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DOCTORAL THESIS

Abstract

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THE GENERATIONAL EFFECT OF COVID-19 – TRENDS IN GENERATIONAL GAPS IN THE WORKPLACE IN THE NURSING PROFESSION

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ABSTRACT

Background: With the spread of Covid-19 and the need to rapidly organize medical staff, 4 generations of nurses were required to co-exist, work cooperatively and simultaneously in the workplace. Although differences between generations can lead to tensions, conflict and inefficiency, it is crucial to collaborate as teams to overcome crisis events.

Research Aims: The purpose of this study is to present potential generational gaps among primary care nurses in Israel in order to identify the needs of each generation based on their characteristics and develop an organizational management culture strategy suited to each generation.

Methodology: Mixed Methods Research. 150 primary care nurses from generations X and Y, participated in a qualitative research (questionnaires), and quantitative research (in-depth interviews and focus groups). Research data was collected from July 2020 to January 2021.

Main Findings: Research findings indicated higher self-efficacy in Generation X. Higher levels among Generation Y were found of extrinsic factors affecting the choice of nursing as a career, in work values, in the level of burnout and in turnover intentions. No significant differences between the two generations were found in levels of job satisfaction. Quantitative data supported qualitative findings and emphasized the strength of social cohesion during a time of crisis. Participants indicated their need to be appreciated and guided by organizations during time of uncertainty.

Conclusions: The research emphasized gaps between generations and reflected the importance of the workplace in promoting successful strategies for each generation. At a time of crisis, social cohesion was prominent and blurred the gaps between the generations. The research contributed to developing meaningful professional nursing environments in the future by creating organizational strategies tailored to different generations working in the 21st century characterized by a technology-rich environment and complex medical conditions and implied in social behavioral trends during a worldwide health crisis. It appears that further empirical studies are required to explore and demonstrate behavioral characteristics at work of newer generations in the workplace.

Key words: Generation X, Generation Y, Generation Gap, Nursing, COVID-19, Social Cohesion

INTRODUCTION

Background

This research presents possible intergenerational gaps in the nursing world of work.

Many countries are currently addressing the human capital crisis in their health systems. This crisis pertains to availability, accessibility, quality and caregiving staff efficiency. This crisis is occurring alongside global constraints, such as: aging population, rising chronic morbidity, rising demand for health services in developed countries, accelerated development of medical technologies, migration of medical personnel and a global trend to reduce health inequalities (Rechel et al., 2009).

Alongside healthcare challenges described above, the intergenerational issue in workplaces has an effect in all aspects - from how new employees are recruited, to how healthcare organizations meet the different needs of working people, and how technologies are used within these organizations.

Globalization and technological developments have produced rapid and complex changes in the labor market which game rules are not the same as in the past regarding geographic location and employee's skills (Toshav-Eichner, 2009).

There are employees who react to changes by deciding to choose and devote themselves to a soul career and there are others who perceive the world of work as a global village and move about according to their professional aspirations and salary expectations. Whereas past generations were characterized with loyalty and commitment rewarded by security and fair pay, today employees offer their services to the highest bidder, relinquishing employment security and live in constant fear of the future (Toshav-Eichner, 2009).

The working world in general and the nursing and medical professions in particular, demand patterns of teamwork, cooperation, creating autonomy and accountability corresponding to and in synergy with the workplace (hospital or primary care). This was emphasized during the COVID-19 period where employee cooperation was essential in assimilating new procedures and changing daily and instructions and participating in decision making processes (Somech et al., 2021). Nowadays there are more generations than ever before co-exist in the workplace. With new generations entering the nursing workforce, intergenerational characteristics such as employment

variety, professional development, wages, working conditions, employee mobility between public and private sectors and staff retention in the public healthcare system – need to be addressed.

The COVID-19 has also highlighted challenges in current workplaces. First, the complex mix of employees made up of many cultures and sectors. Thus, employees bring their personal experience against the cultural background and can provide more appropriate and creative answers, skills and solutions to patients from the same culture or sector. This can be over-intensified in global events such as a security event (Somech et al., 2021).

It is crucial that workplaces will be aware of generational differences especially in times of emergency in order to bridge and create a positive working culture, which will ensure quality and productivity alongside satisfaction, less burnout and more stability.

