, community) could meet the needs of rural social workers.** In addition to speaking generally about incentive categories (Theme 5), participants were also concrete about the specific incentives that various systems could offer to attract them to rural practice. “Good salary” ($40,000+) and good benefits as well as loan forgiveness were the number one incentives, followed by quality supervision, access to mentors, ability to relocate to a city after five years of rural service, and use of a company car. Other incentives included subsidized continuing education opportunities, subsidized licensure renewal, flexible work schedules with some ability to work from home, relocation benefits, jobs for significant others, and housing options. One respondent’s comments were indicative of a general consensus: “I would want a competitive wage and benefits, also opportunities to further my education and allowing access to CEU hours. Another important factor for me is good supervision and co-workers due to the support and teamwork that is needed to develop a good functioning agency.”

Students also understood the relationship between these incentives and the larger issue of rural community development. They talked about the importance of economic development initiatives and the need to attract diverse people to rural communities. They were clear that community development would be connected to their own personal and professional success.
Theme 7: The success of rural social work practice depends on an accessible continuum of services for client systems. In tandem with community development, and to their credit as developing social workers, students noted the need for a rural continuum of social services in order to feel attracted to rural social work practice. Without services to support clients, participants recognized that their jobs would be considerably more difficult, and the possibility of professional frustration and burnout would be much higher.

Theme 8: The attraction of rural social work comes from an appreciation for the positives of rural life and from an understanding of hallmarks of effective social work practice. When asked about the benefits of practicing social work in rural areas, responses were reflective of participants’ positive experiences with rural life. They noted the quiet and peaceful aspects of rural area, “knowing everyone,” and being able to make a difference because of the smaller, more manageable size of rural communities. Students from rural areas commented on their “passion for rural folk” and that rural life is “what I know.”

Benefits to rural social work practice also reflected the perception that effective social work practices could be more easily implemented in rural areas. Such practices included in-depth knowledge of one’s clients including their informal networks, building positive professional networks to draw on, being grounded in generalist practice, having knowledge of all resources available to clients, being able to get help fast, having the flexibility to be creative, and having smaller case loads. As one participant noted, “I think that it would be easy to master the social service delivery system in your area and also you would be able to build solid relationships with community members and clients.”

Theme 9: Social work training programs play an important role in encouraging and preparing students for rural practice. Researchers asked participants how social work education could be enhanced in order to encourage or better prepare students for rural practice. Although students acknowledged receiving rural content in their education, they had concrete and extensive recommendations for how training programs could be improved in order to dispel stereotypes and excite interest in rural practice. They suggested that rural social workers speak in classes on a regular basis so as to better understand what their daily routine looks like. A required or elective course on rural social work was a frequent response, as was infusing more rural content across the curriculum. Several respondents underscored the importance of a course on working with American Indian communities and the need for course content related to working with groups such as refugees or other New Americans. A course in eligibility programs was also suggested as was more training in leadership and supervision since “you have to become part of the community if you’re in a rural community and… being a good social worker doesn’t necessarily equate to being a good supervisor.”

In addition to course recommendations, getting more exposure to and experience in rural areas and rural social work was a frequent response theme. Going out to rural areas was seen as necessary to “help break down the fear of working in rural areas.” One student noted that it would be helpful if students could “go on a field trip to see that the office isn’t a trailer.” Students also recommended mini rural field experiences, rural volunteer or service-learning activities, and more rural internships. They also suggested that if rural agencies had a stronger outreach presence in social work training programs, more students might be recruited to rural internships or employment.

Discussion

The perceptions offered by participants in this study support much of what is discussed in the literature about rural life and rural social work practice. The study adds to the literature, however, in that it offers feedback from a current cohort of new social workers and provides guidance to policy makers, agencies, and educators who want to address the current drain of professionals from...
rural areas. Participant comments indicated that it would be a challenge to attract many of these students to rural areas and rural social work practice, but there are incentives that might provide encouragement.

Study participants, many of whom were from rural areas, recognized the benefits of rural life such as a slower pace, a “wholesome feel,” a close-knit sense of community, and “knowing everyone.” They could translate this to advantages related to social work practice such as better use of informal networks, smaller case loads, in-depth knowledge of resources, and more frequent use of generalist knowledge and skills at multiple system levels. But students also acknowledged the disadvantages of rural life for one’s personal as well as professional life: lack of jobs (for self and significant other), lack of diversity, lack of resources, the distance to services and amenities, dual relationships, no privacy, being stereotyped as “the social worker,” and fear of making mistakes. In general, student discussion of rural life and rural social work contained contradictions and dilemmas (better schools/poor schools, safe/not safe, generalist practice/have to do everything), and the rural workforce shortage was viewed as resulting from the interplay of negative aspects of rural life and the challenges to rural social work resulting from those aspects. In addition, and unfortunately, the aspects of rural communities that would seem to most attractive to students such as good schools, activities for kids, good jobs, social networks, and services for clients, are the very things that are disappearing from rural communities.

Students were clear that incentives to rural practice were multi-faceted. For themselves, students voiced the need for a flexible work environment, good salary and benefits, high-quality supervision, and access to personal and professional networks. For their families, they wanted good schools, jobs for significant others, and activities for their kids. In addition, the communities in which they lived would need to have good childcare, diverse people, access to amenities, and low crime. These expectations seem to belie the very nature of rural life and underscore the challenges to workforce recruitment. Nevertheless, student participants recognized that incentives were possible via actions on the part of policy making, agency, and community systems. Such actions could take the form of attractive salaries and benefits, loan forgiveness, paid relocation expenses, financial support for licensure and continuing education, job security, agency cars, guaranteed health insurance, opportunities for job mobility and rotation, and development of services for clients.

Finally, students had a number of recommendations for social work training programs. In order to encourage rural practice, students suggested enhanced curricular content, expanded rural experiences, and increased contact with rural agencies.

This study provides guidance for policy-makers who want to work with rural communities to ensure a pool of social service providers in rural areas and for employers who wish to recruit social workers to rural agencies. It also offers advice for social work educators preparing students for practice in rural communities. The results are noteworthy and require a commitment from all groups to address this workforce concern.

**Recommendations for Policy-Makers.**

Policy-makers should be aware that educational stipends have proven successful in recruiting graduates to rural communities. With appropriate legislative leadership, the Title IV-E Child Welfare Stipend Program could be replicated beyond child welfare practice to rural mental health services, for example. In addition, loan forgiveness and competitive salaries are primary and necessary incentives for recruiting service providers to rural areas. Policy makers can also support development of additional technological tools that allow more services to be delivered at a distance and that ensure rural workers quick and routine access to consultants, colleagues, and professional networks. Finally, as policy makers are aware, continued collaboration with rural communities...
around economic development initiatives will encourage the growth of various dimensions of community life that attract and retain workers at various stages of their careers.

**Recommendations for Agency Administrators**

For employers, wages must provide an incentive to live in rural areas, particularly more remote areas, and this may mean offering wages higher than those provided in urban areas. Employers are challenged to educate their boards and commissions about the need for higher wages to assure that they can recruit quality professionals. In addition, it must be recognized that the current practice of declassifying social work positions in certain service arenas in order to hire para-professionals, such as “social work designees,” will not assure the same level of quality in service. This approach must be adamantly challenged by agency directors, supervisors, and the social work field in general. Employers must also assure that quality social work supervision is available to assure professional services and to provide professional development activities that advance professional credentials and attract potential employees.

