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Bridging the Gap: Three Strategies to Optimize Professional Relationships with Generation Y and Z

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Abstract

Millennials (Generation Y) and the Generation Z population comprise the majority of occupational therapy student cohorts and new graduates entering the workforce. While fieldwork education has historically prepared students for generalist, entry-level practice, there is still a gap between what students versus employers feel are career-ready skills and qualities to be successful in the workforce. This manuscript presents evidenced-based strategies for educators, occupational therapists, and managers to enhance the preparation and professional development of occupational therapy students and new graduates. Use of coaching philosophies, emphasizing practice-ready skills, and a growth mindset are methods to target the strengths of Generations Y and Z members and address areas of growth as they prepare to enter the workforce. Emphasizing human relationships over task completion or skill mastery helps uphold the values of millennials and the Generation Z population that they can make an impact in the workplace. Modeling practice-ready skills, explicit discussion of “soft” skills, and use of guided discovery supports these generations’ understanding of basic workplace etiquette and culture. Using a growth mindset philosophy can help foster initiative and self-awareness, which are potential areas of growth for these generations. These strategies can then promote healthy, productive collaboration in the workplace and, ultimately, enhance the client-provider relationship.

Comments

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Keywords

professional development, intergenerational competence, fieldwork education

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Outside of family, the workplace and academic institutions are, usually, the only consistent contexts where people interact with individuals from multiple generations. A generation is, simply, a group of people born in the same general time span who collectively share life experiences, such as historical events, formative memories, and societal trends (Weston, 2001). In some workplace environments, there are four or more generations employed. While many traditionalists (born before 1946) are no longer actively working, there may be some institutions with deep culture that continue to have employees from this generation. Baby boomers (born between 1946–1964) may be nearing retirement or often hold respective leadership roles as employees. Members of Generation X (born between 1965 and 1980) may be senior employees in an organization or play an important role in the succession plan of boomers who are retiring. The youngest generations in the workforce include Generation Y (born between 1981 and 2001) and Generation Z (born after 2001) (Pew Research Center, 2019). Note that different sources may have slightly varied timeframes that define the birth years (typically a 15-year cycle) for each generation.

Millennials (Generation Y) and the Generation Z population are quickly making a significant impact on the present and future workforce in the United States. Over the next 2 years, 50% of the workforce is expected to be made up of millennials. This will increase to 75% by the year 2030, according to the United States Bureau of Labor Statistics (2015). The United States Census indicates that in the next 2 years, members of Generation Z will comprise 20% of the United States workforce. According to the United States Bureau of Labor Statistics (2015), members of Generations Y and Z will make up more than 50% of the workforce by the year 2024 (see Figure 1). With each new generation comes new demands for society, not to mention new expectations for academicians and employers in the workforce.

Figure 1

Generational Distribution in the Workforce

Note. Adapted from: <https://www.bls.gov/opub/mlr/2015/article/labor-force-projections-to-2024.htm>

While didactic curricula and fieldwork education have historically prepared occupational therapy students for generalist, entry-level practice, there is still a gap between what college students versus employers feel are career ready skills and qualities. The National Association of Colleges and Employers (NACE) Class of 2019 survey found significant disparities in key areas of employment, specifically graduating students overreporting competency in skills required to be successful and effective in the workplace. This is problematic because it suggests that employers see gaps in skills in key areas where college students do not believe gaps exist. The difference between the two groups was greatest when it came to students' professionalism and work ethic; nearly 95% of students considered themselves proficient in this area, but less than half of employers agreed (NACE, 2019). Entitled, lazy, high-maintenance, and overly-confident are some of the words often used by hiring managers to describe current college age graduates (van der Wal, 2017). Because of this, it is not surprising that newly adopted accreditation standards for occupational therapy require academic programs to advise and evaluate the professional behaviors of occupational therapy students on a regular basis (Accreditation Council for Occupational Therapy Education, 2018).

