Generational Groups

Research

Taken from http://www.valueoptions.com/spotlight_YIW/traditional.htm

Traditional Generation [born 1922-1945] 65-88 yrs. Old

Notes: hold ¾ of the nation’s wealth and are the executive leaders of the most established and influential companies in America. Survived the Great Depression of the 1930’s. Patriotism, teamwork, “doing more with less” and a task-orientation define this generation. Developed today’s space program, created vaccines, created suburbia, pursued equality through Civil Rights Movement.

Characteristics of Workers:

- Values: Believe in conformity, authority and rules. Believe in logic. Very defined sense of right and wrong. Loyalty and respect for authority
- Attributes: Disciplined. View an understanding of history as a way to plan for the future. Dislike conflict. Detail oriented.

Ethnic and cultural issues/implications: Mostly white males in work force. This generation started to see women enter the workforce and was confronted with issues of racial and sexual equality at work and in communities.

Perspectives on EAP: First experienced EAP as an occupational alcoholism program. This generation has made tremendous accomplishments by forging ahead during times of trouble and, therefore, is likely to feel obliged to handle any personal concerns alone.

Common EAP issues:

- Financial issues: Retirement, long-term care, managing income and expenses. Returning to work because decreased federal benefits, companies cutting retirement benefits and pensions.
- Legal issues: Estate planning, wills and trusts. Health care proxy and living wills.
- Marital/family issues: Marital/family relationships. It’s a time for individuals and couples to re-define their relationships. Employees of this generation may need assistance in identifying new relationships and interests.
- Medical issues: Chronic disease, diseases of aging. Treatment compliance may be dependent on ability to afford medications. Chronic disease may keep this pop out of work for several days at a time. Alzheimer’s and illness related to smoking or alcoholism may appear or progress.
• Mental Health Issues: Depression. This generation is very unlikely to seek mental health services and views depression as an embarrassment to be handled alone. Because this generation respect’s authority, the managers role in referring a person to the EAP is extremely important.

• Substance abuse issues: Disease. Long-term alcohol abuse leading to disease. Misuse of alcohol may become more pronounced to reduce the stress of unmanaged mental health issues or as a strategy to avoid uncomfortable relationships.


Notes: Often portrayed by the media as a generation of optimism, exploration, and achievement. Compared to previous generations, more young adults pursued higher education or relocated away from family to pursue career and educational interests. Complex collective identity from influences of Vietnam War, increasing racial tensions, and self-exploration and peace movement of the 60s. This generation participated and saw some of the greatest social changes in the country’s history during the 60’s and 70’s with the Civil Rights Movement and the Women’s Movement. Coined phrases such as “glass ceiling” and “equal opportunity workplace” and began using personality profiles to build awareness of how to get along with all co-workers.

Characteristics of Workers:

• Values: individual choice, community involvement, prosperity, ownership, self-actualization, health and wellness.

• Attributes: adaptive, goal-oriented, focus on individual choices and freedom, adaptive to a diverse workplace, positive attitude.

• Work Styles: confidence in tasks, emphasize team-building, seek collaboration/group decision making, avoid conflict.

Ethnic and cultural issues/implications: Equal rights among races and genders not fully realized. With time, might anticipate greater poverty among minority members.

Perspectives on EAP: This generation has driven the development of EAP services over the last 20 yrs. Took it from just alcohol recovery to assistance with work stress, family issues, depression, anxiety, grief and loss issues, financial and work/life services.

Common EAP issues:

• Financial issues: savings and debt management. Retirement planning. Unchecked spending prompted by the economic boom in the 80’s and materialistic greed. High secured and unsecured debt balances, college tuitions, elder care and medical expenses taking a toll. Recent market fluctuations and social security uncertainty increase anxiety. Many boomers want to
work beyond 65 for income and sense of identity. Some may retire into leisure pursuits or another career.


- Marital/family issues: depression, anxiety, self-esteem. Sandwich generation – stress from caring for children and parents can be felt as financial and marital stress and may impact absenteeism, performance and fatigue.

- Medical issues: Lifestyle issues, chronic illness. More employees may be receiving treatment for breast, colon, prostate cancers. This group is very receptive to prevention programs designed to minimize risk.

