

# **The “Millennial Effect” on Campus**

## **The BACCHUS Network**

**General Assembly**

**November 6, 2009**

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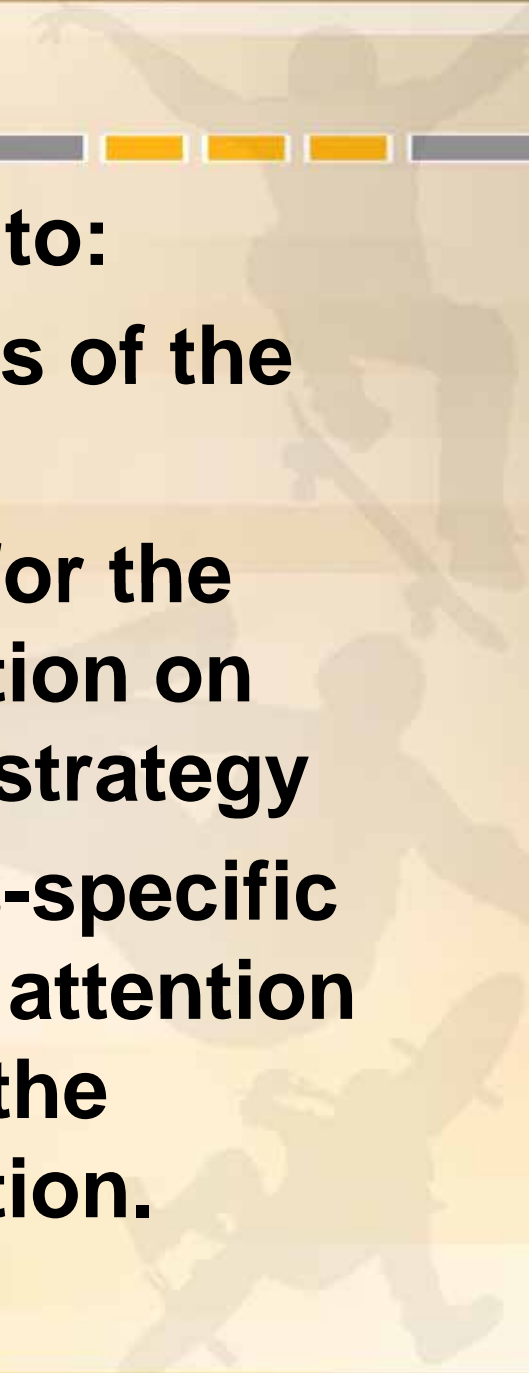
**Michael P. McNeil, M.S., CHES, FACHA**

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**Columbia University**

**Downstate NY Coordinator, The BACCHUS Network**

# Session Objectives

The background of the slide features a faint, light-colored silhouette of a person in a dynamic pose, possibly a tennis player, with arms raised and a racket visible. The overall background is a warm, golden-brown color with a subtle grid pattern.

**The attendee should be able to:**

- 1. Identify key characteristics of the millennial student**
- 2. Discuss the implications for the millennial student population on college health promotion strategy**
- 3. Identify field- and campus-specific areas which require more attention and inquiry to best serve the millennial student population.**

# Simply Defined

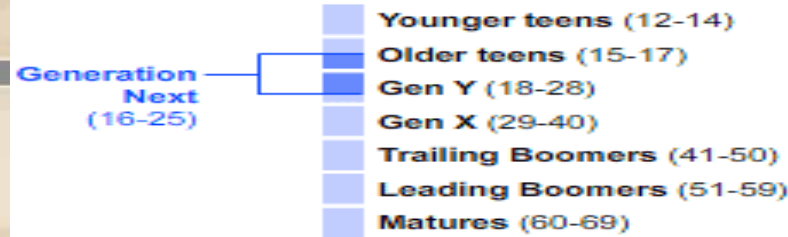
**Millennials are students born between 1982 and 2002.**

- **Graduate from high school between 2000 and 2020.**
- **Earn first bachelors degree between 2004 and 2024.**
- **The first wave are now entering the workforce.**