Each generation has unique viewpoints and expectations, workplace cultural norms, and patterns of learning and knowledge sharing. All of these factors contribute to a *generational gap*. A generational gap is a perpetual challenge for employers who are responsible for attracting, supervising, motivating, and retaining new generations (Society for Human Resource Management, 2016). Bridging the generational divide in the occupational therapy classroom is also a current theme in higher education, as the majority of current occupational therapy faculty across the United States are nearing retirement and may identify with different viewpoints (American Occupational Therapy Association [AOTA], 2010). This manuscript will provide three evidenced-based strategies for occupational therapy academic and fieldwork educators and employers to optimize professional relationships with students as they prepare to enter the workplace. First, an overview of Generation Y and Generation Z will be provided.

Relationships and Patterns of Generation Y and Generation Z

A number of generational theorists (e.g., Blythe et al., 2008) argue that shared life experiences generate shared assumptions, attitudes, and beliefs, as well as a cohesive group identity. There is longstanding literature that describes each generation with positive and negative stereotypical traits based on their formative years. Impactful historical events, parenting styles, and even trends in pop-culture all influence a person's identity, attitudes, and belief system. In other words, this seems to indicate that as individuals, we are shaped by the context and environment around us. As occupational therapists, we can understand this phenomenon in clinical practice through the Person-Environment-Occupation (PEO) model of practice lens. The PEO model postulates that the interaction among a person, environment, and occupation facilitate participation and occupational performance (Law et al., 1996). A good fit of these three constructs indicates meaningful participation, whereas a poor fit can negatively impact performance. From a generational viewpoint, each generation interacts in the classroom and workplace environment differently and prioritizes classroom and workplace values uniquely, resulting in diverse levels of satisfaction and meaning with performance (see Figure 2).

Figure 2

Schematic of How to View the Classroom and Clinic Context through the Person-Environment-Occupation Model

Generational diversity in the classroom, fieldwork setting, or workplace can be beneficial in terms of providing unique backgrounds and perspectives on leadership and authority, communication styles, and career development. It can also bring misunderstanding and conflict (DeIuliis, 2017). Recognizing the potential for conflict and diverse perspectives and taking steps to acknowledge, appreciate, and respect our differences are essential actions to ensure a more positive classroom and workplace environment. This is commonly described as “bridging the gap”; discovering and implementing strategies and solutions that can build connections (bridges) between generations (Gravett & Throckmorton, 2007).

Literature surrounding generational theory commonly uses terminology such as “strengths and weaknesses” or “positives and negatives” when describing the stereotypical traits or quirks of each generation. Another structure to present these stereotypical traits is the glow and grow framework, first described by K. C. Cheung in 1990 (Cheung, 1990). This “glow” and “grow” terminology aligns with the more currently referenced social and emotional learning framework. Social and emotional learning is commonly used in K-12 education for teachers to deliver feedback to students and parents (Brackett et al., 2019). Glow is an alternative term for “strengths” or “positives” and indicates areas of achievement and success. Grow is an alternative term for “weaknesses” or “negatives” and indicates areas for constructive growth. Generation Y and Generation Z students and employees crave feedback, yet they prefer the feedback to be delivered with an approach that includes praise and admiration (Graen & Schiemann, 2013). See Table 1 for an overview of the documented glow and grow areas for members of Generation Y and Generation Z.

Table 1*Glow and Grow Characteristics of Generation Y and Z*

	Generation Y 1982–1997	Generation Z 1997–2014
Key Influences	9/11, Katrina, Obama Products of reality TV Helicopter parenting Learner-centered K-12	Stress over safety, debt Spotlight bullying Drone-parenting Never knew non-internet life YouTube / cyber school
Glow	Civic-minded Work-life balance “Tech savvy” Value teamwork	Healthiest generation Attuned to their mental health Impact-oriented Innovative
Grow	Lack initiative “Emotionally needy” Obsessed with technology Lack of professional boundaries	Tech dependent Desire freedom (not just flexibility) Lack self-awareness

Note. Adapted from: DeJuliis, 2017; Hills et al., 2012; van der Wal, 2017.

With each new generation entering the classroom and then the workforce, faculty, fieldwork educators, managers, and their future colleagues are challenged to revamp and revitalize procedures and expectations of workplace culture. Based on the glow and grow areas of Generation Y and Generation Z members, here are three strategies that can help educators and managers bridge the gap, attuned with the glow and grow areas of these generations.