Employers should also be reasonable in their expectations about employees joining in the cultural and recreational life of a rural community. Professional employees in rural areas must be assured of at least a modicum of personal privacy. Alumni residing in rural communities often stated to the authors that they do not wish to live under a microscope where they have little privacy and which makes managing boundaries even more difficult. Allowing employees to reside outside their work community is a necessary option. Also allowing some professional work to occur via synchronous internet interaction with clients is reasonable and has occurred with success (Krueger, Gibbons, & Northwood, 2004).

**Recommendations for Social Work Educators**

For social work training programs, the challenge is to expand how programs present practice in a rural community. Social work faculty need to ensure that, in addition to delineating the struggles, they highlight the changing complexities, the strengths, and the potential futures, of rural communities. Competence in rural social work practice can be supported by following the suggestions of student respondents to this study which includes developing courses about rural social work, diverse communities, and entitlements, providing increased hands-on experience in rural service provision, and ensuring routine outreach by rural agencies to social work students. As educators move beyond clichés about rural communities and become more intentional about discussing and celebrating rural practice, students will be excited and better prepared to practice in rural communities.
References


Appendix A

Survey of Social Work Students’ Perceptions of Rural Social Work Practice

Today’s Date __________________________

1. The University/College I am currently attending: _____________________________

2. My age: ________

3. At the time of my high school graduation, I lived in:
   3a. ___ A metropolitan area with a population of 250,000 or more
   3b. ___ A metropolitan area with a population of 50,000-249,999
   3c. ___ An urban/suburban area with a population of 20,000-49,999
   3d. ___ A town or area with a population of 2,500-19,999 adjacent to a metro or urban area
   3e. ___ A town or area with a population of 2,500-19,999 not adjacent to a metro or urban area
   3f. ___ A rural area with a population of less than 2,500
   3g. ___ A frontier area with a population of less than 7 people per square mile

4. Please answer all that apply below:
   4a. I am currently employed in a social work position (not including internship):
      ____Yes (Go to 4b or 4d) ____No (Go to 4c or 4d)
   4b. I anticipate continued employment in this position upon graduation (from either a BSW or MSW program):
      ____Yes ____No
   4c. I am currently looking for, or planning to find, a social work job after graduation:
      ____Yes ____No
   4d. ____ I do not plan to practice social work after graduation. (Please explain your answer in the space below.)

5. If you are currently in a social work position, or plan to find a social work position, please indicate the field of social work practice in which you currently work or plan to work (check all that apply):
   5a. ____ Family & Children’s Services
   5b. ____ Addictions
   5c. ____ Mental Health
   5d. ____ Gerontological Services
   5e. ____ Developmental & Other Disabilities
   5f. ____ Juvenile and/or Adult Corrections
   5g. ____ Violence & Abuse Services
   5h. ____ Information & Referral
   5i. ____ Income Maintenance
   5j. ____ Community Development
   5k. ____ Occupational Social Work
   5l. ____ Medical Social Work
   5m. ____ Other

6. I am planning to secure a social work license upon graduation: ____ Yes ____ No
   If yes, in what state(s) do you intend to be licensed? ____________________________
   If no, why not?

7. I plan to practice social work in one of the following areas (check all that apply):
   7a. ____ A metropolitan area with a population of 250,000 or more
   7b. ____ A metropolitan area with a population of 50,000-249,999
   7c. ____ An urban/suburban area with a population of 20,000-49,999
   7d. ____ A town or area with a population of 2,500-19,999 adjacent to a metro or urban area
   7e. ____ A town or area with a population of 2,500-19,999 not adjacent to a metro or urban area
   7f. ____ A rural area with a population of less than 2,500
   7g. ____ A frontier area with a population of less than 7 people per square mile
8. Regarding your answer to Question 7, please explain why you are making this choice:
9. What do you consider to be the draw-backs, or problems, with practicing social work in a rural area?
10. What do you consider to be the benefits of practicing social work in a rural area?
11. If a rural agency were trying to recruit you, what factors would have to be in place for you to accept the job? (Some factors might include salary/benefits; continuing education opportunities; quality supervision; flexible work schedule; access to social factors such as entertainment, peers, shopping; family in the area; other)? Please answer this question as honestly and with as much detail as possible.
12. What aspects of your social work education could be enhanced to better prepare you for or to excite you about rural social work?
   
   Thank you for completing this survey!
Appendix B

Focus Group Questions for
“Social Work Students’ Perceptions of Rural Social Work Practice”

1) What is your home state? Are you from a rural/urban/suburban area?
2) What does “rural” mean to you?
3) What do you see as the advantages and disadvantages to living/working in rural areas? (Even if you have not lived in a rural area.)
4) Do you have a social work job lined up after graduation? OR do you plan to find a social work job after graduation? (If not, why not?)
5) What field of practice do you hope/plan to work in?
6) In what setting do you plan/hope to work? Rural/urban/suburban?
7) Why are you making this choice? (i.e., why choosing to work in rural area or choosing NOT to work in a rural area)
8) There is increasing concern about the shortage of social workers in rural areas. How do you explain this shortage?
9) Why do you think rural areas have a hard time attracting social workers?
10) What would attract you to working in a rural area? What incentives would convince you to live/work in a rural area?
11) If you were talking to a group of legislators about what resources, services, or other incentives the state could provide to convince you to work in a rural area, what would you tell them?
12) If you were talking to rural agency directors about what benefits, salary, work schedule, etc. agencies would need to provide to attract you to them, what would you say?
13) Do you feel it would be helpful to have training and mentoring opportunities available to you to attract you to/keep you doing rural social work?
14) What do rural communities need to have in them to attract you to work there?
15) What makes you nervous about living in a rural area?
16) What excites you about living in a rural area?
17) Do you feel prepared to work in a rural area?
18) What additional courses/training do you think would help prepare you for rural social work?
19) What else could a social work department do to prepare students for and encourage students to engage in rural social work?
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Faculty Perceptions of Differences between Teaching Rural Appalachian and Urban Social Work Students

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Abstract: Faculty who teach social work students in both rural Appalachian colleges and urban settings often notice differences in how these students approach learning and respond to the classroom environment and university setting. There is limited research on how Appalachian college students experience higher education and how they perceive the benefits of a college degree. This qualitative study explored the perceptions of social work faculty members at three Appalachian and three Midwestern universities, who have taught rural Appalachian students, as well as students from urban areas. Findings indicated that faculty mostly viewed Appalachian students as being different from urban students. Appalachian social work students often focused on the practical aspects of learning, but like many urban students they were intuitive, creative, and adept at problem-solving and critical thinking. Rural students were more inclined to benefit from practice methods oriented toward rural practice. Implications for practice are discussed with an emphasis on faculty members being aware of Appalachian culture and, in turn, directing their teaching style and methods to possible learning differences.

Key Words: rural Appalachian students, urban students, rural social work education, social work educators’ perceptions of students

Introduction

Educators have observed that rural Appalachian college students often approach learning differently than their urban counterparts and may require alternative approaches to instruction and support services from the university. Dees (2006) called for educators working with Appalachian students to take stock of their own perceptions and consider culturally sensitive strategies in their classrooms. The purpose of this study was to explore faculty perceptions of differences in teaching and working with rural Appalachian and urban social work students. The authors interviewed social work faculty who had taught rural Appalachian students in either Baccalaureate or Master of Social Work classes in the Central/Northern Appalachian region and Midwest. Social work faculty stated that their students are generally committed to a professional or pre-professional educational curriculum that prepares them to work with others in community-based service delivery. There was an expectation that faculty who had taught both rural Appalachian and urban students would perceive distinct attitudes toward learning in each of these student populations and also be able to suggest strategies for culturally competent teaching and support.

