

DO MILLENNIALS DELIVER GENERATIONAL ANGST TO HEALTHCARE?

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ABSTRACT

The demands of Millennials engaged in healthcare professions have just begun to tax recruiters and HR departments. This study examines expectations expressed by Midwestern doctors, nurses, chiropractors, dentists, orthodontists, scientists, physical therapists, nurse practitioners and pharmacists as they begin to infuse the healthcare landscape with new ideas about workplace accommodations that may cause conflict with older generations and add up to an expensive investment in talent by healthcare employers.

INTRODUCTION

Casey Woster is 28, an M.D. hooded two years ago at Creighton University School of Medicine. He selected emergency medicine as his specialty and on national Match Day 2009, was chosen as the top candidate by Regions Hospital in St. Paul, Minn. According to his mother,

“This didn’t surprise me in the least; Casey is low key in the extreme, but has a nearly photographic memory, has a high tolerance for studying while others are partying, speaks Spanish fluently thanks to medical mission trips to Dominican Republic, Argentina and Peru, and has consistently been rated among the top two students in his medical school class. He has already worked hard for the privilege of putting in the long, strange hours expected of doctors in residency programs, and accepting the legendarily tough stretches of unabated shift work” (personal communication, February 24, 2010).

What is surprising, however, is how unconcerned Casey seems to be about whether his personal appearance and demeanor measure up to the hospital’s expectations. Granted, his sister, a third-year law student and at 26 also a Millennial, described his appearance as “recently emerged from a vacuum cleaner bag” (personal communication, February 24, 2010). When Casey sat through his six-month review, he learned a fellow student had remarked in a peer review, “Casey could shave more often.” An attending physician on his rotation noted pointedly in a conversation with Casey that other doctors wore their white coats, tucked in their shirts and got more frequent haircuts. To that, Casey responded simply by donning his white coat

more often over his scrubs (personal communication, March 2, 2010) and after several episodes where patients asked where their doctor was, has shifted from introducing himself to patients as “Casey Woster,” to “Dr. Casey Woster.” The glancing comments alluding to his appearance weren’t even a blip on his sonogram. His focus is on studying, making sound diagnoses, and starting to fit a life in around the edges of his demanding profession. This attention to life-work balance (including dating, fitness and outdoor pursuits), social concerns, informality in appearance and personal relationships, and reliance on technology (he frequently checks for drug interactions, using his smart phone, while on the job) are hallmarks of the Millennial generation (Fabian, 2010, p. 58).

Millennials, 70 million strong, are already impacting the American economy. That is especially true of Millennials employed in the healthcare sector. Total spending on health care in America has doubled over the last 30 years to a current level of about 16% of GDP. The Congressional Business Office estimates this percentage will double again over the next 25 years to 31% of GDP (Bartlett, 2011). According to Thompson Reuters, salaries and benefits comprise about half of costs incurred by most U.S. hospitals (Solucient, http://www.solucient.com/articles/07_MTM_Solucient.pdf, accessed December 29, 2011).

This paper begins an exploration into attitudes, social norms and consumer behavior exhibited by Millennials who are employed in healthcare-related businesses. Included in this exploration is a primary research study asking Midwest-trained Millennial students and professionals what workplace accommodations they expect as they continue to infuse the medical workforce. There is much to be learned by their current and future employers as they strive to keep this important professional workforce satisfied, productive and free of conflict with older generations.

Generational Values

Experts don't always agree on the span of years defining each generation, but most generally believe the generational groups look like this: Greatest Generation (born 1925-1945), Baby Boomers (born 1946-1964), Generation X (born 1965-1979) and Generation Y or Millennials (born 1980-2000).

The **Greatest Generation**, a moniker dubbed by TV newsman Tom Brokaw, is also known as the Silent Generation. There are 40 million Silents still in the workforce, and this group still holds about 70% of U.S. financial assets (Gilhooly and Gilhooly, 2009, p. c265). As a group, these workers are responsible for business growth and are disciplined, detail-oriented, dislike conflict, prefer hierarchical structures and maintain an historical perspective. They were shaped by radio, telephone, movie theaters, World Wars and the Great Depression (Stockburger, 2008, p. 44).