Strategy #1: Coach and Mentor versus Supervisor

The literature indicates that the millennial and Generation Z population prefer and respond more productively to coaching versus managing (Bartz et al., 2017; Deloitte, 2016). Younger generations dislike administration that merely prescribes rules and constraints, and they seek out an environment and organizational culture to guide, inspire, and mentor them. In the human resource and talent management fields, many organizations over recent years have adopted a coaching model to enhance the growth and performance of their employees, while also cultivating more effective employee-supervisor relationships (Ellinger & Kim, 2014). A signature component of coaching and mentoring is the emphasis on the development of human relationships versus the pragmatics of task completion and skill mastery. See Table 2 for a compare and contrast of supervising versus coaching and mentoring.

Table 2*Comparison of Supervision and Coaching and Mentorship Practices*

Supervising	Coaching / Mentoring
Aimed at overseeing a person to ensure that they perform appropriately	Centered around a relationship between an experienced and a less experienced individual to achieve certain goals and professional growth
Task-oriented	Future and long-term performance-oriented
Remediation-focused	Strength-based
Authoritative; power position	Partnership, work allies
Dictates rules	Active listening, builds trust and loyalty

Note. Adapted from: Fehring & Rodrigues, 2017.

A simple way to implement elements from mentorship and coaching philosophies in the classroom or workforce is the use of rounding or standing “check-ins.” Rounding is a process where leaders (or managers) make themselves more accessible to the team and “walk the planks.” While major health systems may use rounding as means specifically to address compliance criteria aligned with the Joint Commission or patient satisfaction measures associated with the Press Ganey Survey (2018), there are various other benefits of rounding that include:

- helping improve employee performance
- increasing morale
- facilitating two-way communication
- creating a culture of transparency (Saver, 2015).

As a faculty member, fieldwork educator, or manager it is important to make a consistent effort to physically check-in with your students or employees, not just during formal evaluation sessions. Design and use question prompts to guide informal yet meaningful discussion, to encourage and promote exploration of new ideas and initiatives, and to prompt reflection, such as:

- “What are you proud of that you accomplished in the last week?”
- “Where are you stuck?”
- “What can I do to help?”
- “What are your goals for the coming week, month, quarter, etc.?”

Another important benefit of rounding is that it creates a mechanism to close the feedback loop. Therefore, when you have a subsequent “check-in” with your colleague, student, or employee, circle back and ask if previous barriers that they identified have been resolved and probe for progress on goal completion. Millennials are also more likely to change jobs than members of other generations. Workplace culture and a lack of mentorship are frequently cited reasons of why millennials change jobs more frequently (United States Department of Labor, 2018). Millennials and Generation Z members deeply value the notion that they are making an impact or a difference in their organization. Rounding can be a strategy to acknowledge and value the impact they are making, boost morale, recognize performance, and keep them engaged.

Case Example

Molly, a 21-year-old occupational therapy student, was completing her second Level II fieldwork in an outpatient setting. All the occupational therapists and occupational therapy assistants in this clinic were experienced practitioners and part of Generation X. Molly’s fieldwork educator, Bill, was very straightforward about his expectations from the start. Having educated many students throughout his career, Bill was experienced implementing the “see one, do one” model as a clinical education strategy (Grenier, 2015; Kotsis & Chung, 2013). When he was a fieldwork student, Bill observed his fieldwork educator perform an assessment or intervention, then he attempted to repeat those same techniques during a subsequent encounter. However, he knew that Molly was part of a younger generation with different experiences to shape her beliefs and behaviors. Bill remained open-minded about the techniques he would use to help her succeed. During their initial meeting at orientation, Bill and Molly agreed on performance goals to reach by the end of the fieldwork experience.