**Also known as:**

- **Net Generation**
- **Echo boomers**
- **iGeneration**
- **DARE Generation**

## WHERE ARE THEY ON THE GENERATIONAL SCALE?



Source: Pew Internet & American Life Project

## HOW LARGE IS THIS GROUP?

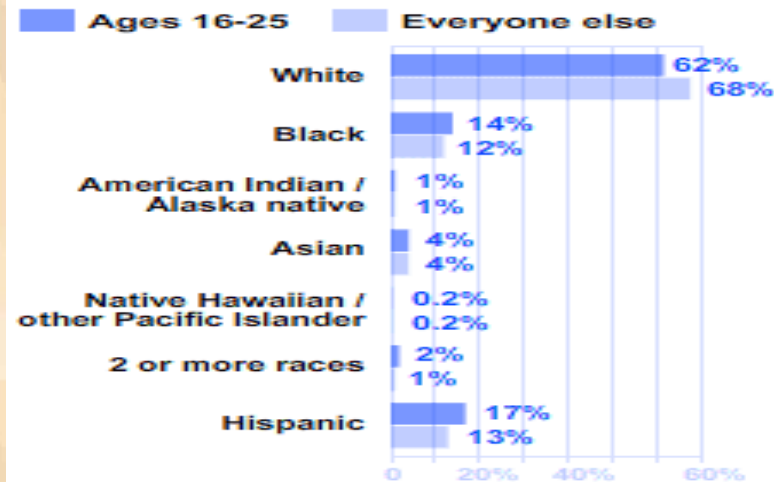
14 of every 100

Americans belong to Generation Next



Source: U.S. Census

## WHAT IS THE RACIAL/ETHNIC BREAKDOWN?



Source: U.S. Census

By Ron Coddington, Paul Overberg, and Rhyne Piggott, USA TODAY

# Millennial Moments

## These students will remember...

- OJ Simpson Trial
- Oklahoma City Bombing
- Princess Diana's Death
- Columbine
- Tupac Shot
- 2000 & 2008 US Presidential Elections
- September 11, 2001
- "War on Terror"
- Virginia Tech Shootings
- Hurricane Katrina
- Indian Ocean Tsunami
- The end of "Friends"

# Millennial Pop Culture

Can you talk at length about:

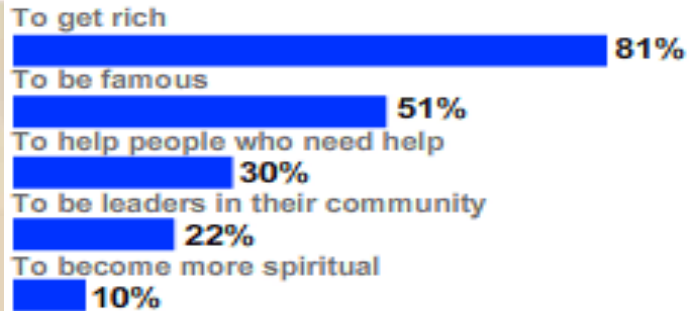
- Monica Lewinsky
- Harry Potter
- Real World-Road Rules
- Boy Bands
- V-chips
- Smoking Bans
- Hip Hop
- American Idol
- YouTube



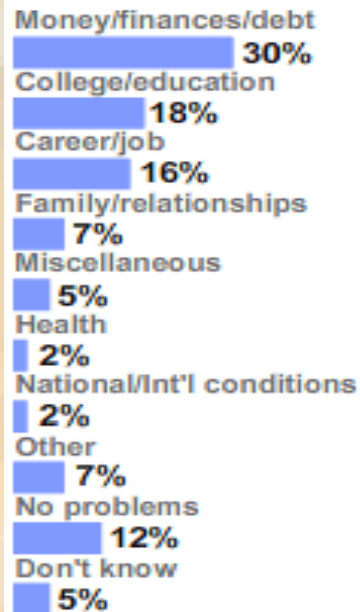
Say What?

- TRL
- AIM
- TTYL
- BFF
- LMAO
- ROFL
- OMG
- B4
- TISNF

Asked to choose their generation's top goals from among five options, 18- to 25-year-olds listed these as either most important or second-most important:



... and said their most important individual problem is:



Source: Pew Research Center 2006 Gen Next Survey of 579 18- to 25-year-olds; margin of error  $\pm 5$  percentage points.

By David Evans and Julie Snider, USA TODAY



"YOU GET *FIVE* MINUTES BETWEEN SOCCER AND PIANO? WHAT DO YOU DO WITH ALL THAT FREE TIME?!?"

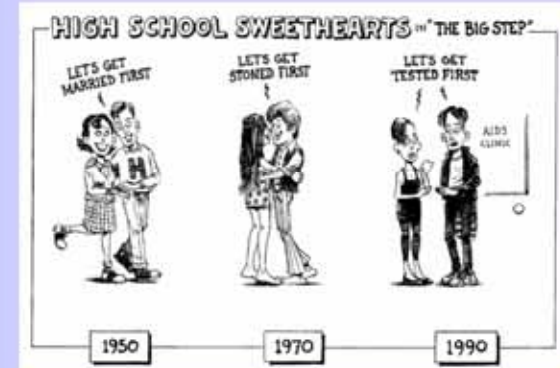
# Interesting Health Tidbits

## Behaviors

- **Pharming Parties**
- **ADD/ADHD Meds**
- **The rise of Meth**
- **Childhood Obesity**
- **Drinking & smoking rates lower than recent decades**
- **Declining violence rates**

## Health Conditions

- **H1N1 Flu**
- **SARS**
- **HIV**
- **West Nile**
- **Anthrax**



# Millennial Characteristics

- **Structured rule followers**
- **Protected and sheltered**
- **Confident and optimistic about their future**
- **Conventionally motivated and respectful**
- **Cooperative and team-oriented**
- **Pressured by and accepting of authority**
- **Talented achievers**

# Millennial Communication & Expression

- **Core values of uniformity and conformity**
- **Averse to individual recognition**
- **View ritual as “ties that bind” community**
- **Cite religion as second-most influence on their lives, just behind parents**

# Millennial Communication & Expression

- **Think more highly of themselves**
- **Hold conventional values & seek traditional lifestyles** (esp. post Sept. 11)
- **Admire consistency in rules & actions**
- **Risk-averse and afraid of failure**
- **Score higher on scales of warmth, sensitivity, apprehension, openness to change, reasoning, emotional stability, and social boldness**

# Millennial Communication & Expression

- **Dress is more uniform than previous generations**



- **Do not want to stand out from their peers or to be perceived as loners**
- **Prefer group academic and social projects, but do not like sharing bathrooms, group showers or undressing in front of others**

Highlights of a survey of 1,000 U.S. teens and 20-somethings:

### LOOKING HOT

Over one-third think they look hot when they wear clothing that shows a little skin.