Baby Boomers are generally the children of the Silent Generation and are accustomed to being the center of their parents' universe. They revolutionized society with computers, communication devices, new delivery systems and entertainment blockbusters, currently dominate senior management, expect fulfillment in all areas of their lives, and want to keep working but in a worthwhile endeavor (76 million are still working). Some Boomer values include liking and seeking power, living to work and make money and living outside their means (Gilhooly and Gilhooly, 2009, c. 266).

Generation X, at only 54 million, is considered a conscientious, extremely pragmatic, adaptable, and self-sufficient group, born at a time when children were at the bottom of social priorities, and often raised as latch-key kids. Core values include not being intimidated by authority, working to live rather than living to work, informality, independence, and diversity. They were shaped by the Reagan era, Challenger disaster, HIV, Iran hostage crisis, Watergate, business corruption, and women's liberation protests (Stockburger, 2008, p. 45).

Seventy million **Millennials, or Generation Y**, now impact business as workers, and not just as consumers. They are at the center of the self-esteem movement and this individualism is reflected through body art such as piercings and tattoos. Millennials are tolerant on social issues such as immigration, racial diversity and homosexuality. Their values include close ties to parents and grandparents, team orientation, advocacy, environmentalism, social responsibility, technology, global community, optimism and achievement, and having fun at work. This group of 70 million (with approximately 35 million now in the workforce) was shaped, for good or ill, by terrorism and 9-11, Colum-

bine shootings, the internet, Iraq War, cell phones, cable and reality TV, and gaming (Armour, 2005).

Demographic Shifts

Demographic shifts are, and will continue, to have a profound impact on the American workforce. The labor force in 2011 was at the lowest ebb since the 1930s, and the U.S. birth rate continues to decline (Bureau of Labor Statistics, <http://www.bls.gov/emp/emplab1.htm>, accessed March 10, 2010). Half of the population is at retirement age right now, or will be within five years (Bureau of Labor Statistics). The shrinking of the workforce manifests in an estimated shortfall of 20 million workers over the next 20 years. Currently, however, there are four generations in the workplace, weighing in on leadership in what has become the most dynamic workplace scene ever. The impact across the country is profound; that profundity is keenly felt in South Dakota and throughout the Midwest. That dynamism extends to healthcare, an industry in which nearly 20 % of South Dakotans were employed in 2009 and which was projected by the state Department of Labor and Regulation to grow by 16.2 % from 2008 to 2018 (South Dakota Department of Labor and Regulation, http://dlr.sd.gov/lmic/pdfs_and_other_files/career_hot_trends_in_healthcare.pdf, accessed December 29, 2011).

Each generation as a collective demographic group carries with it various values: how they view work, what they consider important, how they approach interpersonal conflicts and generally, how they view the world. Casey is but one example of how the next wave of healthcare workers born between 1980 and 2000 – known variously as Generation Y, Generation Why?, Generation Next and Millennials – will approach the workplace: Casually in dress and workplace culture, but seriously in terms of the work to be done and the technology to assist them (Lovern, 2001, p. 5).

This approach causes serious problems among older generations who have difficulty understanding, respecting and valuing these differing perspectives. The generation gap is no longer bipolar; it is four-dimensional and creates a quad matrix of opportunities and stresses (Gerke, 2001, p. 174). Can four generations of healthcare professionals learn to appreciate diverse points of view, leverage strengths, and value the differences in colleagues from various generations? And ultimately, can we afford to give – or not to give – Millennials what they are beginning to demand of employers?

Conflicts

Working Americans today experience more on-the-job conflict than ever, due in large part to discord inherent in differing generational expectations, work habits, productivity and other aggravations brought on by communication issues. The two older generations are most often at odds with the two younger generations (Gilhooly and Gilhooly, 2009, p. c265). “The values of Generation X and the Millennials affect both their attitudes toward work and how they work. They are working to live and see education/work as a way to build their personal assets and skills. When the younger generations stop seeing a benefit to their work, they move on” (Gilhooly and Gilhooly, 2009, p. c267). This is best illustrated by a 24-year-old who says of her generation: “There’s a higher value on self fulfillment. After 9/11, there is a realization that life is short. You value it more” (Armour, 2005). Silents and Boomers are both dedicated to work – living to work rather than working to live – and simply don’t understand this perspective.