By Molly’s fourth week of fieldwork, Bill noticed Molly taking less initiative to seek out additional learning opportunities. Using active listening strategies, Bill identified that Molly was

overwhelmed when clients were overbooked and she had to evaluate one client while treating another. Using open-ended prompts facilitating two-way communication, they identified that her concerns were related to her ability to maintain each client's privacy and provide occupation-based interventions while seeing them concurrently. Bill facilitated meaningful discussion to problem-solve by stating, "What can I do to help you feel more effective and confident while treating clients concurrently?" Molly and Bill developed a plan for him to check-in with her at the beginning of encounters scheduled concurrently. This would allow Molly to organize her thoughts and plan for the session, as well as to feel more comfortable stepping away to go back and forth between clients. Molly and Bill also started implementing a 1-min debrief following all concurrent treatment sessions to identify what went well (glow) and what she could do differently next time (grow). As Molly became more confident, she shared this with Bill. He was able to shift the focus on his check-ins and debriefings to address higher-level clinical skills. By the end of her fieldwork experience, Molly achieved her goals of entry-level practice and developed a trusting professional working relationship with her educator, who would later turn out to be her peer when she was hired at this facility.

Strategy #2: Role Model Self-Directedness and Practice-Ready Skills

The term practice-ready is becoming a catchphrase in the description of ideal career-ready graduates who enter the workforce across disciplines (Barry, 2012; Mattila, 2019; Missen et al., 2016; Murphy, 2015). In some cases, practice-ready is a new term used in place of familiar terminology, such as "hard and soft skills." In the literature, hard skills are defined as the technical skills to carry out a job or task. In occupational therapy, this may include competencies to administer an assessment, skills to fabricate an orthosis, or the ability to document a thorough progress note in a timely manner. Soft skills are often harder to describe and can be described as both intrinsic and extrinsic attitudes and behaviors (DeJuliis, 2017). Younger generations are often labeled as having a more casual view of the workplace and may require more direct role modeling on practice-ready behaviors, such as professional dress, time and attendance, the importance of eye contact and a firm handshake, among other things (DeJuliis, 2017). Occupational therapy academic and fieldwork educators should ensure that their practices and procedures for training younger generations emulate the expected technical and practice-ready (soft) skills. It is important to not carry assumptions that millennials and the Generation Z population understand basic workplace norms and culture; and, in some cases, it is necessary to be explicit and detailed in what you expect.

Case Example

Joe, an occupational therapy assistant student, was completing his first Level II fieldwork in an acute care hospital. As part of the onboarding process, he was instructed to wear navy blue scrubs. During his orientation, it was emphasized that documentation must be completed the same day the service is provided. Joe noticed throughout his first few weeks that many clinicians, including his fieldwork educator, Anna, were wearing sweatshirts, t-shirts, or different colored scrubs. His fieldwork educator, Anna, also tended to leave work without completing her documentation. She would, however, come in early to complete the documentation before the normal workday began. Assuming that this was acceptable practice, Joe started deviating from wearing his navy scrubs every day and leaving before his documentation was complete. During his midterm evaluation, Anna identified Joe's attire and time management as an area for improvement as part of his professional behaviors. Joe shared with Anna his perception of workplace norms. Anna was able to reflect on behaviors in which she engaged and that she considered unprofessional when she observed them in others. Through open dialogue about soft skills

(or practice-ready skills), Joe and Anna agreed on a plan to review department standard operating procedures and hold each other accountable for compliance with these policies, rather than workplace cultural norms. After a few weeks, Anna's supervisor approached her and offered a temporary promotion detail, as her image and behavior were a good representation of professionalism for the department. By reflecting and acknowledging her own areas for improvement, Anna modeled self-directedness. She helped Joe realize that it is acceptable and important to explicitly address soft skills because the workplace cultural norms do not necessarily align with how one wishes to be portrayed as a professional.

Throughout their education programs, occupational therapy and occupational therapy assistant students are exposed to a variety of client populations and settings. Because of differences in group characteristics, these students must tailor their professional behaviors to develop therapeutic relationships with clients. Whether they realize it or not, students' observations of their faculty, fieldwork educators, and co-workers' behaviors and interactions with clients help them to develop particular soft skills. As students acclimate to new practice settings and populations throughout the course of their education, they notice the behaviors of the fieldwork educator, other clinicians, and members of the interprofessional team. An insightful academic and fieldwork educator will monitor their own behaviors and discuss their rationale or thought process when demonstrating behavior that he or she would not want the student to emulate.

