

a VITAL WorkLife article

A Promising Future: The Millennial Impact on the World of Medicine

By Liz Ferron, MSW, LICSW



Coming up in the article:

- A look at the basic wants and needs of millennial physicians.
- The challenges and opportunities brought by millennials in the healthcare landscape.
- Strategies for achieving the best outcomes with the millennials on your medical team.



155,000 physicians in the U.S. are under the age of 35, 15% of the total physician population in the country.

Demographers use different age ranges to define the millennial generation, but the most common seem to include those born between the years of 1984 to 2000; and by this criterion, they're a huge cohort: 76 million people in 2017, nearly a quarter of the US population.¹ This statistic serves the landscape of healthcare as both an enormous opportunity and a possible conundrum in need of strategic maneuvering.

Currently millennials are making their way into medicine in a big way. According to the latest AMA survey data, in 2015 about 155,000 US physicians, 15% of the total, were under age 35, and a quarter of the American Academy of Family Physicians' active members were 39 or younger. One-fourth of the American Osteopathic Association's membership was 35 or younger.²

There's been a flood of description and analysis of this generation, with pundits generally oscillating between a negative and a positive pole: millennials are self-absorbed and entitled; millennials are idealistic and open-minded. Their impact on the workplace has been extensively analyzed from both points of view and everything in between.³

When it comes to their impact on medicine and medicine's impact on them, Michelle Mudge-Riley, DO, MHA, has a privileged perspective. The physician mentor and peer coach has counseled many younger physicians, and she avoids generalizations while pointing out a few key concerns coming up often with her millennial clients.

1. "So How Many Millennials Are There in the US, Anyway? (Updated)," Marketing Charts, April 30, 2018 2. "Millennials in Medicine," Medical Economics, November 25, 2015 3. "Who Are the Millennials?," Live Science, September 8, 2017. "They want time with their families, to watch their kids' soccer games or school plays. In general, they're interested in areas outside of medicine, **and they're unwilling to let medicine be as all-consuming in their lives as it was for earlier generations.**"

> of millennial physicians believe a work-life balance is an **absolute priority.**

They Want Work-Life Balance

"The millennial physicians I talk to want to have the ability to do the things that make life worth living," she says. "They want time with their families, to watch their kids' soccer games or school plays. In general, they're interested in areas outside of medicine, and they're unwilling to let medicine be as all-consuming in their lives as it was for earlier generations."

Their desire is one statistics bear out. In a 2017 survey carried out with the online physician panel M3 Global Research, the AMA found no fewer than 92% of the millennial physicians they contacted calling work-life balance a priority.⁴ And in 2018, a survey found half of the 600 millennial physicians contacted had left a position because of poor work-life balance.⁵

"They're often better negotiators on these issues than their elders," Mudge-Riley adds. "I know of a young physician who recently turned down an offer of an excellent position because it simply didn't provide her with what she needed. She went into the discussion willing to walk and stand by her convictions."



<u>4. Alyssa Rege, "AMA: 92% of Millennial Physicians Cite Work-Life Balance as a Priority,"</u> Becker's Hospital Review, April 3, 2017
<u>5. "Survey Report: Millennial Doctors Still Finding Jobs the Old-Fashioned Way,"</u> CompHealth, April 11, 2018



They Look Beyond the Clinic

In the same AMA survey, 4 out of 5 young physicians said they "hope to seek out non-patient-care-related fields potentially in addition to their full-time work." Mudge-Riley notes there is an entrepreneurial tendency in the generation, with many millennial physicians pursuing "side gigs," either medical in nature or otherwise. "They may get involved in products or services," she says, "like the surgeon who finds a certain tool she needs isn't available—and then goes out and makes and markets the tool."

Or a physician may simply want to give more time to photography, painting or another pursuit "serving aspects of his personality not addressed in medicine," Mudge-Riley says.

But many younger physicians are opting out of clinical practice altogether, according to Mudge-Riley. They seek positions with insurance companies or as consultants to businesses working with the complex medical regulations in the Affordable Care Act. They pursue work with established healthcare-oriented technology companies or startups. This has the potential to further the physician shortage projected in a 2018 study conducted by the Association of American Medical Colleges.⁶ You can learn more about this forseen shortage in our previously published insight, <u>"Projections on the Graying of the</u> <u>Physician Labor Force."</u>

6. "New Research Shows Increasing Physician Shortages in Both Primary and Specialty Care" AAMC, April 11 2018

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Michelle Mudge-Riley, DO, MHA

They Want a More Humane Medical Culture

In many ways, millennial physicians' attitudes and actions on these topics reflect a profound dissatisfaction with the way clinical medicine is taught and practiced. For example the breakneck pace and its orientation toward productivity and the time-honored harsher traditions such as long hours, sleep deprivation and authoritarian teaching and mentoring. "They just aren't willing to stand for the negative parts of medical culture," says Mudge-Riley.