Research Aims

The primary goal of this study is to examine intergenerational differences between two main groups (Generation X and Generation Y) of primary care nurses' population in Israel. This study aims to present the possible correlations of research variables between the two study groups and to present the expected contribution of socio-demographic characteristics to the variance between variables.

Research Questions

- Will significant differences be found between the two study groups in levels of self-efficacy, motivation to choose nursing, work values, job satisfaction, burnout and turnover intentions?
- 2. Will significant correlations be found between levels of self-efficacy, motivation to choose nursing and work values and levels of job satisfaction, burnout and turnover intentions among the two study groups of primary care nurses?
- 3. Will socio-demographic characteristics contribute significantly to the explained variance of levels of self-efficacy, motivation to choose nursing, work values, job satisfaction, burnout and turnover intentions?

LITERATURE REVIEW

Features in The New Workplace

The global economy is located in an era of rapid transformation greatly affecting the labor market. This is expressed in phenomena such as aging population, globalization of workplaces, alternative modes of employment that have become more common, and of course, automation and digitalization processes.

Moreover, employee-employer relationships in the 21st century are undergoing a fundamental change. Unlike previous eras characterized by permanent work and stability current labor era is dynamic and employees exploit this flexibility and quit workplaces because of inappropriate conditions, shift work, too many shifts, etc.

Furthermore, alongside the outbreak of COVID-19, the International Labor Organization (ILO) declared that the pandemic would have far-reaching consequences for the world employment market and affect with waves of unemployment, work quality and influences on specific vulnerable groups (ILO, 2020). The pandemic led to two transverse changes in employment patterns – increased rate of working from home and increased use of distant communication technologies (CBS, 2020).

In Israel, the COVID-19 pandemic, led to new ways of coping with employees in the health system – broad recruitment of temporary staff for modeling needs or working at vaccination sites, recruiting retired nursing staff who volunteered to come back to work during the crisis, carrying out rapid training to instill new skills or upgrade existing skills in a short time (Nathanson et al., 2020).

The COVID-19 pandemic added an extra burden to this already stressful job. This highly stressful work environment resulted in job dissatisfaction with a tendency to leave jobs in the future (Said & El-Shafei, 2021). Thus, support interventions are needed for nurses to relieve burnout and prevent losing them from the nursing workforce (Scott et al., 2020).

Generations – Concept, Theory and Israeli Context

This study focuses on generations X and Y only given the fact that in 2020 these two generations comprises the core of the current workforce.

The current thesis refers to the term generation in its *sociological* meaning.

The sociological term of generation relates to a group of individuals, similar in age who have experienced the same historical events within a given period of time (Mannheim, 1952).

In another definition, a generation in this perspective is defined as a cluster of people born within a defined series of birth years who share ideals and viewpoints shaped by their socio-cultural environment, as well as key events occurring during their constructive years (Leiter et al., 2009).

The theoretical framework is based on Karl Mannheim's essay "Das Problem der Generationen" (1928) – later to be known as "The Problem of Generations" when it was translated to English in 1952 (Mannheim, 1952). In this influential article Mannheim presented the **theory of generations** or **sociology of generations** that was later accepted as a sociological phenomenon (Pilcher, 1994).

According to this theory, the socio-historical environment notably affects people in their youth and younger years especially, significant events involving them directly.

These events form the basis for shared experiences among social associates that later shape events inspiring upcoming generations (Pilcher, 1994).

The psycho-social perspective was also adopted by Simonton (1984) who suggested that role modeling accounted for the gathering of prominence within elite families. In his inquiry he divided history into intervals of 20 years as the length of a generation. Next, he listed significant creators in a particular discipline of each generation according to his or her fortieth birthday. Finally, he counted creators in each generation. This organization of the data indicated the extent of creativity within a certain generation (Simonton, 1984).

Criticism of Mannheim's theory addresses cultural relativism. Critics argued that it is a western biased theory and requires a wider cultural understanding (Vandegrift, 2015; Müller-Schwarze, 2015). Globalization and current social diversity should be incorporated into the theory (Edmunds & Turner, 2005).

Characteristics of Generational Cohorts

Generation X

Generation X was born between the early to mid-1960s and late 1970s.

As children in the 1970s and 1980s, it was a time of shifting societal values reflected by increasing divorce rates and greater maternal participation in the workforce.