Case Example

Ken was a 20-year-old occupational therapy assistant student completing Level II fieldwork in an outpatient hand and upper extremity clinic. He was privy to conversations taking place in the clinic office between his fieldwork educator and other clinicians regarding clients. When discussing a client who was frequently referred for occupational therapy services, a clinician used the term "frequent flyer" when referring to the client. Later, when speaking with that client during a session, Ken repeated the term frequent flyer to describe the client. He did so without malicious intent, but rather in an attempt to be humorous. Unfortunately, the client did not perceive it that way and filed a complaint with clinic management. It was intrinsically understood among the senior clinicians that the content of their conversation would be kept in confidence. Ken had not even considered that this label would be perceived as offensive, demonstrating limited self-awareness. Not only were the senior clinicians in violation of the AOTA Code of Ethics (2015) by labeling the client like this, they also did not consider how this could be perceived by others in the room.

In response to the complaint, the facility manager initiated a fact-finding meeting with Ken and the clinicians involved. Without placing blame, the manager provided an opportunity for open conversation about discussions or actions that could be misinterpreted by others. Everyone involved agreed to hold each other accountable for professional conduct and to share intentions when there was a possibility of misunderstanding. This experience also served as a reminder of a potential area for growth for students and younger clinicians who may not portray the same professional boundaries as those in older generations. Ken was able to reflect on his therapeutic use of self and more effectively manage the emotional needs of his clients, recognizing the impact that his poor attempt at humor had on the therapeutic relationship.

An important component of being practice-ready is being self-directed (Mattila, 2019). A self-directed person is one who is capable of directing themselves. It is often encompassed by strong initiation skills, the ability to self-motivate, as well as self-awareness. These important skills, which are

desired by the workforce (NACE, 2019), are also known as grow areas of millennials and the Generation Z population. The use of a well-known occupational therapy treatment approach, guided discovery, can be a useful tactic to facilitate self-directedness in these younger generations. Guided discovery is described in many strategy-training approaches in occupational therapy, such as the Cognitive Orientation to Daily Occupational Performance (CO-OP) Approach, to enable the identification of strategies that will support performance success (Houldin et al., 2018). The goal-plan-do-check is a useful framework not just to facilitate guided discovery and problem-solving skills among the clients we work with (Houldin et al., 2018), but also to develop self-directedness and critical thinking skills for millennials and Generation Z members, who are often described as a coddled generation (Hughes, 2020). Here are some basic prompts to use during an interaction with a student that expresses a concern or problem to you, as an educator:

- “What have you done to address your problem or concern?”
- “What barriers or obstacles remain in your way?”
- “What action steps can you take to accomplish your goal?”
- (afterwards) “Did you meet all your goals?”

A critical aspect of using these elements from the CO-OP approach is that the learner is not provided with answers or direct instruction on how to solve their problem; rather, they are guided toward creating a plan and finding a strategy that works for them.

Case Example

Site medical and security clearances required of new employees and fieldwork students seems to be getting more and more complex. Although students may get the general state and federal background checks as part of admission into their occupational therapy program, a particular fieldwork site may have more stringent guidelines or timeframes. In preparing for an upcoming fieldwork placement at a large metropolis hospital, a student learns that the site requires a particular vaccine and antibody titer. These were not part of the standard student requirements of the occupational therapy program. The student approaches the academic fieldwork coordinator and says, “I have never received this vaccine and I have no idea what a titer is.” First, the academic fieldwork says “Can you tell me what you have done to address this?” Right away, this prompt should illuminate to the student that there are action steps that could have been taken prior to approaching the academic fieldwork coordinator. This should facilitate an ‘aha-moment’ where the student internalizes that they did not self-initiate or problem-solve on their own. Second, the academic fieldwork coordinator asks, “What barriers are in your way?” The student responds, “Well, I never had to do this before and I don’t know where to get this immunization.” Third, the academic fieldwork coordinator asks, “What steps or strategies do you think you can take to get the necessary vaccine and bloodwork?” This prompt places the ownership on the student to brainstorm and problem-solve actions and behaviors that need to occur. The student could generate an action step list, such as the following:

- Look up the definition of a titer
- Meet with health services on campus to see if they offer this vaccine
- Call health insurance company to see if there is coverage for vaccine and bloodwork
- Schedule vaccine appointment
- Schedule blood work
- Update academic fieldwork coordinator and fieldwork site coordinator of outcomes

Once the academic fieldwork coordinator has facilitated the goal-plan-do piece, it is important to circle back and check-in with the student after all planned action steps have been taken. For example, if the fieldwork coordinator knows that the student is scheduled to get their blood work results on a certain date, they can make an effort to follow-up afterward. “Tell me what you learned and how it went.” This closes the feedback loop and also allows the student an opportunity to showcase their problem-solving and receive recognition for their self-directedness.

Although the use of this type of prompting may be perceived as taking more effort and energy when a student or younger colleague brings a problem or concern to you, it does bring to light the importance of self-directedness and teaches a strategy of action planning and problem-solving. The desired outcome is that when there is a future novel situation encountered by the student, they take steps to goal, plan, and do, and when they get stuck and seek out help, they are able to articulate steps they have already taken, demonstrating self-directedness.

Strategy #3: Facilitate a Growth Mindset

A third approach that can optimize engagement with this generation is to use practices from growth mindset theory (Dweck, 2013). A growth mindset has been defined as “the belief that intelligence is not fixed and can be developed,” and is a comparably strong predictor of achievement and success (Claro et al., 2016, p. 8864). In contrast, a fixed mindset is a belief that one’s talents are the result of inborn traits and are unchangeable (Hochanadel & Finamore, 2015). Individuals who adopt a growth mindset value effort and perceive ability as a malleable skill that can be developed with perseverance. Because of this, they are more likely to persist through adversity, which is an important life skill to develop and prepares them for the dynamic and ever-changing environment of health care and other known challenges in the workplace. Growth mindset practices emphasize “failing forward” and view challenges and failures as an opportunity to learn and improve. A culture that models the importance of embracing weaknesses is important. Dweck’s philosophy on growth mindset is quickly being adopted in K-12 education across the United States based on the evidence demonstrating the positive impact on learning and academic success (Yettick et al., 2016). Mindset theory, in particular the growth mindset approaches, is noted to be beneficial in the preparation of other health professionals, such as physicians and pharmacists (Cooley & Larson, 2018; Klein et al., 2017). Based on the known glow and grow areas of millennials and the Generation Z population (refer to Table 1), there are simple yet powerful ways to foster a growth mindset in higher education classrooms and the workplace.

An easy, yet important, word to use more with students who express difficulty or dissatisfaction with their performance is the powerful three-letter word YET (Dweck, 2013). For example, a student on fieldwork is having difficulty fabricating an ulnar gutter orthosis for the first time and with frustration mutters, “I can’t make this splint.” The fieldwork educator interjects with “You cannot make this orthosis yet! Let’s set up some additional time for you to practice.” By using this word yet, it implies believing that the individual can improve. It also implies that patience is necessary with the learning process. Because of their digital nativity, on-demand economy, and fondness for instant gratification, millennials and Generation Z members can find patience as a growth area and one that may impact their future learning.

Another way to infuse components of growth mindset practices is to use intentional prompts to debrief with a student, such as after the student leads an intervention session with a client, or in conjunction with rounding. Debriefing is a reflective technique that allows an individual to self-monitor and self-assess, which is another strategy to increasing self-awareness and self-directedness.

- What was the best part of that treatment session?
- How did you use your strengths to the best of your ability?
- What was an example of you stretching outside of your comfort zone?
- How can you challenge yourself greater next time?

Incorporating basic reflective prompts with millennials and Generation Z members and using a growth mindset philosophy can help foster initiative and self-awareness and boost self-esteem, which are noted areas of growth for these groups.