Nationally, 60 % of employers report tension between employees from different generations. One survey found that 70% of older employees were dismissive of younger workers’ abilities. And almost half of the employers who responded said that younger employees were also dismissive of the abilities of their older co-workers (Armour, 2005). The same attitude certainly exists in the world of healthcare. A workshop on generational differences at the 2007 annual meeting of the Association of Pediatric Program Directors pointed out some of the issues Silents and Boomers have observed about medical professionals who hail from X and Y Land (Gilhooly and Gilhooly, 2009, p. c267). Some of the issues pointed out about the younger generations included allegations that they won’t do the “extra” things, relied more on technology than on intellect, exhibited a lack of professionalism in dress, music players, cell phones and taking time off when they wished. Younger doctors responded that they wanted to have a life-career balance, to express themselves through dress and personal grooming, and to receive constant favorable feedback. They fired back that older doctors were lagging in utilizing technology and furthermore, lacked respect for the contributions of younger doctors (Gilhooly and Gilhooly, 2009, p. c297).

The transition to the Information Age has flipped generational relationships. Young healthcare workers are not as reliant on their older peers because they can easily access expert information from around the world via computers (Weston, p. 6). “Instead of young nurses turning to their older colleagues for advice, older nurses are often dependent upon their

younger peers for coaching, mentoring, and guidance in using the computer for everything from documenting their work to accessing necessary information” (Weston, p. 6).

Articles reviewed for this paper noted that Gen Y has no problem speaking up, about conflict and much more. A *USA Today* article about Gen Y contained a telling quote. “Generation Y is much less likely to respond to the traditional command-and-control type of management still popular in much of today’s workforce,” says Jordan Kaplan, an associate managerial science professor at Long Island University-Brooklyn in New York. “They’ve grown up questioning their parents, and now they’re questioning their employers. They don’t know how to shut up, which is great, but that’s aggravating to the 50-year-old manager who says, ‘Do it and do it now’ ” (Armour, 2005). Another management problem relates to feedback. Previous generations were accustomed to annual reviews whereas Gen Y has experienced “constant feedback and recognition from teachers, parents and coaches and can resent it or feel lost if communication from bosses isn’t more regular” (Armour, 2005). Other documented differences include, as Casey’s experience illustrates, conflict over casual dress. Resentment is clearly breeding over attire at work such as flip flops and Capri pants (Armour, 2005).

Improving the Work Environment

The generational mixture has stirred up the workplace pot, which has already begun to churn as younger workers are apt to change jobs more readily (Bezjian, Underwood, Broughton, Rowley, Schroeder and Bolles, 2005, p. 3). While the Silent Generation often began and ended their careers with the same employer, Baby Boomers are more interested in relocating if the move presents new career challenges and remuneration. Career advancement has become a serious issue among today’s healthcare workforce and has resulted in more acceptance of job changes and abbreviated tenures. “High performance at many different facilities in which the career skill set is molded and groomed is more important than a slower progression of skill development with a single employer” (Stockburger, 2008, p. 46).

Ultimately, if research bears out generational agreement on what constitutes a supportive work environment, it is time for employers to deliver that environment. If Gen X and Gen Y are working to live and see education/work as a way to build their personal assets and skills, it seems to follow that if they stop seeing a benefit to their work they will move on. Gen Y is especially committed to advocacy work and may find satisfaction in workplace flexibility designed to

allow them to participate in activities such as Doctors Without Borders, to job share, or to work hours more conducive to family life. Gilhooly and Gilhooly suggest that some practical considerations for improving the work environment would benefit all generations: make work fun (don't skip the parties to save the budget), keep employees learning new skills, be clear with expectations, offer immediate feedback but not micromanagement, and respect their commitments, whatever they might be (2009, p. c268). Stockburger claimed it would help retain workers if employers value workers, seek their comment and act on it, create a viable career ladder for them to climb, and make everyone feel he or she is an important part of a team (2008, p. 48).