### DOING THEIR BEST

86% feel it is important to do the best they can do in all areas of their lives.

### INDEPENDENT

53% never want to have to rely on anyone.

### CAREER & FAMILY

76% want to have both.

### CAREER PRESSURE

43% feel pressured to know exactly what career they would like to pursue.

### GROWING UP

39% think its happening too fast.

### ATTITUDE ABOUT SEX

33% think having sex isn't that big of a deal anymore.

Source: Synovate YC

By Ron Coddington, USA TODAY

# Technology

**This generation uses technology at greater rates and in different ways than those from other generations. A survey of 7,705 college students found that:**

- 97% own a computer**
- 94% own a cell phone**
- 76% use Instant Messaging**
- 69% of students have a Facebook account**
- 56% own an mp3 player**
- 49% download music using peer-to-peer file sharing**
- 34% use websites as their primary source of news**
- 28% own a blog and 44% read blogs**
- 15% of IM users are logged on 24 hours a day/7 days a week**

# Technology

- **Because they have always known 24/7 information access they now expect constant access**
- **Good at multi-tasking**
- **Expect blended learning & interaction**
- **Expect highly interactive technology**
- **Use technology as a primary means for connection, interacting and communicating**
- **Allows for wider net of relationships, but replaced face-to-face connection, communication and conflict resolution**



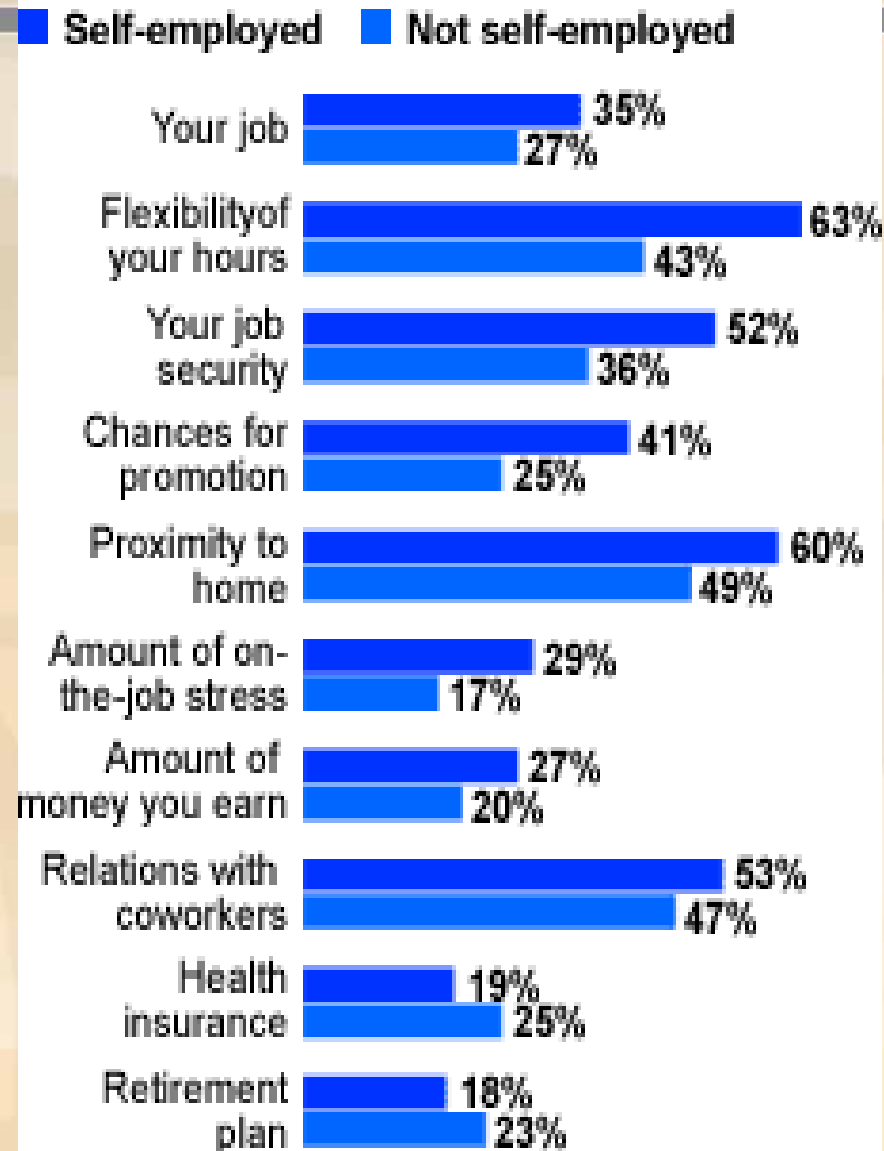
# Millennials in School

- **Are taught values and character, not to question adult authority**
- **Peer pressure is used in positive ways to influence decision-making** (social norms anyone?)
- **Most attended schools that promoted collaborative learning and group projects which impacts how students communicate with each other and instructors**