Case Example

Lindsay was a 24-year-old newly-graduated occupational therapist about to start her first job in an acute care hospital. She was excited because she received an offer at a prestigious facility, world-renowned for its quality of care. Lindsay spoke with her assigned supervisor prior to her start date, who provided some diagnoses and assessments to review prior to starting. At the last minute, because of changes in staffing and clinic needs, Lindsay was asked if she would take a position on the spinal cord injury (SCI) rehabilitation unit, instead of in acute care. Wanting to demonstrate flexibility and be a team player, she agreed. However, she had very little experience working with clients who had spinal cord injuries and had not completed fieldwork experience at an inpatient rehabilitation facility. After contemplating and worrying for a few days, Lindsay reached out to her future employer again to redact her agreement to this change. She was fortunate to be connected with her new direct supervisor for the spinal cord unit. This therapist listened to Lindsay's concerns and prompted her to share what she considered to be her strengths and the skills that she was confident in implementing. Lindsay shared that she was comfortable with developing the occupational profile, using objective assessments, and collaborating with clients to establish their goals. She was, however, worried about assisting with functional transfers and with bowel and bladder programs, which she presumed would need to be addressed on an SCI unit. This mentor reminded Lindsay that she does not yet have the skills for complex moving and handling and bowel and bladder programs but she would quickly develop these skills on-the-job, through structured mentoring and supported continued education.

Rather than accept Lindsay's rescinding of her agreement to change to the SCI unit, the supervisor encouraged Lindsay to complete a 2-week trial on the SCI unit before resorting back to acute care. The mentor offered to work one-on-one with Lindsay for the first week and help her develop the knowledge and skills to address the needs of this client population. Lindsay hesitantly agreed. During her first week, her mentor helped Lindsay incorporate some of her strengths and areas of proficiency into each treatment session. Lindsay completed all of the evaluations and objective assessments, implemented therapeutic use of self, and helped clients establish their goals.

At the end of each day, Lindsay's mentor had her identify a way that she can challenge herself the next day. By the end of the first week, Lindsay was confident enough to carry nearly a full caseload on her own. Her mentor continued to remain close by for consultation, as needed. By the end of her second week, Lindsay had developed a strong interest in the SCI population and requested to formally accept her work assignment on that unit.

Implications for Occupational Therapy Education

As with the occupational therapy process, demands and cues about expected and appropriate behavior in the workplace are continuously received from the environment. Just as we need to adapt our therapeutic use of self to align with the individual needs of our client in clinical practice, we also need to adapt our therapeutic use of self to optimize our interactions with occupational therapy students, who are

future practitioners and our future colleagues. The PEO model provides a useful framework to observe “person-environment processes,” identify and analyze occupational performance problems, and guide a range of interventions to optimize performance (Strong et al., 1999, p. 123). This paper has suggested the use of several evidenced-based interventions to bridge the gap with younger generations and optimize performance: the use of coaching versus supervising, role-modeling self-directed behavior, and nurturing of a growth mindset.

It is also important to remain aware of the Generation Alpha population (or Alpha Kids). Members of Generation Alpha are individuals who were born after 2009 (the majority to millennial parents), and they will very soon be making their debut in higher-education and the workforce. Although there is not much literature available describing this youngest generation, we can assume that Generation Alpha will be considered to be the most technological-infused generation to date. They will grow up with the familiar voice of Siri, Alexa, and Google Assistant, be accustomed to the notion of prototyping via 3D at an early age, and will not be strangers to the gamification of education (McCrindle, 2020). The Generation Alpha population will most likely be very comfortable in interacting with artificial intelligence and will revolutionize how curricula is delivered in higher education. Only time will tell, but we can anticipate that Generation Alpha members will bring new challenges (areas for growth) and strengths (areas to glow) to the field of occupational therapy. For example, areas of practice such as assistive technology and telehealth can be enhanced in the occupational therapy profession because this future generation will be extremely technology-supplied. However, early predictions show that this generation will have shorter attention spans and lack social skills compared to previous generations. This will require educators to further intentionally model practice-ready skills and how to build social capital, an expansive construct and skill to build relationships and connections among people and communities (Acar, 2011; Adler & Kwon, 2002), which is certainly a hallmark skill of the occupational therapy profession. Once again, this will require society and educators to bridge the gap.

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Ms. Saylor is an occupational therapist and part of the caregiver support program for the Department of Veterans Affairs in Butler and Pittsburgh, PA.

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