Generation X's was sometimes referred to as the "latch-key generation". Growing up with reduced adult supervision compared to previous generations made them more independent. (Howe & Strauss, 1993).

In the workplace Generation X's are skeptical of authority figures and are responsible for establishing the concept of work-life balance. Born at a time of declining population growth, this generation of employees possess greater independence than prior generations (Akhavan Sarraf, 2019).

In the Israeli context, some Generation X are descendants of the generation of Holocaust survivors whose parenting characteristics were protective with problematic attachment-separation relationships (Kellermann, 2001), Generation X parenting tended to be less authoritarian and more parentally permissive (Yaffe, 2017). They grew up in the 1970s and 1980s – an era of political and economic change. The economy shifted from socialism to capitalism through several privatization processes.

Generation Y

Generation Y includes young adults born in last two decades of the 20th century. Members of this demographic cohort became adults around the turn of the millennium – the source for the term Millennials (Howe et al., 2000).

Millennials grew up in the digital age. They exhibit greater familiarity than previous generations with communication, media, and digital technologies (Prensky, 2001).

From a workforce perspective, their ideal workplace involves variety, mentorship, and continuing education. They are likely to challenge conventional norms and authority. At the same time they look for direction and leadership and desire respect and recognition from peers (Gursoy et al., 2008).

In the Israeli context, in the postmodern world in which Generation Y was educated, when parents tried to be friends with their children instead of authority figures, and at the same time other authority figures (teachers, commanders, bosses) lost their authority, created for the first time in Israeli history, a generation without youthful rebellion. The ultra-capitalist and ultra-individualistic environment in which they grew up has led to many Generation Y members to demonstrate narcissistic character traits and worldview advocating maximizing profit and personal benefit, even at the expense of others (Almog & Almog, 2016).

Theoretical Framework and Variables

Self-Efficacy

Self-efficacy is a person's capability to do well in specific situations or accomplish a task. Individuals' senses of self-efficacy play a role in how they manage goals, tasks, and challenges. In Bandura's words self-efficacy is a personal belief of "how well one can execute courses of action required dealing with prospective situations" (Bandura, 1982, p.73).

The concept of self-efficacy is at the core of Bandura's social cognitive theory. Bandura theorized that one's activities and responses including cognitive processes and social behaviors, in most situations are affected by actions one has observed in others (Luszczynska & Schwarzer, 2005). The development of self-efficacy depends on external experiences and self-perception (Bandura, 1977, 1988). People who believe they can perform well (e.g. persons with high self-efficacy) are more likely to observe difficult tasks as something to be accomplished rather than something to be avoided.

Management researchers and practitioners have adopted self-efficacy theory for its applicability in the workplace. Overall, self-efficacy is positively and strongly associated with work-related performance. Yet, the association between self-efficacy and work performance is clearer for simpler work-related tasks (Stajkovic & Luthans, 2002).

Studies have explored relationships between self-efficacy and other work related variables. Among a sample of 268 hospital nurses it has been shown a negative correlation between burnout and self-efficacy and positive correlation with emotional labor. (Yang, 2011).

Choosing the Nursing Profession

Motives for choosing a nursing career are varied. The most influential motives are the desire to help others or contribute to society (Prater & McEwen, 2006, Zyberg & Berry, 2005).

Motivation to select nursing as a career is guided by both intrinsic and extrinsic factors. Intrinsic factors include working to help others, interesting work and working with people. Extrinsic rewards, on the other hand, include flexible hours, responsibility, autonomy and employment security (McCabe et al. 2005).

An Israeli study explored factors influencing the choice of a nursing career among the general population. Findings showed that 8% of respondents were interested in studying nursing. Significant gaps were found between their choice of an ideal image and nursing practice. Furthermore, compared to ideal careers nursing careers were perceived as less interesting, challenging, creative, and responsible as well as lacking varied wages, high status and comfortable conditions (Ben Natan & Becker, 2010)

The social cognitive career theory (SCCT) is based on Bandura's theory and was developed by Lent et al. (1994). It's building blocks are self-efficacy beliefs, outcome expectations, and goals. People are likely to become interested, choose to engage, and accomplish when they have strong self-efficacy beliefs, necessary skills and environmental support.