# The Millennial Graduate Student

- **Overestimates the amount of education necessary for a chosen career path**
- **Calls for an expansion of the parameters for class projects beyond the traditional**
- **Expects flexibility with course scheduling and class format**

Percent completely satisfied with each aspect of their job:



Source: Pew Research Center

# Employee & Colleague

## MILLENNIAL LEADERSHIP & SUPERVISORY EXPECTATIONS

- **SILENTS (1925 – 1942) are turning over collegiate leadership to subsequent generations;**  
**BOOMERS (1943 – 1960) represent 50.6% of the current faculty;**  
**GEN-XERS (1961 – 1981) comprise 18% of full and part-time faculty and are growing in significant numbers in the Student Affairs professions;**  
**MILLENNIALS (1982 – 2002) will account for the majority of college students over the next several decades**
- **Expects fair and direct managers who are highly engaged with their professional development**
- **Expects to be in a position of power in a relatively short period of time – UP or OUT**
- **Expect immediate feedback, get bored easily when not challenged, and expect a manager to give clear expectations, communicate often and articulate ALL desired outcomes**

# Employee & Colleague

## TEAM APPROACH

- **Where's my team?**
- **'Everyone gets a trophy for participating'**
- **Do not respond well to "predatory competition among colleagues"**

# Employee & Colleague

## WORKSTYLE

- **Will only do what is expected of them to achieve their desired outcome**
- **Thinks in the short-term and do not expect to be in a position for long**
- **Wants to do the work better and faster than their co-workers**
- **Values work-life balance and workplace flexibility**
- **Do not see work as work, merely as a stepping stone to a better job**
- **Have an inflated sense of their abilities and expect higher salaries and better benefits than traditionally offered**
- **'Career customization'**

# Employee & Colleague

## SKILL-BUILDING

- **Critical thinking and initiative are developmentally lacking in the workplace among millennials**
- **Workplace deficiencies exist in written communication, professionalism, and work ethic**

# Helicopter Parents

## CHANGING FAMILY

- Much smaller, allowing for more parental time and resources
- Headed by older parents with an average age of 27
- More educated (one or both parents are college-educated)
- Shift in adult attitudes toward children in the 80's. New interests in child safety, health, education, socialization and spending.



# Helicopter Parents

## SHELTERED BY PARENTS

- **Trophies for participation and being “special”**
- **Parents have set up their children to expect good news**
- **Parents are cited as the number one life influence on the lives of their millennial children**



# Helicopter Parents

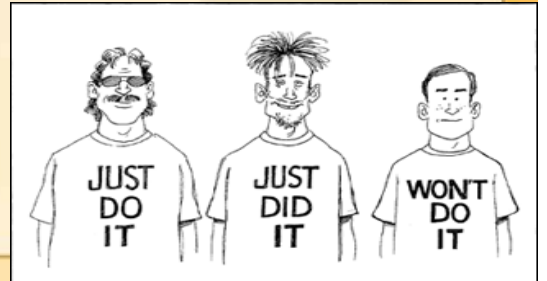
## DEPENDENCE ON AUTHORITY

- **Discomfort or unfamiliarity with situations = parental protection**
- **Parents are heroes and friends**
- **More supervised and spend more time with their parents than previous generations**
- **Parents have encouraged and facilitated the increasingly scheduled lives of millennials making unstructured time uncomfortable and unfamiliar**
- **Admissions professionals suspect that more and more college applications are being completed by parents**
- **Parents are actively involved in course selection, major declaration, negotiating grades, and often monitor course content**
- **Much better communication flow with parents than recent generations**

# Peer Education & Outreach

## PROGRAM DEVELOPMENT

- **Expect clear and practical answers – “How do I get an ‘A’?” ...”How do I get drunk faster?”**
- **Drugs are perceived as a means to an end, another choice that brings results (i.e. prescription drugs, steroids)**
- **Respond well to messages of positive reinforcement, not scare tactics**



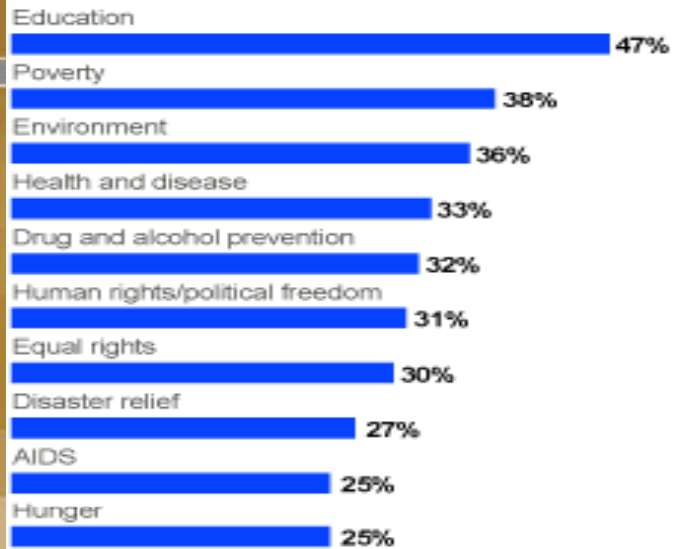
# Peer Education & Outreach

## ATTITUDES & PERCEPTIONS

- Like to congregate, cooperate and be perceived as cooperative
- Respect for conformity because it relieves pressure to improvise
- Create the right appearance by hiding unapproved behavior and living by the philosophy of “It’s okay, as long as you don’t get caught”
- Increasing acceptance of ‘zero tolerance’ policies on everything from cheating to school violence to drug use and sexual activity