Closer to Home

Sioux Falls, South Dakota, has a vibrant healthcare community. It is home to 151,646 – 32% of whom are between the ages of 15 and 34 and therefore Millennials – as well as several large healthcare systems, Sanford Health, and Avera McKennan, in addition to the Avera Heart Hospital of South Dakota, and the Veteran's Administration Hospital (U.S. Census Bureau,

http://factfinder.census.gov/servlet/ADPTable?_bm=y&-geo_id=16000US4659020&-qr_name=ACS_2009_5YR_G00_DP5YR5&-ds_name=ACS_2009_5YR_G00_-lang=en&-sse=on, accessed December 31, 2011). There are laboratories, surgical centers, private nursing agencies, fitness facilities, assisted living facilities and nursing homes, and medical professionals working in the Sioux Falls School system, as well as in public and private businesses. In short, Sioux Falls, as a regional medical community, is feeling the very real effects of the generational changeover (Sioux Falls Development Foundation,

<http://www.siouxfallsdevelopment.com/biotech.cfm>, accessed December 30, 2011).

Statistics provided by Sanford Health show that 8,767 were employed by the system in 2007. Of those, 484 or 5% were “mature” employees (4% females, 1% males). This compares to 3,691 or 42% Baby Boomers (35% females, 7% males), 3,127 or 36% Gen X (30% females, 6% males), and 1,465 or 17% Gen Y (14% females, 3% males). The System had grown significantly by the end of 2009, including a merger with the North Dakota-based system, MeritCare. Sanford alone employed 10,275 by the end of 2009. Of those employees, 362 or 3% were from the Silent Generation, 4,054 or 39% were Baby Boomers, 3,545 or 35% were Generation X, and 2,314 or 23% were Generation Y. More than 80% of Sanford's em-

ployees in the Baby Boomer, Gen X and Gen Y age groups are female. The 7,319 employees of MeritCare have swollen the North-South health system to 17,594 (Sanford, 2010, p. 4).

Methodology and Analysis

In an attempt to further illustrate how Gen Y was infusing healthcare on a local level, a study was undertaken of Augustana College students and medical professionals who were clearly Millennials. A survey was devised through Survey Monkey and was pre-tested by several local medical students and doctors. A link to the 19-question survey was emailed to 1,261 students and alumni from Augustana College who were majoring, or had majored, in nursing, biology, chemistry, and physics. These majors were chosen because they most often lead to science-based professional careers. Fifty-four emails bounced back due to outdated email addresses. Over a two-week time frame, 245 current and former students completed the online survey for a 20% response rate. The results, while limited to students and alumni from one South Dakota college, are eye-opening and relate directly back to what research has consistently shown Gen Y professionals, especially those employed in healthcare positions, expect in the workplace (Gilhooly and Gilhooly, 2009, p. c297). This is consumer behavior at its most basic, and a message to which healthcare employers must pay close attention.

Of those who responded to the survey, 80% were female and 20% were male. Almost 100% of respondents, naturally, attended college in South Dakota. Nearly 80% attended graduate school in the immediate vicinity (South Dakota, Minnesota, Iowa, Nebraska, Kansas and Missouri).

Half of the undergraduates said they were planning to work in medicine, 13% were graduate students, and 35% were currently working in medicine. Only 2% were not planning to work in medicine or were not currently working in medicine.

Respondents had a variety of plans for their careers. Nearly 40% were focusing on careers as nurses, 4.5% as nurse practitioners, 19% as medical doctors, 3% as doctors of osteopathy, 1.6% in chiropractic medicine, 3% in dentistry, 4% in optometry, 4% in pharmacy, 7% in physical therapy, 3% as physician's assistants, 4% in medical research and 11% as “other,” which included work as nutritionists, nurse anesthetists, lab technologists, athletic trainers, medical lab scientists, and physician scientists.

Survey-takers were asked to imagine their work environments and to list all the technological tools or aids they do or would employ to help them in their daily work. Nearly 85% said they do/would use

email, phones and tools such as Skype in communication efforts. Over 70% said they do/would participate in group training sessions, 60% do/will use handheld internet devices, and 50% do/will participate in work teams comprised of medical specialists and use online collaborative tools such as Google Documents. About 30% use or foresee using podcasts for continuing education, 28% do/will use a dictating device, and less than 5% said they currently use or will use computerized charting/medical records and other phone applications.