Prawitasari (2017) analyzed career choice based on SCCT. Generation X's have a distinct source of self-efficacy and expect a balance between family and work. They are described as people who have less loyalty to their boss and reject micromanagement. However, they are known to be critical individuals and tend to choose careers that provide personal accomplishment in the form of freedom and balance between work and family (Prawitasari, 2017).

Generation Y comprises of people who grew up with the development of cuttingedge technology. They expect multitasking work and projects that provide them with creative opportunities. They also expect a balance between family and work as their personal accomplishments as well as freedom of expression and creativity. Generation Y is able to have multiple career paths and prefer a career that provides personal accomplishment, creativity and technological sophistication (Prawitasari, 2017).

Work Values

Values are positive markers of individuals' decisions and actions (Rokeach, 1973). The values approach to motivation supposes that people are motivated by actions and products their value (Maslow, 1943).

Work values affect employees' views on preferences in the workplace, with a direct impact on several variables in the workplace: attitudes and behaviors (Dose, 1997), job decisions (Lofquist & Dawis, 1971), perceptions and problem solving (Ravlin & Meglino, 1987). Understanding young individuals' work values helps organizations to assess how to structure jobs, working conditions, and human resource policies to attract different generations.

Self-determination theory (SDT) looks at human motivation and personality and explores individuals' natural growth tendencies and inherent psychological needs. This theory concentrates on the extent to which human behavior is self-motivated and self-determined (Ryan & Deci, 2000; Deci & Ryan, 2012; Ryan & Deci, 2017). Research in SDT developed in the 1970s from studies exploring intrinsic and extrinsic motivation, and an increasing understanding of the central role of intrinsic motivation in human behavior (Lepper et al., 1973). During the 1980s SDT was formally introduced and accepted as a sound empirical theory. Studies applying SDT to different areas in social psychology and education have grown considerably since the 2000s. Key studies that led to the development of SDT included research on intrinsic motivation (Deci, 1971). Later, Deci & Ryan expanded on early work differentiating between intrinsic and extrinsic motivation and proposed three main intrinsic needs involved in self-determination: autonomy, competence and relatedness (Deci & Ryan, 1991, 1995).

Dependent Variables

Job Satisfaction

Job satisfaction was defined as the emotion people have about their job in general (Smith et al., 1975). The literature has indicated several common factors affecting job satisfaction including working conditions, organizational environment, organizational commitment, stress levels, role conflict and role content (Atefi et al., 2014; Hayes et al., 2010; Khamisa et al., 2015).

Research has offered evidence that job satisfaction is important and closely correlates to retention among nurses (Clay, 2012). Thus, nurses who are highly satisfied were more likely to remain employed in their role and organization (Wilson et al., 2008). On the other hand, the factor found to impact job satisfaction most negatively was inadequate salary (Campbell et al., 2004; Junious et al., 2004; Storey et al., 2009), lack of recognition (Best & Thurston, 2006; Campbell et al., 2004), role ambiguity (Campbell et al., 2004; Storey et al., 2008), and poor organizational communication (Campbell et al., 2004; Storey et al., 2009).

Blythe et al. (2008) surveyed 1,396 nurses about their demographics, employment status, work status preferences and nursing workplaces in different age groups. Job satisfaction ranged from low to moderate overall in all age groups with no significant differences between generations X and Y (Blythe et al., 2008).

Burnout

Long term job strain leads to burnout symptoms such as emotional exhaustion, depersonalization, and decreased professional efficiency and may have undesirable outcomes for both individuals and organizations (Bria et al., 2012).

The most accepted and widespread definition of this construct is attributed to Maslach and Jackson's (1981) three-dimensional psychological syndrome in terms of emotional exhaustion, depersonalization (treating clients, students, customers, or colleagues distantly and/or cynically), and reduced feelings of work-related personal accomplishment. (Maslach et al., 1996).

Burnout also puts organizational functioning at risk in medical settings. Healthcare employee's burnout was found to be associated with low performance, intentions to leave and moderate care (Leiter & Maslach, 2009).

A recent meta-analysis aspired to assess nurse burnout levels and prevalence rate of each burnout dimension. Findings showed that 31% of participating nurses experienced emotional exhaustion, 24% experienced high depersonalisation and low personal accomplishment was found among 38% (Molina-Praena et al., 2018).

Hence for age, there were indications that younger nurses were more vulnerable to burnout (Karakoc et al., 2016; Kousloglou et al., 2014), whereas others believed that nurses aged over 38 were more susceptible (Faria & Maia, 2007).