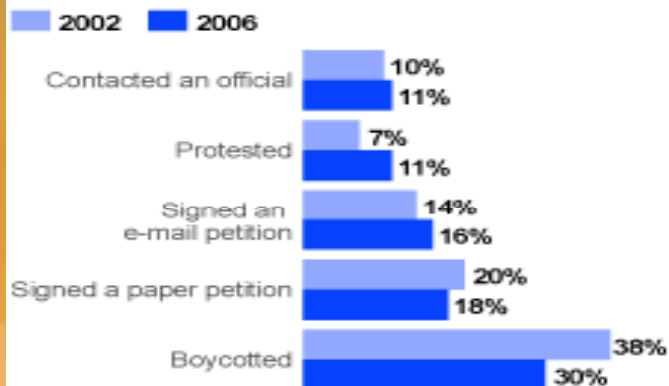
### Top 10 causes on millennials' minds:



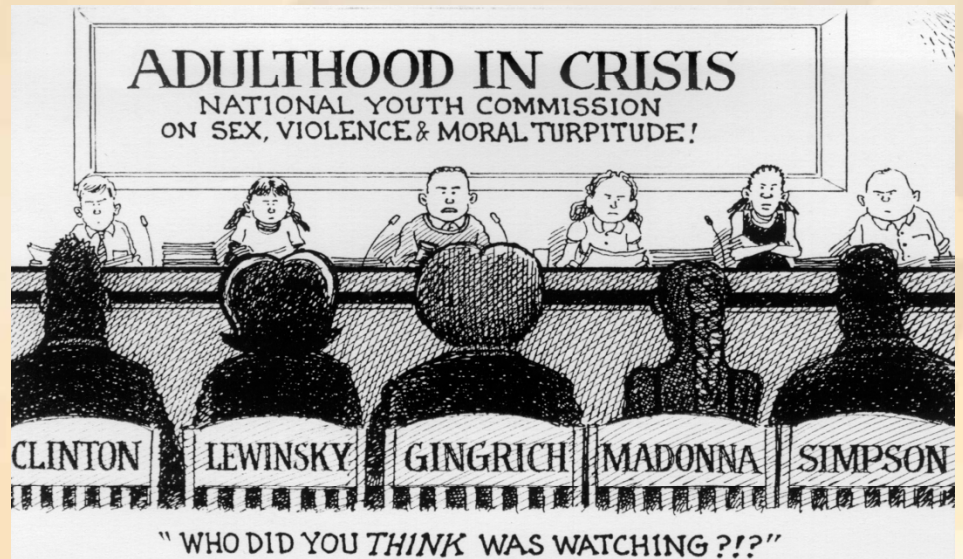
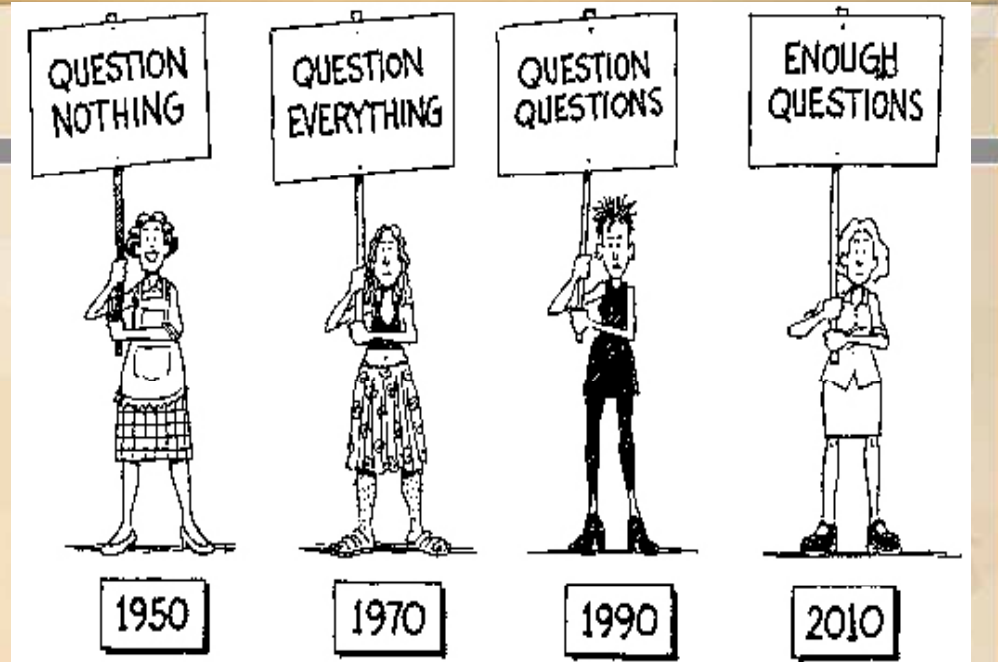
Sources: 2006 Cone, AMP Insights