- Mental health issues: Depression, anxiety, self-esteem. This generation known for pursuing activities and spending money on self-improvement services. Will readily access mental health services and psychiatric meds. Mental health services framed as self-improvement and coaching may increase utilization.

- Substance abuse issues: Disease, prescription drug use. Alcoholism w/physical effects, medications used to relieve pains from aging and surgeries.


Notes: Gen Xers were pushed towards adulthood at an age earlier than any other recent generation. They found the future disappointing and somewhat unappealing, wondering what it would hold. They grew up in the era of emerging technology and political and institutional incompetence – Watergate, three mile island, Bhopal, Iranian hostage crisis, Iran-Contra, Clinton-Lewinsky. Technology rapidly advanced making items smaller and faster – calculators, fax machines, computers. Spent less time with parents – latchkey kids – sometimes taking care of siblings while both parents worked. Autonomy and self-reliance, rather than respect for authority. Economic decline at the end of the 80s. Ungraciously called the “boomerang” generation, many returned to live with parents in the 20s.

Characteristics of Workers:

- Values: Contribution, feedback and recognition, autonomy, time with manager.

- Attributes: Adaptability, independence.

- Work Styles: High-quality end results, productivity, balance between work and life – work to live not live to work, flexible work hours/job sharing appealing, free agents, see self as a marketable commodity, comfortable with authority but not impressed with titles, technically competent, internal promotion, ethnic diversity.
Ethnic and cultural issues/implications: Used to different cultures, single-parent and blended families, embraces diversity.

Perspectives on EAP: For this generation EAP has evolved to work/life services. Skill development and wellness seminars, work/life programs, workplace programs designed for flexibility will draw Gen X’s participation.

Common EAP issues:

- **Financial issues:** One-income families with children, savings. This generation has been much better than previous about saving money. However, for parents determined to raise their children with less dependence on day care, many seek part-time, depend on family, or stay at home – reducing household income.

- **Legal issues:** Divorce, child custody and support. Divorce rate generally less than national average, however divorce rate is high and viewed to be normal by many.

- **Marital/family issues:** Career vs. marriage and family, parenting roles, relationships. Factors such as financial dependence on parents and generational expectations for women to work and contribute significantly to household income have narrowed choices for this generation when choosing to marry or begin a family. The age of marriage increased to late 20s to early 30s. Gen Xers wanted to raise children differently than their parents “it takes a village to raise a child”, they emphasize it takes *parents* to raise a child. Child raising is more traditional and pragmatic. Courtship by women is more frequent. Career minded people of this generation are more likely to find and receive emotional support from friends, then committed romantic relationships, hence the term “urban tribe”. Due to economic conditions, some Xers are choosing to live together in group homes.

- **Medical issues:** Pregnancy, smoking-related health issues. Although marriage was delayed until later in life, now Gen Xers are having children at a higher rate than ever – by the year 2000, 65% of women aged 25-34 had had children. Smoking rates for ages 25-44 have the highest prevalence at 25.6% according to the CDC (2003).

- **Mental health issues:** Depression, anxiety, eating disorders. Depression and anxiety are very common due to the many stressors related to upbringing and social experiences. High divorce rate of parents contributed to depression. Confusion and anxiety related to meaningful intimacy. Eating disorders – extreme thinness associated with success, achievement and class – reinforced by men.

- **Substance abuse issues:** Marijuana, alcohol. Binge drinking and drugs less associated with this generation as work and family modify their usage. Drug testing very common at work. Problems are caught earlier.

Notes: Social scientists have recently identified a new developmental period – emerging adulthood. This period is characterized by self-exploration, experimentation, and promise. Technological advancements and real-time media and communication drive their expectation for immediacy. Whereas Baby Boomers saw the future as theirs, Gen Xers found the future disheartening, Gen Y questions whether they will have a future. Affected by Columbine and Sept. 11. “Live for today” and “Just Do It” attitudes. Due to Baby Boomer parents coddling their children, Gen Y workers have high expectations of recognition and reward from others with minimal effort on their part. Close ties still to parents and look for supervisors to provide that same nurturing role. Many have seen their parents lose jobs as a result of downsizing and reorganizations – producing feeling that work is temporary and unreliable. This group can be opportunistic and will job hop to meet immediate wants, needs. Grew up with “a village raising a child” and “no child left behind”. These workers prefer to work in teams rather than individually and are easily accepting of diversity.