Turnover Intentions

Turnover intention refers to employees' conscious decision to leave an organization. The association between turnover intentions and actual turnover has been widely recorded in the literature (Griffeth et al., 2000; Mobley et al., 1979).

Turnover intention has been recognized as a predictor of actual turnover and accounts for 10-15% of turnover variance (Griffeth et al., 2000; Hendrix et al., 1998), and is the last step taken before actually leaving (Mobley, 1977; Mobley et al., 1979).

Turnover intention or intent to leave seems to be a multiphase process comprising of psychological, cognitive, and behavioral elements (Takase, 2010). There is evidence that the construct is a predictor of actual decisions to leave a profession (Hasselhorn et al., 2003; Lane et al., 1998).

Intentions to leave the profession are most prevalent among the youngest generation of nurses (Blythe et al., 2008; Hasselhorn et al., 2003; Hayes et al., 2010;

Salminen, 2012; Rudman et al., 2010). Turnover predictors may differ across generations. Thus, members of Generation X are less likely to remain in jobs with no growth potential (Apostolidis & Polifroni, 2006). Similarly, growth opportunities were highly valued by X-ers and a lack thereof was a turnover predictor (Asuncion, 2013). For millennials, perceptions of recognition were the only significant predictor of turnover, indicating that recognition is most valued by this generation (Asuncion, 2013).

Summary

This literature review introduced the features in the world of work considering the nursing profession and alongside the Covid-19 Era, the theoretical framework of the generation concept and research variables including self-efficacy theory, social cognitive career theory and self-determination theory. Finally this review explained the dependent variables: job satisfaction burnout and turnover intention.

Conceptual model of the study is presented in figure 1

Conceptual Framework of the Study

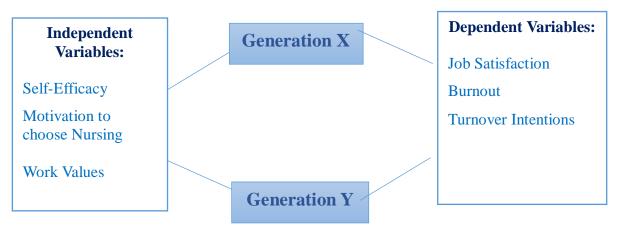


Figure 1: Conceptual framework

RESEARCH METHODOLOGY

Preview

This research's goals were to examine intergenerational differences and influences on self-efficacy, motives for choosing nursing, and work values versus the independent variables all together and separately.

Scientific research is a systematic, controlled, empirical and critical investigation of hypothetical assumptions about natural phenomena and its purpose is to predict future behaviors based on current and case study research.

In this study I employed explanatory research seeking explanations of observed phenomena, problems, or behaviors. While descriptive research examines the what, where, and when of a phenomenon, explanatory research seeks answers to why and how types of questions. I employed the active theory paradigm guided by the principles of analyzing social interactions while using mixed quantitative and qualitative research methods, employing questionnaires adapted to the research variables and analyses of findings emerging from focus groups' discussions and in depth interviews.

In this research the following methods of triangulation were used:

Data triangulation - the use of a variety of data sources, including time, space and people in order to strengthen conclusions about findings and reduce risks of false interpretations (UNAIDS, 2010). In this study, data was collected throughout the study beginning with quantitative data collection from 150 primary care nurses and continuing with qualitative data collected from twelve in-depth interviews and twenty nurses participating in two focus groups.

Methodological triangulation- the use of multiple methods to study a situation or phenomenon. The intention is to decrease deficiencies and biases that come from any single method (UNAIDS, 2010). In this study, data was collected using various methodologies - qualitative: focus groups and in depth interviews; quantitative: closed questionnaires.

Theory triangulation: the use of multiple theories or hypotheses when examining a situation or phenomenon. The idea is to look at a situation/phenomenon from different perspectives, through different lenses, with different questions in mind (UNAIDS, 2010). In this study, I used different theories from different disciplines: sociology, psychology and management theories.

Reliability

Reliability in qualitative research examines the reliability and consistency of research in its process and findings (Shkedi, 2004). Reliability in quantitative research evaluates its quality and explains its findings. It is also to examine the recurrence and internal consistency of chosen research tools (Shkedi, 2004). In this research, reliability was tested with the Cronbach alpha – all study parameters were above 0.7.