### Civic, political involvement

Percentage of young people who say they participated in these civic or political activities in the previous 12 months:



Source: Survey of 1,658 15-to 25-year-olds, by Center for Information & Research on Civic Learning & Engagement; margin of error,  $\pm 2.6$  percentage points



# Civic Engagement

- **Believe in community service as long as they get credit for it, literally and figuratively**
- **Millennials feel that they can change the country through non-political means, e.g. volunteerism**
- **They are ready to solve local problems themselves and start organizations to help them do so. This is partly a reflection of the current focus on service learning in schools.**
- **Millennial interest in community service stems from the belief in group action and desire to see tangible changes in their communities.**
- **Millennials want to apply their technological abilities when solving social problems. They are much more interested in practical questions and solutions than in theoretical ones.**
- **Millennial activism may focus increasingly on class and income divisions rather than traditional race and gender divisions that have been the focus of previous generations.**

# Cultural Diversity

- **By 2012, total college enrollment will exceed 15.8 million students, an increase of more than 12% over 2003 enrollment levels & 13.3 million of those enrolled will be Millennials.**
- **Between 2004 and 2015, enrollment in higher education is projected to increase by 6% for white, non-Hispanic students; 27% for black, non-white students; 42% for Hispanic students; 28% for Asian, Pacific Islander; and 30% for American Indian or Alaska native.**
- **20% of millennials are second-generation immigrants; 1 in 10 millennials has a non-citizen parent**
- **Persistent application of universal solutions to shared health concerns may serve to perpetuate existing health & learning disparities.**

# Other Issues of Difference

- **Students & parents are used to individual education and development plans throughout elementary and secondary schooling and will anticipate the same level of services at the collegiate level**
- **Deciphering learning deficits from learning disabilities may become more challenging**
- **Those campuses with little funding and staff to support the needs of disabled students may experience an increase in student-driven, grass-roots initiatives to demand more and better services and resources**
- **Millennial students are particularly sensitive to disability and are very focused on inequality, privilege or social justice around access to services and resources.**
- **Enrollment numbers for disabled students are rising**

# **How will the millennials affect college health promotion?**

**The academic higher education experience is evolving to meet the technological and pedagogical expectations and parental influences of the millennial student.**

- Are we projecting and preparing health promotion efforts to maximize impact on the millennial student?**
- Are we integrating student accountability into health promotion efforts?**

# Reflective Thoughts

- How has the digital era impacted student connections to traditional methods of information delivery (handouts, brochures, posters, etc)?
- How has the easy access to information impacted students? To what degree should health promotion efforts work to develop health literacy?
- If the millennial social unit is group-oriented, how should health promotion address the role of group values/lack of individualism in personal decision-making? Do we work with or against this trend?
- How should health promotion leverage the parental influence on students? How do we balance this increased involvement with students' personal limits?

# Your Turn...

- Using the worksheets provided, spend a few minutes with your colleagues completing the chart for one (or more) of the standards.
- Focus on completing the implications for practice as it applies to your campus community.

# Key Resources

- Coomes, M. D., & DeBard, R. (2004). A generational approach to understanding students. In *New Directions for Student Services* (pp. 5-16).
- Junco, R & Mastrodicasa, J. (2007). *Connecting to the Net.Generation: What higher education professionals need to know about today's college students*. NASPA.
- Howe, N. & Strauss, W. (2000). *Millennials Rising: The Next Great Generation*. Vintage.
- Lenhart, A., Simon, M., Graziano, M. (2001). The Internet and education: Findings of the Pew Internet and American life project.
- Projections of Education Statistics to 2015*. (2006). Available from the National Center for Education Statistics: Institute of Education Sciences, United States Department of Education, [www.nces.ed.gov](http://www.nces.ed.gov).
- Spiro, C. (2006). Generation Y in the workplace. *Defense AT&L*, 16-19.
- Young, J. (2003). A new take on what today's students want from college. *The Chronicle of Higher Education*. January 31, 2003.

# Contact me...

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**This presentation is available in the “downloads”  
section of my office website.**

# The “Millennial Effect” on Campus: Discussion Worksheet

## **COMMUNICATION STYLE(S)/EXPRESSION: MORALS/CONVENTIONS—**

- Given the conventional values and traditional lifestyles of the millennial student, how might health promotion reflect and/or counteract the student culture?
- The millennial student is largely risk-averse and afraid of failure. What does this mean for risk reduction?
- Millennial dress is much more uniform than past generations. They do want to stand out from their peers and do not want to be perceived as loners. What implications does this have for peer education recruitment and retention?

## **SCHOOL--**

- Value and character education are routinely being taught in primary and secondary schools, and many millennials will anticipate continuation of such education in college. How does this conversation fit in the context of health promotion?
- Peer pressure is used as a positive influence on millennial drug-using behaviors. What implications does this have for bystander and peer education approaches to health promotion?