The heart of the survey, at least from a human resources perspective, came next. Respondents were very clear about what workplace amenities they expected or received as part of their employment package. Nearly 100% said they expected to receive or received health insurance. The next most prevalent expectation, at 83%, was continuing education, followed by assistance with financial planning and loan forgiveness (60%), discounted healthcare services (53%), employee assistance programs (45%), signing bonuses (40%), on-site fitness facilities (38%), 24-hour food services (33%), and employer-sponsored daycare facilities (28%).

According to the survey, respect by their peers was the most important professional accommodation to respondents. More than half said this respect was of vital importance. Half said flexibility in scheduling and pay were very important. About 30% said amenities such as food service, workout facilities, and convenient/safe parking were important to them.

Over 60% of the respondents said they either had, or anticipated having, generational conflicts at work with older colleagues. Just over 17% said they had not, or did not expect, to experience conflict and almost 20% said they may experience age-related conflict at work.

Perhaps more important to the discussion was how that conflict would manifest. Almost 50% said they anticipated or experienced problems in communications, either interpersonal or technological. Just over 30% said they expected to, or have experienced, problems in how they did their jobs although NOT in ultimate patient care. About 20% anticipated problems due to their youth. Over 30% said they didn't believe there would be or had not been problems based on their age. About 10% said they expected other problems, primarily related to cultural or gender differences.

Not surprisingly, this demographic relies on technology. When asked what was the best way for an employer to communicate with them, 93% said email, 82% said cell phone, 41% said texting, 23% said mail sent to their home, 22% said pager, 21% said notices posted at work, 16% said intranet, 12% said Facebook

and 11.5% said land-line phone.

This will be a well trained, well educated group, despite author Mark Bauerlein's allegations that Gen Y is the "dumbest generation" (Begley & Interlandi, 2008, p. 1). Nearly 40% anticipate completing four years of graduate education, 25% two years beyond college and 12% eight years beyond a bachelor's degree. Just over 17% said their formal education was complete.

When asked what sort of technology they use daily, or expect to use daily, 82% said a desktop computer. Over 80% use a cell phone, 65% use a laptop, and 53% use a land-line phone.

Prescriptives

While research among Millennial healthcare professionals working in the Midwest must be continued and refined, there are major implications for employers today:

1. Hire recruiters and human resources staff who reflect the Millennial population. A Millennial recruiter will share values and expectations, therefore may better understand potential employees and gauge their fit with the healthcare organization.
2. Re-evaluate benefit packages so they are more reflective of the Millennial expectations for amenities such as on-site daycare and workout facilities, signing bonuses, flexible hours, help with financial planning, and discounted healthcare. As Baby Boomers continue to retire, this period of time presents an opportunity to repackage benefits to reflect the values of Millennials.
3. In order to ease the transition of Millennials into the workplace, employers would be wise to increase training in conflict management to aid in the communication and understanding between the generations of colleagues.
4. Human Resources should continue their efforts to evaluate employee satisfaction levels and offer immediate feedback as these changes are incorporated, and seek ways other than face-to-face, to communicate with Millennial employees.

Conclusion

There are profound changes in store for the U.S. healthcare system, some driven by political change, some by an aging population, some by disease states, some by finances, some by legislation, some by technology. But nothing will impact healthcare in the next 10 years more profoundly than the newest generation of workers. These folks will bring a keen sense of

justice, social awareness, informality and a sense of exploration to work with them each day. If countless studies of Millennial medical professionals are accurate, human resources staff will have their hands full. These employees want it all: On-site daycare and workout facilities, signing bonuses, flexible hours, help with financial planning, and discounted healthcare. No longer will employees focus exclusively on health insurance; they assume it will be there and only a small part of the employment package. They anticipate workplace conflicts, and angst is practically guaranteed unless older generations accept Millennials' very definite ideas of a balanced work-personal life. They're here, they're opinionated, and they'll soon hold the workplace reins in their hands.

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