Literature Review

Appalachian students in higher education demonstrate attitudes and learning approaches that are unique to the culture and warrant careful attention by the classroom instructor. Some studies have found that Appalachian students are strongly affected by their culture which influences attitudes toward education as well as learning style (Cox, Sproles, & Sproles, 1988; DeYoung, 2007; Dees, 2006; Speer, 1993; Wallace & DieKroger, 2000). Appalachian students frequently attempt to form a more open, holistic perception of the world, while adhering closely to the cultural perspectives of sense of place and community (Dees, 2006). These struggles are often complex and change in accordance with their negotiation of the cultural system that exists within each university classroom. Dees (2006), moreover, stated that educators need to better...
understand the complexities of this struggle which might, in turn, enhance faculty practices and perspectives with rural/Appalachian students. Helton (2002) found that faculty members working with Appalachian students frequently spend additional time helping them with their class work and utilizing university support systems, such as tutoring and mentoring services, in order to assist students with learning continuity and matriculation.

Appalachian students’ perceptions of education, as well as their learning styles and methods, seem to be undergirded by definitive Appalachian cultural values. Jones (1994), a well-known sociologist and Appalachian scholar, identified ten beliefs and traditions that comprise Appalachian cultural values. Appalachian people espouse the values and beliefs of their pioneer ancestors. These values are: a) independence, self-reliance, and pride; (b) neighborliness; (c) familism; (d) personalism; (e) religion; (f) humility and modesty; (g) love of place; (h) patriotism; (i) sense of beauty; and (j) sense of humor. These core values affect the students’ approach to learning and how they perceive the possible benefits of continuing their education beyond high school.

These Appalachian values and life traditions affect not only interpersonal relationships but also affect how Appalachian people view their world. Appalachians are personalistic and value interpersonal relationships and may go to great lengths not to offend others (Hicks, 1976; Jones, 1994; Weller, 1965). They generally prefer an informal style of communication, are individualistic, and self-reliant, and develop strong kinship ties that they maintain throughout their lives (Helton & Keller, 2010; Crissman, 1989; Hansen & Resnick, 1990; Jones, 1994; Yeltson & Nielson, 1991). Historically, Appalachian people, who largely live in rural areas, have depended on neighborliness and hospitality and support one another during times of need. Appalachians, moreover, tend to be spiritual and have strong religious beliefs grounded primarily in Protestant fundamentalist belief systems. These religious beliefs lead Appalachians to possess an egalitarian attitude toward others, feeling that they are not better or less than their fellow human beings. They typically have a strong sense of place and an extremely close attachment to the Appalachian region. Appalachians are also characterized by an inherent sense of beauty as evidenced by their closeness to nature, their love for music, and their ability to create exquisite handmade crafts such as baskets, dolls, quilts, and furniture. A sense of humor is also identified as a common Appalachian cultural trait and has often helped the people to cope during hard times (Jones, 1994).

Cox, Sproles, & Sproles (1988) studied secondary students and found that rural students appear to be more committed to and engaged in the educational process than urban students. A large proportion of rural students, in fact, were found to be serious analytical learners and active, practical learners. From the teacher’s perspective, this represents a desirable characteristic of rural learners. It may also appear that teachers in rural settings do not experience the same magnitude of potential learning problems as do their urban counterparts. This research suggested that teachers in rural settings should tailor their teaching toward youth with more serious and active learning styles.

Several crucial elements have been identified as critical for educating students for rural social work practice. Students seem to benefit most from a generalist education as well as completing their field instruction in a rural area. Moreover, the curriculum should contain materials that address rural social problems, rural social policies, rural community behavior, and rural intervention methods. Students should also be prepared for independent, minimally supervised practice and have a high degree of sensitivity and skill in relating to various socioeconomic classes and ethnic groups (Ginsberg, 1976; Lohmann & Lohmann, 2005).

Appalachian parents/families hold to a pragmatic philosophy of education and subscribe to educational methods that they perceive as being useful to their children. That is, children are
expected to enter into a vocation or trade that is practical and has concrete returns, i.e. steady pay and adequate resources to support a family (Helton, 1995; Reck & Reck, 1980; Wilson, Henry, & Peterson, 1997). Children are also expected to learn to deal with the world at large and cope with present circumstances (Borman & Stegelin, 1994). DeYoung (2007) conjectured that young people in Appalachia do not perceive a college education as practical or as an enrichment of their lives; this attitude is frequently engendered by the family who hopes their children will stay in the community and take whatever general labor jobs are available close to home. Wallace & DieKroger (2000) found that Appalachian families communicate discouraging messages about pursuing higher education, especially for young women. Some regional and urban Appalachian parents hold high educational expectations for their children, although they may not be able to articulate how such aspirations will be realized (Helton, 1995).

**Research Methodology**

This qualitative study involved ten social work faculty members, two males and eight females, from three regional Appalachian universities in Ohio, West Virginia, and Kentucky and three urban universities in the Midwest. The selection criteria were that these faculty members had taught both rural Appalachian and urban students of social work at the pre-professional or professional (BSW or MSW level). A convenience sample was used and participants volunteered to take part by completing a 10-question survey followed by a one hour qualitative interview in person and/or by phone. Possible participants were either contacted directly, or requests for participation were mailed to their departments of social work. For their convenience, faculty members were also given the opportunity to complete the survey and submit it by e-mail attachment. This study was approved by the researcher’s Institutional Review Board, which ensured ethical research procedures and confidentiality for all participants in data gathering, data analysis, and information dissemination.

Consistent with qualitative research methods (Spinelli, 1989), the author completed cross-case thematic content analysis by identifying and coding themes across each set of participants’ responses, compared the two separate analyses and then reached agreement on the themes’ content and interpretation. A colleague who had taught both rural Appalachian and urban social work students also reviewed and provided input regarding data analysis. From the beginning of the data analysis period, the researcher carefully bracketed or separated out and set aside any a priori assumptions about the participants and the subject being studied in order to approach the study and findings with an open mind (Gearing, 2004). A non-Appalachian social work colleague reviewed the data collection and analysis procedures and provided ongoing feedback. Since the researcher is Appalachian, this collaborative arrangement to avoid researcher bias may have yielded a more genuine approach to data gathering, decontextualization, recontextualization, and analysis of the central themes and relationships across data sets. That is, data could be cross checked for unbiased conceptual analyses of meanings. One limitation to this study was its being limited to social work faculty who had taught both rural Appalachian and urban students. Faculty members who had taught only in one area (i.e. urban or rural Appalachian) were not included in the study. Another might be its inclusion of only university faculty in the Central/Northern Appalachian and Midwestern areas.

**Research Findings**

Qualitative data from the surveys and interviews were analyzed, coded, and separated into five major categories: Rural Appalachian and Urban Students’ Values and Beliefs; Differences in Students’ Learning Styles and Language/Speech Patterns; Different Teaching Techniques Used with Appalachian vs. Urban Students and Suggestions for Teaching Social Work to Appalachian Students for the First Time.
Rural Appalachian and Urban Students’ Values and Beliefs

From the data, a range of images arose regarding Appalachian students in the classroom. These students were observed to demonstrate an informal manner of communication and to lack “good writing skills.” Faculty sensed that many Appalachian students were not prepared for college in terms of not having had the necessary pre-requisites especially in writing and math. Nevertheless, Appalachian students were thought to be earnest and highly motivated about getting an education. They were often empty nest females returning to school, hard-working women who expect education to take a long time. Many Appalachian students were working class and adhered to the philosophy that life is a struggle. On the other hand, faculty members reported that their twenty year-old rural students “look like everyone else” in terms of their learning and believed that technology and media access have made a difference for rural Appalachians. Appalachian students were also described as not unlike other students who have experienced or been affected by high poverty rates, low employment opportunities, and low literacy levels.