Validity

Validity In qualitative research have no meaning, since researched phenomena are usually singular and it is impossible to guarantee that any results can be repeated at any time. However, any use of qualitative research tools requires the use of familiar tools and triangulation (Shkedi, 2004). In this research valid and reliable questionnaires were used according to research variables.

Research Design

The research design in this study is summarized in table 1.

Study	Aim	Aim Research tools		Data analysis	
1. Quantitative	To collect standardized data in a statistical format to find differences and correlations between research variables	 Questionnaires: 1. Self-Efficacy 2. Motives to choose nursing 3. Work values 4. Job satisfaction 5. Burnout inventory 6. Turnover intentions (TI-6) 	150 Primary care nurses; 75 from Generation X, 75 from Generation Y	One-way MANOVA, Pearson correlation, Multiple Regression	
2. Qualitative	To gather rich data from a specific population to support research questions and hypothesis	Focus groups	2 focus groups (10 primary care nurses in each group)	Theme and category analysis	
3. Qualitative	To gather rich data from a specific population in the context of the Covid- 19 period	In-depth interviews	12 interviews; 6 with Generation X and 6 with Generation Y nurses	Theme and category analysis	

Table 1: The research design

Dependent variables: Job satisfaction, Burnout, Turnover Intentions

Independent Variables: Self-efficacy, Motives to choose the nursing profession, Work Values

Mixed Methods

This study comprised mixed methods: both qualitative and quantitative research methods to strengthen its internal and external validity.

For quantitative research I used six questionnaires adapted to research variables.

Questionnaires are a method used to collect standardized data in a statistical format. They are practical, enable the collection of large amounts of information in a short period of time and relatively cost effectively. They can be distributed in a printed or digital format with limited effects on its validity and reliability and their results can usually be quickly and easily quantified and analyzed (Hakak et Al., 2001). In this study, questionnaires were structured and respondents asked to select answers from a given set of choices. Selected questionnaires matched research variables and their analysis yielded the best results according to research questions and hypotheses. All questionnaires were validated and, if required, translated from other studies conducted in Israel.

For qualitative research I employed two focus groups with ten participants in each group and twelve in-depth interviews with both generations X and Y.

A focus group is a method of data collection in which a facilitator converses with a group of 6–12 participants about issues related to research questions. As an approach, focus groups offer qualitative researchers an efficient method of gathering views from many participants at one time and create an enhanced level of debate. In-depth interviewing is an open-ended, discovery-oriented method of obtaining detailed information about a topic from a stakeholder. It enables the exploration of respondents' points of view, experiences, feelings and perspectives (Benvenisti, 2019).

Mixed methods offers several advantages: they collect rich, comprehensive data and provide methodological flexibility; they give a voice to study participants and clarify inconsistencies between quantitative results and qualitative findings.

However, mixed methods studies require careful planning of methodological aspects, including study sample for qualitative and quantitative portions (identical, embedded, or parallel); timing (sequence of qualitative and quantitative portions); and plan for integrating data. (Johnson & Onwuegbuzie, 2004).

In this mixed method study, such integration permitted a more complete and synergistic utilization of data. The use of mixed methods in this study compared quantitative and qualitative data in cases of contradiction and provided methodological =flexibility and an authentic interpretation of the phenomenon.

Research Population Profile and Sampling

The healthcare services of primary care in Israel is provided by four Health Maintenance Organizations (HMOs). State health insurance law states that every citizen must belong to one of the four HMOs, according to personal choice, and be eligible to receive healthcare.

There are three main generations of nurses in the workforce: baby boomers (1945-1959), Generation X (1960-1979), Generation Y (1980-1999) with generation Z (2000-2010) now joining the employment market. As of 2020, there were 74,298 certified nurses in Israel. The largest age groups were aged between 30-44 (32%), 45-54 (21%) and 55-66 (19%) (Israeli Ministry of Health, 2020).

Participants

Target population in this study was primary care nurses owing to accessibility and personal interest. The sample size was selected as a representative sample of the entire population of nurses; thus the quantitative study population was 150 Generation X and Y primary care nurses.