Characteristics of Workers:

- Values: Self-expression is more important than self-control, marketing and branding self is important, violence is an acceptable means of communication, fear living poorly – this is related to lifestyle enjoyment not wealth, Respect must be earned; it is not freely granted based on age/authority/title.

- Attributes: Adapt rapidly, crave change and challenge, create constantly, exceptionally resilient, committed and loyal when dedicated to an idea/cause/product, Accept others of diverse backgrounds easily and openly, global in perspective.

- Work Styles: Want to know how what they do fits into the big picture and need to understand how everything fits together – want to effect change and make an impact, view their own work as an expression of themselves – not as a definition of themselves, exceptional multi-taskers – need more than one activity happening at a time, seek active versus passive involvement, less likely to seek managerial or team leadership positions that would compromise life outside of work, seek flexibility in work hours and dress code, seek a relaxed work environment – bright colors/open seating/personal touches, expect corporate social responsibility and will not work for – or purchase products from – organizations that are not socially responsible, seek work in teams, seek continuing learning and will take advantage of training made available to them, want everything instantly – everything now, effort can be separated from reward – there is no such thing as pay for performance, feeling of entitlement, seek to balance lifestyle and work – with more focus on lifestyle.

Ethnic and cultural issues/implications: Approximately 20% of students have one foreign born parent. It is anticipated that by 2050 50% of pop will be Hispanic or Asian. Gen Y is openly accepting of diverse backgrounds and beliefs, which creates a community of tolerance and inclusion.

Perspectives on EAP: Predisposition to seeking treatment only in crisis.
Common EAP issues:

- **Financial issues**: Debt management, savings, loans and credit. Gen Y view financial independence as a pre-requisite for adulthood and before considering serious romantic relationships or marriage. May live at home or co-habit because income does not cover expenses. Basic skills in establishing a budget, debt reduction, managing savings may be lacking.

- **Legal issues**: Traffic violations, drunk driving, criminal issues (such as assault), child custody and support.

- **Marital/family issues**: Communication, financial dependence, effective communication, healthy relationships, cohabitation. Communication between parents and emerging adults can be difficult – especially when emerging adults are financially and possibly shelter dependent on parents. Gen Yers are trying to figure out if they want marriage which may have future financial implications with divorce or if they want to cohabitate without marriage.

- **Medical issues**: Pregnancy, routine preventative medical care, accidents. Many are accessing the ER for routine medical care – suggests unfamiliar with medical benefits, have not developed relationship with primary care physician, or lack of insurance.

- **Mental health issues**: Depression, anxiety, appearance of long-term/chronic disorders such as bipolar disorder and thought disorders. Emerging adulthood is a time of significant transition both socially and psychologically. Anxiety disorders are most often reported by young workers and are the most common reason for seeking mental health services. The early 20s is a time when more chronic mental illnesses first appear. Risk of suicide is high when treatment is delayed and illness becomes severe.

- **Substance abuse issues**: Binge drinking, experimentation with illicit drugs.

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**Cornell University – Benefits Office – endowed active & retiree under 65 health plans, leading conditions sorted by member age group & number of patients, CY 2009**

*(Sorted By Generation, Top 10)* key ENT = ear, nose, throat. Otitis = ear infection. NOS = not otherwise specified. NEC=not classified under any other grouping.

**Age 65+** (Prevention/admin health encounters, Eye disorders – degenerative, Hypertension – essential, Infec/Inflamm – skin subcutaneous tissue, Anthropathies/Joint disord NEC, Lipid disord, Cancer – skin, Coronary artery disease, Tumors – skin – benign, Diabetes)


National statistics 2008 – principal diagnosis only – rank order of CCS principal diagnosis category by number of discharges
Age 18-44 (trauma to vulva and perineum, other maternal complications of birth and puerperium, previous cesarean section, other complications of pregnancy, mood disorders, normal pregnancy and/or delivery, hypertension during pregnancy, fetal distress and abnormal forces of labor, early or threatened labor)

Age 45-64 (hardening of the heart arteries and other heart disease, osteoarthritis, chest pain, spondylitis – intervertebral disc disorders, pneumonia, complication of medical device/implant or graft, mood disorders, heart attack, congestive heart failure, chronic obstructive lung disease)