Social work faculty members noticed distinctions between first generation and second generation Appalachian students. First generation Appalachian students were described as being more entrenched in Appalachian values and truly considered education to be a privilege. Sometimes, they appeared to seek acceptance about being in school—they needed validation that they could “make it” in college. They also asserted that they would “carry their learning back home” and share their success within the culture. Appalachian students’ approaches to learning were described as being similar to those of older and minority students.

Second generation Appalachian students demonstrated better literacy skills and “were less colloquial in both their values and their speech.” Second generation Appalachian students tended not to identify their cultural heritage as readily because of possible stereotyping. One faculty member noted: “They seemed more forward, direct in communication, and more liberal and flexible in terms of values and world views.” Moreover, faculty members perceived second generation Appalachian students as more motivated to pursue advanced graduate or professional studies and seemed similar to other students in the classroom, perhaps in part due to media exposure. A faculty member expressed, “it’s as if second generation Appalachian students grow up with a strong expectation for success, the motivation to do better than their parents have done, educationally and economically.”

Appalachian and urban social work students expressed clear differences in their personal values and beliefs. Appalachian social work students demonstrated a strong sense of humility, were personable, eager to help others and more tolerant of individual frailties. Male Appalachian students tended to be more reticent and non-verbal, yet they were good with written work. One faculty member stated, “I sometimes encourage my male Appalachian students to engage in classroom dialogues by posing key questions from their field practicum logs or other written assignments; that seems to break the ice a bit.” Appalachian students hoped for a better life through education but had lower expectations regarding grades and achievement. Some needed help from student services to address their learning needs. Some students felt that they were discriminated against and did not fit in.

Overall, Appalachian social work students were more conservative in their beliefs about gender roles, sexual orientation, and pro-life issues. Religion played a major role in their lives and contributed to their fundamentalist beliefs. They were family oriented, had a slower paced time orientation, were dominated by the work ethic, and believed that education should always be practical. These values and worldviews were especially thought by faculty to enhance the rural Appalachian students’ capacity to succeed in community-based field work internships. Most faculty members interviewed indicated that they expected their students to remain in the
Appalachian region or to work in rural areas where many of their core values would be more easily accommodated in their work.

Conversely, urban students were upwardly mobile and were often overachievers. Urban college students were less likely to be first generation college students and possessed not only high aspirations but a definitive plan for their education and career. They seemed to feel that education was more of a right and were more open to being mobile, i.e. not seeming to be tied to a place. However, those urban students similar to the Appalachians were African American and they often felt “outside the norm.”

Overall, urban students had a faster-paced time orientation and were more liberal. They were more open to diversity and alternative lifestyles and seemed to be less tied to moral values. They were upwardly mobile, more competitive, and future-oriented. They generally were not first generation college students.

Differences in Students’ Learning Styles and Language/Speech Patterns

A major theme which emerged was identifiable differences in language, speech patterns, and written expression. Appalachian students spoke with more of a dialect and had informal speech patterns, especially if they were first generation. Also, students from different parts of Appalachia demonstrated dialectical variation. Organizing written work was a major challenge and grammatical errors seemed to be related to regional dialect and spoken language style. Typically, written expression fell short of the richness of their verbal expression. A faculty member asserted, “Appalachian students talk like they write and write like that talk.” Still, they exhibit an excellent ability to “tell stories and use symbols and metaphors related to their life experiences.” One social work practice professor discussed a divorced mother of three, in her mid-fifties, who returned to college for her baccalaureate degree. She had told the story of her father’s quest to become “an educated man.” He had been a coal miner, but when the mines in West Virginia were closed he worked a full time job as a laborer and attended night classes to pursue his college degree in secondary education. The student proclaimed, “That was my motivation to get my G.E.D. and go back to school; my Daddy was my role model.”

Differences in Rural Appalachian and Urban Students’ Learning Styles

Appalachian students were thought to be more reflective and to take more time to process information. They demonstrated an eagerness to learn and were “very inquisitive.” One participant noted that although they were excited about learning, students tend to work and go to school concurrently; therefore they may cut corners on assignments. Their learning may be affected by economic pressures, i.e. a lack of funds and they may “put family needs first and school second.” They seek additional help at the outset but quickly catch up. Appalachian students do not ask many questions but demonstrate “a unique creativity in thinking outside the box.” They are less technologically oriented and show more interest in the application of concepts as opposed to theoretical paradigms.

Urban students were thought to demonstrate a more direct learning approach, to be more verbal, to ask more questions and to speak out more in class. Urban students, moreover, work more independently on assignments and are less likely to ask for outside help. They show more abilities at the outset of the learning process and show more initiative, especially in expressing their own ideas. Urban African Americans were observed as having similar speech patterns to Appalachians and also experienced challenges in written expression. Urban students were noted to apply critical thinking and better understand theory bases.
Different Teaching Techniques with Appalachian vs. Urban Students

Faculty indicated that they spent more time with Appalachian students, who often require more written prompts and assistance with written assignments. Others shared that they give more concrete examples and shorter assignments to Appalachian students. Some stated that more discussion is necessary so that students can relate the material to their own experience. Faculty sometimes allowed more lenience in grading the writing assignments of Appalachian students. Providing reading lists, calling absent students, and referring students to the writing center were techniques thought to be instrumental in helping Appalachian students succeed. However, some faculty members stated that there is really no difference between learning styles of Appalachian and urban social work students. That is, one’s teaching style should be tailored to the students’ unique learning style, regardless of culture.

Appalachian students were perceived as relating well to the needs and issues of rural populations. This teaching focus should include an emphasis on the significance of networking with other professionals due to further distances and fewer resources in rural areas. Faculty members stated that they taught to the values of the culture, that is, they showed cultural sensitivity to Appalachian values and beliefs which most likely affect interventions (e.g. family centered counseling, the role of religion, traditional gender roles and the use of informal resources). Appalachian students tend to be underexposed to other geographic areas and different ethnic and religious groups.

Some faculty also indicated the need to focus more on “at risk” issues as opposed to geographic settings because some students choose to work in urban areas. Case studies and ethical issues from rural areas were thought to be more appropriate for Appalachian students, who for the most part, choose to stay and work in rural areas where they grew up. Urban students often have more resources and access to services may be more immediately available, e.g. crisis intervention, emergency services, age-specific, and specialized services. Some faculty felt that it was important to use their own practice experiences in rural and urban areas in their teaching.

Suggestions for Teaching Social Work to Appalachian Students for First Time

Social work faculty suggested a range of strategies for teaching Appalachian students for the first time. They believed it essential to learn about the Appalachian culture, especially the students’ history and values, and struggles in adapting to the larger American culture. They thought, moreover, that faculty must recognize and appreciate unique Appalachian ways of learning affected by the culture. They felt that faculty should not lower their standards, advising that one should start where the students are and then slowly move them to higher levels of expectation in verbal and written communication, classroom performance, and practice skills. Diversity in Appalachian students can be expected, and as one faculty member asserted, “we should always challenge our assumptions and stereotypes about this cultural group.”

Conclusion

Social work faculty viewed Appalachian students as different from urban students, but also perceived similarities between the two groups, especially in urban minority students. Moreover, faculty had more specific and often stereotypic views of Appalachian versus urban students. Appalachian students were thought to benefit from learning social work practice methods directed toward rural practice, as many will work in rural areas. Educators need to be aware of the Appalachian experience in order to direct their teaching to possible learning differences.