## **TECHNOLOGY--**

- Growing up with the Internet, videogames, cell phones...has contributed to the millennial generation's desire for interactive communication and education. What implications does this carry for online health promotion outreach, media information-sharing, and health literacy?
- Technology has made it easier for millennials to think, act, and react in groups rather than individuals. How might groupthink reduce or increase the effectiveness of social marketing strategies?
- Technology has created a wider network of “friends” that has replaced face-to-face connection, communication and conflict management. To what degree of proficiency do we expect our students to be prepared to manage conflict, express concern for a friend, and engage in dialogue about important lifestyle issues?

## **THE MILLENNIAL EMPLOYEE & COLLEAGUE:**

### **LEADERSHIP & SUPERVISORY EXPECTATIONS--**

- The “Silents” (1925 – 1942) are turning over collegiate leadership to subsequent generations; The “Boomers” (1943 – 1960) represent 50.6% of the current faculty; The “Generation X’ers” (1961 – 1981) comprise 18% of full and part-time faculty and are growing in significant numbers in the Student Affairs professions; The “Millennials” (1982 – 2002) will account for the majority of college students over the next several decades. What implications does this intergenerational picture paint for the health promotion workforce?
- Millennials expect to be in a position of power in relatively little time. As such, they expect that their supervisors will be very engaged and interested in their professional development. Given the relatively new and growing field of health promotion professionals, to what degree are we prepared to provide effective leadership to our new colleagues? Given limited resources on many campuses, to what degree is support going to be available?

### **WORKSTYLE—**

- Critical thinking and initiative are developmentally lacking in the workplace among millennials. Workplace deficiencies exist in written communication, professionalism, and work ethic among the millennial workforce. What responsibility do we, as health promotion professionals and educators, to better prepare our young professionals?

## **THE HELICOPTER PARENT: SHELTERED BY PARENTS--**

- Parents are cited as the number one life influence on the lives of their millennial children. To what extent should health promotion leverage this relationship?

## **DEPENDENCE ON AUTHORITY--**

- Parents have encouraged and facilitated the increasingly scheduled lives of millennials. After-school time, weekends, vacations, and summers are often occupied by camps, lessons and other improvement-oriented activities instead of 'free time.' What implications does this carry for time and stress management and problem-solving skill levels and how does this transfer to decisions about health?

## **CHANGING FAMILY--**

- The millennial family is much smaller, allowing for more parental time and resources; is more educated (one or both parents are college-educated); and is headed by older parents with an average age of 27. How do parental expectations of the college experience translate to their student's expectations, particularly around alcohol and drug use?
- There was a shift in adult attitude toward children in the early 1980s. People became interested in and obsessed with children. Concern with child safety, health, education, and socialization rose as did spending on children. Attracting and satisfying the parent is becoming just as important as doing the same for the potential student. What implications does this have on the link between health, academic and career success?

## **PEER EDUCATION & OUTREACH: PROGRAM DEVELOPMENT--**

- Expect clear and practical answers – “How do I get an ‘A’?”...”How do I get drunk faster?” What does this mean for the way in which we share health information?
- “Millennial” health risks: antibiotics resistance rates are increasing, mental retardation and other chronic conditions are slowly rising due to the number of older mothers; back pain and injury rates are reflecting heavy backpacks and increase in competitive sports; repetitive stress injury of arms and wrists reflect extended computer use; reported rates of asthma has risen by 75% among those aged 5 – 14 years; obesity rates have also increased risk for high cholesterol, high blood pressure, type-II diabetes, and heart disease; ADD diagnoses and prescription drug medications have increased dramatically in recent years. What projections can we make with regard to new and persisting health conditions with the millennials?
- Drugs are perceived as a means to an end, another choice that brings results (i.e. prescription drugs, steroids). In a value-focused, traditional population, how might the “cheating culture” concept be applied to reducing drug use for performance enhancement.

## **ATTITUDES & PERCEPTIONS--**

- Millennials have great respect for conformity because it relieves pressure to improvise. What implications does this carry for social marketing strategies?
- Millennials create the right appearance by hiding unapproved behavior and living by the philosophy of “It’s okay, as long as you don’t get caught.” How might this short-term, consequence-oriented thinking impact health promotion strategy?

## The Millennial Effect on College Health Promotion Focus on Standards of Practice

Standard of Practice	What We Know	What We Don't Know	Impact on Practice
<p>Standard 1. Effective practice of health promotion in higher education requires professionals to incorporate individual and community health promotion initiatives into the learning mission of higher education.</p>	<p>Growing up with the Internet, videogames, cell phones...has contributed to the millennial generation's desire for interactive communication and education.</p> <p>Value and character education are routinely being taught in primary and secondary schools, and many millennials will anticipate continuation of such education in college.</p>	<p>What implications does this carry for online health promotion outreach, media information-sharing, and health literacy?</p> <p>Admissions materials and the ways in which institutions communicate their commitment to health and academic success?</p> <p>How does value and character education fit in the context of higher education and health promotion?</p>	

<b>Standard of Practice</b>	<b>What We Know</b>	<b>What We Don't Know</b>	<b>Impact on Practice</b>
<p>Standard 2. Effective practice of health promotion in higher education requires professionals to support campus and community partnerships to advance health promotion initiatives.</p>	<p>Millennial dress is much more uniform than past generations. They do not want to stand out from their peers or to be perceived as loners.</p> <p>Parents are cited as the number one life influence on the lives of their millennial children.</p> <p>The millennial family is much smaller, allowing for more parental time and resources; is more educated (one or both parents are college-educated); and is headed by older parents with an average age of 27.</p>	<p>What implications does this uniformity have for health promotion and peer education partnerships? Peer education recruitment and retention efforts?</p> <p>To what extent should health promotion leverage the parent-child relationship?</p> <p>How do parental expectations of the college experience translate to their student's expectations, particularly around alcohol and drug use?</p>	