Writing on the Next Steps in Derm web site, Angelo Landriscina, MD, a millennial physician, agrees. "We, as a generation, have realized sacrificing our own well being does not make us better doctors, but rather unhappy and burnt-out technicians just going through the motions."²

Yes, They Are Tech Savvy

One aspect of contemporary medicine prompting complaints from older practitioners is much less of an issue for young physicians: electronic medical records. There's one millennial

characteristic all the analysts agree on: the cohort is comfortable with digital technology, having grown up with smartphones in their hands. "They're generally not afraid of EMRs," says Mudge-Riley.

Beyond the EMR issue, millennials are using technology to connect with patients and the wider world. As pharmacy executive Richard Saynor writes in a LinkedIn Pulse post, "as a generation that has grown up with blogs, vlogs, and other forms of self-promoting platforms, younger doctors today also have no issue documenting their experiences or lending their personal and professional perspectives to TED talks. This allows them to build more meaningful connections in the virtual space as well as in person. For the savvy millennial doctor, technology helps them humanize their profession, extend the continuum of care to a wider spectrum, and circumvent the time-scarce world in which they now operate."⁸

As "digital natives" millennials are driving technology spending and adoption to unprecedented levels to meet the data-analysis needs of value-based care, patient engagement and care management. This will be even more true with new resident physicians who will be key players in making technology work better for everyone in the future.⁹

Z. Angelo Landriscina. MD. "Millennial Physicians: Changing the Face of Medicine." Next Steps in Derm, July 8, 2018 8. Richard Saynor, "Millennial Physicians: On the Edge of a Brave New World," LinkedIn, September 18, 2018 9. "The New Resident: How Millennial Physicians Are Changing Medicine," Spök, May 1, 2018.



of millennials carry a smartphone on their person **at all times** of the day.⁸



Working with Millennials

If these millennial characteristics present challenges to medicine-as-usual in 2018, they also present real opportunities. For Mudge-Riley, the attitudes needed to work effectively with younger physicians hold out the promise of making medicine better overall.

"To work with millennials," Mudge-Riley states, "their older colleagues need to listen to them, actively ask them for feedback, for input on what they're thinking and feeling, and in general develop a relationship of partnership rather than the old top-down, hierarchical model of mentoring and teaching.

Simultaneously millennials can take an active role in improving how they interact with older physicians. By acknowledging and honoring the expertise of their veteran counterparts they can seize the opportunity to learn from those who have paved their way and grow within their field, effectively enhancing the team they operate within.

The older model is slow to evolve, Mudge-Riley acknowledges. And Angelo Landriscina points out what millennials are actually thinking and feeling about medicine is "often read by those more senior to us as 'laziness' or an aversion to dedicating oneself fully to one's work. I invite these physicians to try to put themselves back in our shoes and see how dedicating time and energy to oneself can help one put even more effort into helping their patients."

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administrators and individual practitioners in many areas, including stress management, change management and conflict resolution. Liz is a Licensed Independent Clinical Social Worker and received her MSW degree in clinical social work from the University of Minnesota. She was also a consultant for the Earl E. Bakken Center for Spirituality & Healing at the University of Minnesota. She has served three terms as President of the Minnesota Employee Assistance Program Administrators and Counselors (MEAPAC) and is a former adjunct faculty member at the College of St. Benedict.

On the other hand, voices for change are being raised, and not just among younger physicians.

For example: writing in MD Magazine, Arlen Meyers, MD, MBA, (A Baby Boomer, be it noted) calls for changes in medical education to reflect millennials' desire for non-clinical experience. "In addition to rotations on surgery, medicine, ER, and the ICU," he writes, "students should be offered elective rotations in biotech, medical device, diagnostic development, and healthcare IT. They should do summer internships in startups, including the summer before starting medical school."¹⁰

"Medicine is an all-consuming practice," says Mudge-Riley, "and it has to be—people's lives are at stake. But by coming to terms with the needs of younger physicians, we have an opportunity to work together to create clinical and learning environments conducive to positivity. But that's only going to happen if both older and younger physicians are willing to talk with each other and accept each other's perspectives and attitudes."

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Sources:

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