Social work educators perceived both rural Appalachian and urban college students to exhibit distinctive learning patterns and attitudes. The author’s findings concur with those of Dees (2006) who indicated that, early on, rural Appalachian students are strongly socialized into a culture with a strong commitment to family, community, religion, and traditional gender roles.
However, the strengths of this cultural value system, based in a significant commitment to family and community, may paradoxically be the greatest challenges for many university educators.

This study concurs with Dees’ contention that educators must consider their own perceptions of and attitudes toward Appalachian college students and their culture. Such reflection can go a long way in creating a less stressful and more culturally competent classroom environment for students from Appalachian cultural backgrounds. Appalachian college students are often intuitive and creative and reflect an intense dedication to learning. The findings of this study are also consistent with those of Wallace and DieKroger (2000) who found that many Appalachian students who succeed at higher education possess a strong internal locus of control, i.e. an innate penchant for learning. Educators must be forever aware of the differences between rural Appalachian and urban college students and adapt their teaching style to accommodate the learning needs of each group.
References


**Author’s Note**

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Can Establishing Partnerships between College Campuses and Nonprofit Organizations Be Mutually Beneficial?

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Abstract: More than ever nonprofit organizations need to find creative ways to be resourceful and cost effective in achieving their mission. Partnerships between college campuses and nonprofit organizations can be a mutually beneficial way of meeting nonprofit’s program goals while empowering college students, who are the next generation of volunteers, donors, and professionals. With these partnerships, nonprofits gain new ideas and extra working hands though established projects while students gain field experiences and the opportunity to apply their course knowledge. With this article, readers will understand the benefits of building as well as a step-by-step model to develop such partnerships.

Keywords: volunteerism, nonprofit organizations, students, civic engagement, community partner

Introduction

Nationally, nonprofit organizations are facing intensive pressures to be more financially accountable, be more creative with achieving their mission, and be more resourceful with serving client needs. With current regional, state, and federal budgetary crises have forced all aspects of human service delivery to figure out how to do more with less. Successfully, universities are further expanding their value of civic engagement and promoting the importance of a well-rounded student who is balancing academics, co-curricular activities, and field experiences. Bringing nonprofit organizations and universities together can be beneficial to both partners.

Nonprofit organizations have utilized volunteers in many different ways. According to the Bureau of Labor Statistics of the U.S. Department of Labor, “About 61.8 million people, or 26.4 percent of the population, volunteered through or for an organization at least once between September 2007 and September 2008” (United States Department of Labor, 2008, p. 1). “People who are more trusting and/or endorse helping others as an important goal in their lives are more likely to start volunteering, are less likely to quit, and are more likely to have charitable confidence” (Bekkers and Bowman, 2008, p. 891). Volunteerism is something that we have learned, particularly from family and friends (Tomkovick, Lester, Flunker, & Wells, 2008). It also can be something we learn from repeated volunteerism. For example, once a person volunteers and finds value in their contributions, they are more likely to value volunteerism. It is something we learned from governmental leadership when addressing economic recovery. President Obama stated “I’m calling on all Americans to make volunteering and community service part of your daily life and the life of this nation” (Corporation for National and Community Service, 2009).

Utilizing volunteers from a college campus is not new. But, the number of ways that nonprofit organizations and college campuses can partner is evolving. The research of successful partners has been increasing. For example, one way of advancing the relationship between college campuses and nonprofit organizations is to partner with a corporation. ExxonMobil offers a Community Summer Jobs Program (CSJP) which helps unite college students with nonprofit organization. “The eight-week paid internship program, now in its 38th year nationally, offers nonprofits much-needed help during the busy summer months and encourages college
students to pursue careers in the nonprofit sector and to be active members of their communities” (Anonymous, 2009, p. 37).

In addition, the concept of volunteerism is taking on the terminology of “renewable resources” in their article called *It Ain’t Natural Toward a New (Natural) Resource Conceptualization for Volunteer Management* (Brudney & Meijs, 2009). This source further explains that we need to engage in partnerships that are mutually meaningful, so volunteers find value in the experience and then want to engage in more volunteering in their future.

“Results of a 1998 national survey of 1,030 Americans demonstrate that two out of five volunteers have stopped volunteering at some point because of one or more shortcomings in the way organizations manage (or fail to manage) volunteers, such as not making good use of volunteers’ time or good use of their talents, or not defining volunteer tasks clearly” (Brudney and Meijs, 2009).

This concept of “renewable resources” further emphasizes the importance of keeping volunteers so they will continue to engage in other volunteer activities within the particular nonprofit organization.

Current and former Presidents of the United States are placing value on and promoting volunteerism. October 2009, President Bush was awarded at the Point of Light 20th Anniversary for his volunteerism effort (Obama, 2009). “In his 2002 State of the Union Address, President Bush (2008) called on all Americans to dedicate at least 4,000 hours of their lives to volunteer service; he repeated that call in a September 8, 2008 speech at the White House” (Brudney & Meijs, 2009, p. 568). Then President Obama has directly addressed the need for colleges to promote the “spirit” and “willingness” of volunteering (Sarkisian & Taylor, 2009). In addition, the Obama administration has implemented the “United We Serve” initiative and created a user-friendly website for citizens to find, create, and reflect on volunteer opportunities. The Corporation for National and Community Service states “America’s foundation will be built one community at a time– and it starts with you” (2009).

According to Tomkovick et al., (2008) they “found that past volunteerism behavior was the most powerful determinant of future volunteerism behavior” (p. 14). Tomkovick et al., (2008) further “furnished evidence to back the belief that volunteers expect to achieve personal outcomes through their volunteerism” (p. 15). In conclusion, volunteers that value their experiences were more likely to volunteer again (Tomkovick et al., 2008). From this author’s experiences, she found these points to be true as well.

This article will further explore the benefits for college students and nonprofit organizations. It will also address some possible obstacles that nonprofit organizations should consider. The later portion of the article will process a step-by-step model of how nonprofit organizations can engage in such partnerships.

**Student Roles in Nonprofit Organizations**

Historically, university students have volunteered at nonprofit organizations. These partnerships continue to move in the direction of being more functional and beneficial for both nonprofit organizations and college students.

“Volunteers of both sexes spend a median of 52 hours on volunteer activities during the period from September 2007 to September 2008. Median annual hours spent on volunteer activities ranged from a high of 96 hours for volunteers age 65 and over to a low of 40 hours for those 16 to 19 or 25 to 34 years old. The 20 to 24-year-old group showed the largest over-the-year change in median hours volunteered, increasing by 7 hours to a median of 48 hours” (United States Department of Labor, 2008, p. 2).
College students have many opportunities to volunteer at nonprofit organizations. For example, students have individually volunteered at nonprofit organizations or maybe they volunteered as a group with their student club, their fraternities or sororities. Historically, students have also provided beneficial labor in the form of internships. Many internships offer free or inexpensive labor to the nonprofit organization while the student gains marketable, professional experiences.

Students can also participate in class projects that are assigned by individual professors. These opportunities can serve a purpose for nonprofit organizations. Such partnership would be more beneficial for a nonprofit organization that has a list of short term needs to be met. Because a “class project” is most likely time sensitive, it is important that the nonprofit organization needs or projects fit the “class project” requirement. Other factors to consider with “class projects” are the number of students that would be involved, their number of required volunteer hours, and their assignment requirements. Many “class projects” are excellent ways to engage a large number of students in nonprofit organizations. A successful example is a rural nonprofit community foundation that wanted to update their downtown business district and so they contacted a professor that teaches a landscaping course. The students then tour, research, and created possible design proposals to provide to the community foundation as possible, cost effective ways to spruce up their main street. Yet, sometimes these “class project” can also be viewed as “mandatory” volunteering meaning that the student is only committed to the nonprofit project became they “have to” meet a course requirement which could possible yield less then beneficial outcomes.