<b>Standard of Practice</b>	<b>What We Know</b>	<b>What We Don't Know</b>	<b>Impact on Practice</b>
<p>Standard 3. Effective practice of health promotion in higher education requires professionals to demonstrate cultural competency and inclusiveness in advancing the health of individuals and communities.</p>	<p>The millennials are a distinct culture, in and of themselves. They demonstrate a shared generational persona that shapes their approach to and perception of the world around them.</p> <p>Peer pressure is used as a positive influence on millennial drug-using behaviors.</p>	<p>How will these defining characteristics influence and shape health promotion practice?</p> <p>Given the conventional values and traditional lifestyles of the millennial student, how might health promotion reflect and/or counteract the student culture?</p> <p>What implications does the positive peer pressure have for bystander and peer education approaches to health promotion?</p>	

Standard of Practice	What We Know	What We Don't Know	Impact on Practice
<p>Standard 4. Effective practice of health promotion in higher education requires professionals to understand and apply professionally recognized and tested theoretical approaches that address individual and community health.</p>	<p>The millennial student is largely risk-averse and afraid of failure.</p> <p>Technology has created a wider network of “friends” that has replaced face-to-face connection, communication and conflict management.</p> <p>Parents have encouraged and facilitated the increasingly scheduled lives of millennials. After-school time, weekends, vacations, and summers are often occupied by camps, lessons and other improvement-oriented activities instead of ‘free time.’</p> <p>Millennials create the right appearance by hiding unapproved behavior and living by the philosophy of “It’s okay, as long as you don’t get caught.”</p>	<p>What does this risk-aversion mean for risk reduction theory and approaches to health promotion?</p> <p>What degree of proficiency do we expect our students to demonstrate for managing conflict, expressing concern for a friend, and engaging in dialogue about important lifestyle issues, given their growing reliance on technology?</p> <p>What implications does this increasing parental involvement carry for time and stress management and problem-solving skill levels, and how does this transfer to decisions about health?</p> <p>How might this short-term, consequence-oriented thinking impact health promotion strategy?</p>	

Standard of Practice	What We Know	What We Don't Know	Impact on Practice
<p>Standard 5. Effective practice of health promotion in higher education requires professionals to understand and apply evidence-based approaches to health promotion.</p>	<p>Technology has made it easier for millennials to think, act, and react in groups rather than individuals.</p> <p>Millennials expect clear and practical answers – “How do I get an ‘A?’”...“How do I get drunk faster?”</p> <p>“Millennial” health risks: <u>antibiotics</u> resistance rates are increasing, <u>mental retardation</u> and other <u>chronic conditions</u> are slowly rising due to the number of older mothers; <u>back pain</u> and <u>injury rates</u> are reflecting heavy backpacks and increase in competitive sports; <u>repetitive stress injury</u> of arms and wrists reflect extended computer use; reported rates of <u>asthma</u> has risen by 75% among those aged 5 – 14 years; <u>obesity</u> rates have also increased risk for high cholesterol, high blood pressure, type-II diabetes, and heart disease; <u>ADD</u> diagnoses and <u>prescription drug medications</u> have increased dramatically in recent years.</p> <p>Millennials have great respect for conformity because it relieves pressure to improvise.</p>	<p>How might groupthink reduce or increase the effectiveness of social marketing strategies?</p> <p>What does this expectation mean for the way in which we share health information?</p> <p>Has the digital era created an aversion to traditional methods of information delivery (brochures, pamphlets, programs, etc.)?</p> <p>What projections can we make with regard to new and persisting health conditions with the millennials?</p> <p>What implications does this desire for uniformity carry for social marketing strategies?</p>	

Standard of Practice	What We Know	What We Don't Know	Impact on Practice
<p>Standard 6. Effective practice of health promotion in higher education requires professionals to engage in on-going professional development and service to the field.</p>	<p>The “Silents” (1925 – 1942) are turning over collegiate leadership to subsequent generations; The “Boomers” (1943 – 1960) represent 50.6% of the current faculty; The “Generation X’ers” (1961 – 1981) comprise 18% of full and part-time faculty and are growing in significant numbers in the Student Affairs professions; The “Millennials” (1982 – 2002) will account for the majority of college students over the next several decades.</p> <p>Millennials expect to be in a position of power in relatively little time. As such, they expect that their supervisors will be very engaged and interested in their professional development.</p> <p>Critical thinking and initiative are developmentally lacking in the workplace among millennials. Workplace deficiencies exist in written communication, professionalism, and work ethic among the millennial workforce.</p>	<p>What implications does this intergenerational picture paint for the health promotion workforce?</p> <p>Given the relatively new and growing field of health promotion professionals, to what degree are we prepared to provide effective leadership to our new colleagues? Given limited resources on many campuses, to what degree is support going to be available?</p> <p>What responsibility do we, as health promotion professionals and educators, have to better prepare our young professionals?</p>	