What We Can Learn From Generational Gaps

Abstract:

No matter what stage you are in your career, we defy you to deny that you have not had at least one of these thoughts recently – Medical students these days just don’t have the respect for their seniors that we had. We needed to learn! But when will we get the time? Social media has no place in medical education. Why can’t I use my laptop in the hospital? As we moved slowly up the medical career ladder, we have gradually noticed the differences between the generations. These personal observations have been backed by a recent explosion in opinion articles, lectures and research in this area, much of which can help explain the issues and identify the background to the differences in opinion that previously may have had frustrated or challenged relationships.

The theory on Generational Gaps is based on the presumption that the life events experienced as a collective at an influential time in youth establishes a view of the world that may then not be understood or even appreciated by those coming in after. People learn differently and the differences between the generations have become more important in order to be able to function more effectively with colleagues and patients. On initial reading some of these theories may be sweeping clichés, but with any cliché there is often a nugget of truth. These theories stick in the mind.

Three to four different generations have been described. The oldest, the Silent Generation, are now mostly retired. Those who are still working deserve praise, but are increasingly less common. The second generation is the Baby Boomers. Born between 1945 and 1965, their collective experiences included the moon landing, civil rights and the introduction of birth control. There were limitless possibilities: anything could be done if the determination was there. Gender equality was considered more advanced than their predecessors, where women would rarely have worked outside the home. With baby boomers the job is a major part of the individuals identity, and respect is based on accomplishment. In Ireland, the leaders in medicine are mostly baby boomers.

Generation X, born between 1965 and 1982, often had both parents working outside the home and as a result were more independent. Their collective experiences were that of the Challenger disaster, Chernobyl, the recession of the 1980s. As a result, Gen X can be more cynical of government and organization, working to live and not living to work. Some have suggested that reduced allegiance to family and organization may prompt a sense of isolation as well as independence. Gen X are more gender neutral and are represented by Junior consultants and senior registrars / SpRs in Ireland. The Millenials are those born between 1982 and 2002, and represent a generation raised by protective parents with independence. Gen X are more gender neutral and are represented by junior consultants and senior registrars / SpRs in Ireland.

Where this becomes more interesting is when the generations interact. Classic interactions are the annoyance of a consultant (Baby Boomers) when the medical student (Millenial) stays on a laptop during lectures or challenges established belief in the middle of a ward round. The Millenial medical student wonders why the Generation X Registrar won’t volunteer to give a tutorial rather than study for their exams. Or and this is a true example– the Millenial patient asked the Generation X doctors and nurses on a ward round to step outside so as she could check the truth of the information they had provided to her (individualized to her care!) on Dr Google and then post on Facebook.

The Millenials are those born between 1982 and 2002, and represent a generation raised by protective parents with "helicopter" style of parenting, with a fantastic awareness of the use of technology. To them, the world is but a village where everyone is connected no matter where they are living. With increased self-esteem compared to their predecessors, (though the critics may say entitlement), this generation are also characterized by neutrality regarding race and gender. Millenials are global citizens, with increased volunteerism and a casual interpersonal style that may seem impolite to older generations. Their affiliation is to the group rather than the individual.

How are these gaps overcome? Well, like most things in life, awareness and discussion in the spirit of mutual respect, clear rules can be made on the use of technology (it is NOT ok to write about patients on Facebook) while taking advantage of Millenials knowledge of technology. One great example seen recently: the Baby boomer Professors reply to the Millenial Medical students question: That’s a really interesting question. I’d like you to go and research that and let us all know what you found out (and then confessing to the Generation X SpR that they didn’t know the answer). Or the medical student using Twitter to survey current practice on implementing the Surviving Sepsis campaign: a great way to break down traditional barriers and allow communication (as long as the Baby Boomers are on Twitter, that is!).

We don’t know what the next generation will be characterised by, but that we all owe it to our patients, our students and teachers to ensure that we can communicate effectively regardless of the generation we come from. Food for thought?

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References


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