A newer type of partnership between universities and nonprofit organizations is Service-Learning. Service-Learning has been developing on campus communities across the country. Service-Learning takes those traditional “class projects” a step further. While staying true to the academic requirements and goals, it further seeks to meet a “community need” of a nonprofit organization. “Service-Learning is a teaching and learning strategy that integrates meaningful community service with instruction and reflection to enrich the learning experience, teach civic responsibility, and strengthen communities” (RMC Research Corporation, p. 1). The focus has moved from achieving a certain number of volunteer hours to meeting a need of a community partner.

Another way to further unite universities and nonprofit organizations is though Financial Aid work-study programs. According to Jay Larson, at a Midwest University, students that are awarded work-study funds can use these funds at a nonprofit organization (J. Larson, personal communication, May 12, 2010). Mr. Larson further reported that there are several key required parts. For example, he noted that the placement site needs to be a recognized nonprofit organization; either public or private is approvable (J. Larson, personal communication, May 12, 2010). He also noted that there needs to be a written agreement between the university and the nonprofit organization (J. Larson, personal communication, May 12, 2010). It should be noted that this type of partnership would be an excellent opportunity for nonprofit organizations to gain part-time, hourly worker(s) at a small fracture of the cost. This opportunity would be an excellent way for a nonprofit organization to gain additional support with the ever growing number of projects while serving a professional development opportunity for the student.

With the various ways that students can share their time with nonprofit organizations, it is important to note that students can gain from more than just volunteer service; they can also donate money towards their chosen nonprofit organization(s). It is important that this concept be viewed as a valuable component of civic engagement as well. Educating students on ways that they can donate has value. For example, students can donate individually, via their student group/club or their fraternities/sororities. These donations can be accrued in a number of ways. For example, donations from club banking accounts to the fraternity hosting a fundraiser with the proceeds going towards their chosen nonprofit organization.
“Nonprofit managers need to ensure that Service-Learning (S-L) volunteers get the chance to enhance their interpersonal, leadership, and communication skills in the work they do” (Tomkovick et al., 2008, p. 16). Tomkovick et al., (2008) found that “this growth in personal development may lead to an increase in volunteerism” (p. 16). Students need to find value in their volunteer activities and they need to feel that their time is valued as well.

Benefits for Students

Established partnerships between universities and nonprofit organizations can have many benefits for all involved. These partnerships can teach field experiences and promote professional values to those students entering helping professions. They can educate nonprofit organizations to value those students who are not pursuing careers in nonprofit environments yet will be our future neighbors and potential donors. These partnerships can help nonprofit organizations inform the next generation on their mission and needs while emphasizing the value of making a difference through volunteering. Such partnerships can encourage student volunteers to network with other volunteers which will further their professional growth. With each partnership, the hope would be that such experiences would make for a more well-rounded student. Maria Boever, student athlete says she “likes to volunteer with her basketball team because it is a good way to be part of the community and to give back to a community that supports them throughout the basketball season” (M. Boever, personal communication, December 1, 2009).

Just as the nonprofit organizations seek the need of such partnerships, students are finding that such partnerships help build on their academics, promote professional development, and strengthen their resumes. Missouri State Service-Learning Advisory Council (2003) states “students gain new skills and leadership experience that will prepare students for future careers” (p. 5). They also add “increase understanding of social issues and create alternative solutions” (Missouri State Service-Learning Advisory Council, 2003, p. 5). Tomkovick et al., (2008) says “Students benefit from enriched skill development, improved learning, better understanding of community needs, and increased sensitivity to community responsibility; nonprofits benefit from the fresh insights and output received” (p. 6). Such successful volunteerism and partnerships can have many personal and professional gains for college students.

Benefits for Nonprofit Organizations

Partnerships between universities and nonprofit organizations have many benefits to the nonprofit organizations as well. When a partnership is successful, the organization gains free labor on those projects that linger due to time constraints on their current system. In addition, they gain professional input from the students who have course work knowledge as well as an indirect resource of the advisor from the related club/fraternity/sorority or the professor of the class. Missouri State Service-Learning Advisory Council (2003) says “Students can offer a new perspective on projects and provide alternative solutions” (p. 5).

Such partnerships allow nonprofit organizations the power to influence the next generation of helping professional. Nonprofit organizations can emphasize desired strengths as well as confront undesired weaknesses of students entering the world of work.

In addition, such partnerships provide nonprofit organizations a pool of possible future applicants for employment. These partnerships can give nonprofit organizations an advantage as they are able to see possible future employees in action. Equally important is that these volunteer opportunities allow students the chance to experience first-hand what it would be like to work in such an environment which will ensure a more educated decision on accepting and staying at such a position. Hopefully such processes would create a healthier work environment as well as positively impact turn-over rates for the nonprofit organization. Jan Stange, a coordinator of an
after-school program, has repeatedly emphasize that “Service-Learning students placed at her organization have been a positive way for her to network and seek future employees” and she “strongly feels that Service-Learning partnerships encourages students to want to seek employment and/or volunteer opportunities at her organization and/or at other places that serve children” (J. Stange, personal communication, December 21, 2009). Ms. Stange finds this part of the partnership very rewarding as she knows that she is positively impacting her clientele and the next generation of helping professionals.

Whether the volunteer experience was positive or negative, students will most likely share their experiences with their friends and classmates. If the experience can be positive, this type of partnership can lead to more student volunteers. While employed as an executive director at a rural nonprofit organization, this author saw the successful growth in volunteers just from the spread of word-of-mouth. This verbal spread of our mission helped encourage more people to want to get involved. Missouri State Service-Learning Advisory Council (2003) says “Students involved in Service-Learning projects become life-long activist for the organization” (p. 5).

Another benefit, college students can be positive role models for nonprofit organizations’ clientele who lack positive parental guidance. Also student volunteers can be positive energy needed to motivate a tired team of employees. Another example, a group of college Service Learning students that were placed at a rural school to be positive role models to the children; also ended up being positive role models to several staff members who were working towards their General Educational Development (GED).

In addition, the student volunteer has access to current and prior professors that would be potentially knowledgeable of solutions. During volunteer experiences, nonprofit organizations can instill their mission, needs, and values with the student volunteers. This volunteerism can have positive long-term results. If this experience is positive for the student today, they are more likely to volunteer again (Tomkovich et al., 2008) as well as donate to the organization (Tidwell, 2005). In conclusion, benefits for nonprofit organizations include achieving agency objectives, goals, and ultimately their mission.

Universities have expectations that their teaching faculty dedicate a portion of time towards research and service. Both of these expectations can be beneficial to nonprofit organizations. If the nonprofit organization can seek a professor with similar research objectives then such research partnerships can possibly develop into advantages related to evidence based research/practice, funding, and awareness exposure. In addition, the concept of professional service can be viewed similarly. According to a Midwest University’s Sociology Department Standards document, service is giving back to the university, to the community, to the profession. “General Service has been defined as work that draws upon professional expertise and is an outgrowth of our academic discipline” (Rural Sociology Department, 2008, p. 13). If such a faculty member and nonprofit organization have mutual service goals, then this faculty member will be useful in sharing his or her knowledge, connections, and students with the nonprofit organization. This partnership will benefit the faculty member by helping him or her achieve university performance expectations. In addition, nonprofit organizations will gain the expertise of the faculty member. For nonprofit organizations, such partnership can also allow them the opportunity to network with other faculty members and students. For example, the partnership could allow the nonprofit organizations to speak to a larger audience about their mission and needs via speaking during a class lecture. Getting in front of a class of students is an opportunity to shape the next generation of professionals and promote the nonprofit organization’s mission while also recruiting volunteers.
Possible Obstacles to Overcome

As listed above, there are many ways to engage in university and nonprofit organization partnerships and many benefits for both the students, professors and clients of the organizations. To maximize the successes, it is important to explore and eliminate possible obstacles.