Age 65-84 (congestive heart failure, osteoarthritis, pneumonia, hardening of the heart arteries and other disease, cardiac dysrhythmias, chronic obstructive lung disease, septicemia, heart attack, acute cerebrovascular disease, complication of medical device/implant or graft)

CDC/NCHS, Health, United States 2009
(highlights)

- Population in U.S. approximately 300 million, projected 440 million in 2050
- In 2007 approx. 12% of pop was 65+, projected 2050 that 20% will be 65+
- 2005-2006 68% of 20-74 year old are overweight (includes obese); approximately 35% obese
- Often or almost always had trouble sleeping: 32% of females ages 18-44, 38% of females age 45-64, 34% of females age 65+; 23% of males age 18-44, 28% of males age 45-64, 30% of males age 65+. 16% of females age 45-64 yrs old often or almost always took sleeping pills or medications to help them sleep.
- Flu vaccinations: About 70% of people aged 75-84 took the flu vaccine; only about 25% aged 50-64 were inoculated.
- 2007, Age 45-64: hypertension – 46% at poverty level, 30% twice or more poverty level; diabetes – 19% at poverty level, 9% twice or more poverty level; serious heart conditions – 12% at poverty level, 6% twice or more poverty level.
• Depression in adults, 2005-2006: age 18-39 is 4.7%; age 40-59 is 7.3%; age 60+ is 4.0%

• Activity limitation caused by chronic conditions, 2006-2007, 12-17 age, # per 1,000: 24.7 ADHD; 31.6 learning disability

• Activity limitation caused by chronic conditions among working-age adults, 2006-2007, # per 1,000: 18-44 yrs old, 14 mental illness, arthritis or other musculoskeletal; 45-54 yrs, 23 mental illness, 27 heart or other circulatory, 58 arthritis or other musculo.; 55-64 yrs old, 28 mental illness, 31 diabetes, 61 heart or other circ., 99 arthritis or other musculo.; 65-74 yrs old, 41 diabetes, 96 heart or other circ., 122 arthritis or other musculo.; 75-84 yrs old, 138 heart or other circulo., 167 arthritis or other musculo.; 85+ yrs old, 89 vision, 72 hearing, 204 heart, 281 arthritis.

• All ages. Leading causes of death in order are: all causes, heart disease, cancer, stroke, unintentional injuries, chronic lower respiratory disease, diabetes. Cancer, chronic lower respiratory disease, and diabetes are showing upward trends since 1950.

• 2007, under age 65, uninsured about 15%, Medicaid approx. 12%.

• 2007, length of time uninsured: age 18-24 18% uninsured for >12 months; age 25-34 20% uninsured for >12 months; age 35-44 14%; age 45-54 11%; age 55-64 9%.

• 2007, personal health care expenditures, source of funds: 36% private health insur, 14% out of pocket, 22%Medicare, 9%Medicare (federal), 7%Medicaid (state).

• Medicare expenditures have grown from about 100 billion in 1990 to about 400 billion in 2007.

• In age 65+ 10 out of every 100 pts received MRI/CT/PET scans in physician office or in hospital outpatient program in 1996. In 2007 30 out of every 100 pts received scans.

• Total knee replacements in adults age 45+ has climbed from 26% in 1996 to 44% in 2006.

• Number of people getting colonoscopies by age group 1996 vs. 2006: 18-44 yrs old 29 vs. 67 (visits per 10,000 population), 45-64 yrs old 106 vs. 383, 65-74 yrs old 216 vs. 637, 75-84 yrs old 229 vs. 517, 85+ 97 vs. 174.

• From 1996 to 2006 assisted reproductive technology cycles increased by approximately 10,000 in age groups 35-37, 38-40, and 41+ and grew by about 25,000 in under 35 pop.

• 2006 antidiabetic drug use by age group: 45-64 yrs old men 7.9% women 8.7%; 65+ men 15% women 15.6%

• 2006 statin drug use by age group: 45-64 yrs old men 16.8% women 13.5%; 65+ men 38.9% women 32.8%
Talk w/ Representatives of Diversity Groups – currently there is no affinity group

Needs of identified group (GAP Analysis – Are there gaps in what we currently offer versus what we should be offering):