Student’s availability is the first obstacle. This obstacle further notes that students are only able to volunteer for such periods of time as fall, spring, or summer semesters. Students may only be able to volunteer during the academic year, because they have other summer plans. They might only be available at the beginning of the semester or a portion of the semester. They may only be available for one project. In addition, if they are volunteering individually and are a junior or senior, they might only be available to volunteer for two or less years. The community project will need to be able to work around class schedules and other student driven scheduling conflicts. If the nonprofit organization needs fit with the students’ availability then it could be a good fit and will increase the project’s success.

The second obstacle is students’ knowledge and skills. Depending on how many years the student has been in their college program will determine how much knowledge they have about certain related subjects. In many ways, their knowledge can be very beneficial. For example, if they have taken one or more courses related to the nonprofit organization and their clientele, they are likely to have knowledge that is current and beneficial. When the student does lack knowledge, it is possible to explore his or her networking outlet. For example, the student may have access to a professor with expertise in the area or a club advisor maybe helpful in bring the related project the needed knowledge. For example, while a second year Spanish major volunteers to translate a nonprofit organization’s marketing materials to Spanish, they find themselves struggling with terminology unique to the organization. This student could solicit support from such experts as a related course professor, their academic advisor, or possibly the Spanish Club advisor.

In addition, this generation of students has much more technology knowledge. They can better understand computer capabilities, social media sites, and databases. Some obstacles of this technology knowledge are that many of our nonprofit organizations do not have the most updated computers and software. Will the organization’s computer(s) be able to handle the current technology? In addition, if the student implements a social media program, like Facebook or website, to meet a community need, will the organization’s employees have the time and skill to monitor and update such programs. It is important that developing a plan related to monitoring and updating be part of the partnership agreement. This type of management does not mean that the student needs to continue on with the nonprofit organization after their course requirements are met. This simply means that the organization needs to have systems in place to further manage the project. This management could come in the form of recruiting the next class of students, training a nonprofit organization employee, creating a how-to handbook for the organization, seeking volunteers from the community, and so on.

A third possible obstacle is a student’s knowledge and level of skills. Many students may be volunteering for the first time. For many students this experience is their first encounter with the “real world”. It is important that nonprofit organizations realize initially some students will take more of their time and attention than others. It is important for the nonprofit organizations to assess these types of obstacles to determine a student’s capabilities with working or even choosing not to work with such students. “Nonprofit managers must first identify tasks that college students are capable of performing that add value to both parties” (Tomkovick et al., 2008, p. 16). Such assessments would be beneficial for all partners.

The fourth obstacle is the student’s course or club requirements. If the student is seeking volunteer opportunities with a nonprofit organization, it is important to assess their motivation for
such volunteering. Is it to fulfill a social club expectation? Is it for a college course? If it is related to such examples, it is important to assess what their guidelines are. Do they just want to volunteer once? Do they need to volunteer for a set number of hours? When it comes to clubs, it is important to realize that even though the student group might only volunteer once, it is important to understand that with proper networking, once can turn into once a semester or once a year. For nonprofit organizations like Habitat for Humanity, if a student group agrees to volunteer once a semester on the construction site or volunteer to complete a fundraiser event once a year, this partnership would be valuable. When a nonprofit organization is developing a needs list, it is important to keep this obstacle in mind.

A fifth obstacle is concerned with “mandatory volunteering” when a student is required to volunteer for course credit or because of membership requirements. When some students are required to volunteer at nonprofit organizations as a course assignment, they excel. This opportunity then encourages and motivates some students to continue to volunteer at the assigned community partner or possibly at other nonprofit organizations. This opportunity empowers students to seek more experiences and then influences them to be more engaged in the classroom shaping a more well-rounded student and future professional. It is philosophies like this one that motivates professors to assign such “mandatory volunteerism” assignments. It is important to understand that not all students see “mandatory volunteerism” as a positive thing. Some students view it as another assignment that takes up their time. Many students have very busy schedules and to fit in such a time sensitive assignment is taxing on them. In conclusion, it is important that an organization understands if they have a negative experience with one student that it is not the reflection of all students.

The final obstacle for nonprofit organizations is to ensure that the experience is worthwhile for the student as to encourage them to volunteer again. “One way in which this attachment may manifest itself is when volunteers believe that the nonprofits they served have truly benefited from the work they provided” (Tomkovick et al., 2008, p. 6). Additionally, this source notes that when the students feel that they are valued, they are more likely to volunteer again. Tomkovick et al., (2008) research finding also “suggests that if a Service-Learning project is designed in a way that clearly leads the participant to believe that he or she will either personally develop or provide value to the community organization, it is likely that the participant will end up perceiving benefits for both self and community” (p. 13-14). Even though nonprofit organizations need their shelves dusted or need the grounds cleaned up after an event, it might not be viewed as mutually beneficial to both partners. These tasks do occur and do need volunteers time. These responsibilities may be more challenging to market to the students but it is possible. One way to seek an understanding of the student’s value of such projects is to ask them for feedback during a brief reflection session at the conclusion of the volunteer experience. Brudney and Meijs (2009) says “…volunteer energy can be understood as a human-made, renewable resource that can be grown and recycled…” (p. 564). The organization can further emphasize how partnerships are tied into the success of the organization and its mission.

To overcome these obstacles, communication should be emphasized. As helping professionals understand, prevention can go a long way in avoiding problems and crises while intervention has a much higher chance of involving conflict. Another common phrase that applies here, is “knowledge is power”. This “knowledge” is important for both the benefit of the nonprofit organization and the student.

Some “Conversation Starters” created by Missouri State Service-Learning Advisory Council (2003) is to ask questions: “What experiences have you had in community service or volunteering? What impact have those experiences had on you? What do you think is the most important reason for involving youth in Service-Learning? How could Service-Learning help you address major challenges you face in educating students? If
you could make one dream come true through Service Learning, what would it be? What is the one thing you hope your students would learn about our community and society?” (p. 7).

These questions can motivate nonprofit organizations to develop their own list of questions related to their needs and their relationships with their student volunteers.

Some ways that nonprofit organizations can prepare themselves for such partnerships is to explore questions that professors or students might ask them.

According to Missouri State Service-Learning Advisory Council (2003) some questions faculty ask nonprofit organizations are: “What have been your organization’s experiences in working with school? What have been your experiences in working with children and teenagers in your agency? What do you think is the most important reason for involving youth in Service-Learning through your organization? What is the one thing you hope Service-Learning will accomplish in our community and society?” (p. 7).

It is to the nonprofit organization’s benefit to engage students in meaningful activities.

**To Get Started**

This model will consist of six steps for nonprofit organizations to use “to get started” with building a partnership with students and their universities. The first step is to define your needs; the second step is student involvement; the third is plan of action; the fourth step is implementing the plan; the fifth step is marketing while the final step is evaluation.

**Step One: Define Your Needs**

Step one encourages nonprofit organizations to process or brainstorm a list of their needs. These needs can be related to day-to-day operational tasks/projects, long-term goals, tasks/projects that lack resources to be accomplished, or it can be those projects that the nonprofit organization staff members and/or volunteers lack knowledge and skills achieve. The project can be an educational, awareness, and/or a fundraising event. Some specific example projects could be converting the nonprofit organizations’ brochures from English to Spanish to best serve their target audience or creating a power point presentation to educate and recruit. Projects could be creating landscaping plans that are user-friendly and cost effective for low-income homeowners or it could be creating a bullying awareness program for an afterschool program.

When establishing a needs list, the nonprofit organization also has to explore goals and objectives related to these needs. They have to further define related details of the “needs”. The nonprofit organization has to consider the when, what, where, and the how. They have to consider the cost to achieve the need. It is very appropriate to explore these development thoughts with the students and their university when making contact with the university student(s). With some projects, the student club or fraternity/sororities might have funds to use to cover the cost of the project. Some universities have service-learning budgets established to fund such related costs. Examples of possible costs can include required background checks, equipment, printing costs, and supplies.

**Step Two: Student Involvement**

This step is important because it assists the nonprofit organization in determining if students can achieve the needs. When defining the need, it is also important to explore the number of students that will be needed and the anticipated number of hours considered necessary. Some other points to consider: What type of student is necessary to achieve your particular projects? What strengths/skills do they need to complete the project? For example, do they need to be able to speak Spanish? If the nonprofit organization needs their material translated to Spanish, then...
they should find students who can speak, read, and write Spanish. How many students would be needed to complete the project? How will the organization go about contacting this/these student(s)? What is the timeframe for the project? “This information could include the name and description of each volunteer activity to be performed and a list of benefits that are gained by the community members who are directly associated with each volunteer activity” (Tomkovick et al., 2008, p. 16).

Before networking with any student or student-led group, it is important to have an understanding of the answers to the questions provided above. Being prepared can limit the number of questions later and limit the need to intervene on a project that is failing. In addition, the higher the success of the project for both partners, the more likely both partners will want to collaborate again.

**Step Three: Plan of Action**

After achieving step two, it is only appropriate that step three would be to make contact with the student(s). Establishing such contacts can be overwhelming. This section will attempt to break down this process. Fully defining your needs as outlined in step one and then fully determining the type of student(s) that can achieve your needs in step two will make this third step more successful.

How to establish such partnerships can be done in several ways. If the organization knows that their need can only be achieve by student(s) that speak Spanish, then attempting to make contact with the Spanish department or Modern Language department or the Spanish Club directly would be appropriate. If the nonprofit organization is hopeful to gain staff support by hiring a work-study student, then directly contacting the Financial Aid Office would be the most appropriate. With some needs, it will be more difficult to determine who/what student/group/department/Greek life/club can best meet the need. In times like these situations, a nonprofit organization may want to contact the Service Learning department, the Information Desk/Help Desk/General Assistance of the campus, or the office for Greek life/fraternities/sororities. Nonprofit organizations can many times find such phone numbers through on-line websites of the university. In addition, making a visit to the University Union Center could be beneficial. Student unions often have several informational style offices where a nonprofit organization can find assistance.

Once successful with one group, then the nonprofit organization can consider networking with them on other projects or networking with them about other possible partners to seek out within the campus community. It is important to cultivate positive relationships with these students as to have long-term success on and with the campus community.

There will be times when a contact leads to a dead-end. It is important to be creative, flexible, and patient with this step. “Surveys of managers of volunteer services document that the chief problem they perceive in volunteer-based programs is recruitment” (Brudney & Meijs, 2009, p. 568). Advancing an organization’s network skills would be beneficial with this step.

**Step Four: Implementing the Plan**

Step four is bringing the students on board. It is important to acknowledge that students have many wonderful talents and skills to bring to your organization yet they are still learning professionalism and work ethics. This step needs to emphasize the importance of communication. It is best to be clear with expectations and objectives from the start. It has taken much time and energy to get to this point, continue to move forward by providing this step the effort it requires. It is important to provide a verbal and many times a written list of expectations. Also consider using an (informal) contract. Service Learning sources can provide excellent tools to create an informal contract.
While it is important that the student(s) understand the goals, needs, and expectations of the nonprofit organization, it is mutually important that the nonprofit organization(s) understand the student(s) goals, needs, and expectations. What do they hope to gain from achieving this project? Many times it is as simple as feeling that they have made a difference. So, if the nonprofit organization feels that they “need” a student group to completely dust their inventory shelves, then the nonprofit organization will have to fully communicate why this is making a difference for the organization. Even though it is sometimes elementary reasons for the assigned project it can be beneficial to use this opportunity to explore a reflective discussion that can lead to other motivating and empowering components of the organization’s mission.

**Step Five: Marketing**

This step is focused on marketing the partnership. When the goals and objectives have been achieved, it is important to “market” the success. For example, with a Habitat for Humanity affiliate, it could be inviting the student(s) to the upcoming dedication or special ceremony. Other examples would be to invite the campus newspaper staff, the University Public Relations department representative, and/or a local newspaper reporter to market the event. If these media sources are not able to attend the event, then consider taking photos and submitting them to the listed sources. Another example would be to market the experience on the nonprofit organization’s website, Facebook, or other social media outlets.

Marketing initiatives can spread the word of the nonprofit organization to other student groups and those students can achieve their desired goals with this nonprofit organization. Marketing could have a ripple effect of invitees to speak to social clubs, professors’ classrooms, and service learning related advisory committees which could lead to more partnerships in the future.

In addition, if a nonprofit organization needs volunteers it is appropriate to ask to speak in front of a class for five minutes or so. If seeking volunteers from a class, it is recommended that the organization pass around a sign-up sheet and then follow up with these students about their interest via phone, email, or Facebook.

When a nonprofit organization believes that sending a “thank you” card is not enough, the nonprofit organization could search out a recognition-type award to nominate their outstanding student or student-led group. Many college campuses have such award processes in place. This type of recognition would be an excellent way to express gratitude to a student or student-led group and indirectly market the success of the partnership and the nonprofit organization’s mission.

**Step Six: Evaluation**

Step six concludes the process. Such partnership should be mutually beneficial to the nonprofit organizations and the students. As the nonprofit organizations gain more and more partnerships, they will be more successful at following these steps in a timely manner and a more productive fashion. In order to continue to be more efficient and productive, it is important to take some time to evaluate the completed goals, objectives, and the desired needs.

When developing an evaluation process, some questions to consider are: What worked? What should be done again? What did not work? What could have been done differently? Was this partnership successful for the nonprofit organization? Was this partnership successful for the student(s)? What is next?

This process does not need to be intense, just a learning tool for the future. This process would be particularly helpful with those groups that volunteer once a year. This type of evaluation could make it easier to recall details of the project that happened a year or so ago.
Then for those organizations that have an on-going list, this process can increase the success of future partnerships and further their organization’s mission.

**Conclusion**

Partnerships between college campuses and nonprofit organizations can be mutually beneficial, if properly established. Allowing students to take ownership of the nonprofit organization’s mission will further influence them to provide support with other projects including but not limited to: completing more projects, networking with their friends/fellow college students, making an individual or club/group financial donation. In addition, such partnerships can professionally shape students’ professional careers while simply motivating them to be engaged citizens in their community. Such partnerships can also be beneficial to nonprofit organization with completing both long-term and short-term goals and projects. Such resourceful partnerships can help nonprofit organization be more creative and cost-effective in achieving their mission and effectively serving their clientele.
References


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**Author’s Note**

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