Table 2 describes the Socio-demographic characteristics of the primary care nurses by generation. As shown below, 75 of the study population were born between the years of 1960-1979 (Generation X) and 75 were born between the years of 1980-1999 (Generation Y). 8.6% of the sample are males (n=13) and 91.4% are females (n=137).

Most participants are Jewish (92.6%), Secular (73.3%), were born in Israel (67.3%), are married or in a relationship (64%), live in the center of Israel (83.3%) and have a bachelor's degree (52%).

Characteristics	Values	Generation X	Generation Y	2	р
		(<i>n</i> = 75)	(<i>n</i> = 75)		
Gender	Male	4 (5.3%)	9 (12.0%)		
	Female	71 (94.7%)	66 (88.0%)	2.11	.147
Place of birth	Israel	43 (57.3%)	58 (77.3%)		
	Other	32 (42.7%)	17 (22.7%)	6.82**	.009
Marital status	Married	55 (73.3%)	34 (45.3%)		
	Single	4 (5.3%)	33 (44.0%)		
	Divorced	13 (17.3%)	4 (5.3%)		
	In a relationship	3 (4.0%)	4 (5.3%)	32.59***	.001
Living area	North	5 (6.7%)	6 (8.0%)		
8	South	10 (13.3%)	4 (5.3%)		
	Center	60 (80.0%)	65 (86.7%)	2.86	.239
Education ¹	Certificate	6 (8.0%)	5 (6.7%)		
	Bachelor's degree	21 (28.0%)	57 (76.0%)		
	Master's degree	46 (61.3%)	11 (14.7%)		
	PhD	2 (2.7%)	2 (2.7%)	1653.50***	.001
Nationality	Jewish	70 (93.3%)	69 (92.0%)		
·	Muslim	2 (2.7%)	5 (6.7%)		
	Christian	3 (4.0%)	1 (1.3%)	2.29	.318
Religious ¹	Secular	51 (68.0%)	59 (78.7%)		
5	Traditional	18 (24.0%)	14 (18.7%)		
	Religious	6 (8.0%)	2 (2.7%)	2488.50	.115
Managerial role	No	18 (24.0%)	60 (80.0%)		
8	Yes	57 (76.0%)	15 (20.0%)	47.11***	.001

 Table 2: Socio-demographic characteristics of the primary care nurses by generation

p < .01, *p < .001; ¹ Variable is in an ordinal scale: Mann-Whitney analysis was conducted.

Data Analysis Methods

Prior to examining research questions and hypotheses, Shapiro-Wilk tests were conducted to examine whether this study's six dependent variables were normally distributed for each study group. Levene's tests were conducted to examine the homoscedasticity of the variances on the six variables.

In order to examine the first research question, a one-way MANOVA analysis was conducted.

To examine the second research question, Pearson correlation analyses were conducted for each study group separately. Fisher r-to-z transformations examined whether there were significant differences between the two study groups in the correlation coefficients. To examine the third research question six multiple regression analyses were conducted. Socio-demographic characteristics were entered into the regression analyses step by step so that only variables that had a significant contribution to the EPV of the six dependent variables were entered into the regression model.

Research Process and Ethical Considerations

This study was conducted between July 2020 and January 2021.

Participants were asked to sign an informed consent form stating they have been given explanations about the research, its benefits and possible risks, and agreed to take part in it. Study questionnaires were distributed using digital means such as Google Forms and face-to-face delivery. Forty-four questionnaires were handed out frontally and the rest (N=106) were handed out as part of Google Docs to online groups of nurses working in the primary care setting.

Ethical considerations in research are a set of principles guiding research designs and practices. Key considerations were to protect the rights of research participants, enhance research validity and maintain scientific integrity (Rubinstein & Tabak, 2013).

This research was approved by the nursing management in the community as the research population consists of primary care nurses in Israel.

Several ethical issues were taken into considerations in this study:

Voluntary participation - All participants were able to withdraw from, or leave, the study at any point without feeling any obligation to continue.

Informed consent - Participants completed a consent form according to the method of filling out the selected questionnaires.

Anonymity - Anonymity was guaranteed and identifying details were safeguarded by the researcher (only names and signatures of participants were collected on the inform consent forms distributed frontally).

Confidentiality - Confidentiality was guaranteed and identifying details were safeguarded by the researcher.

Potential for harm - No potential harm identified.

Results communication - The research was conducted in accordance with ethical considerations and met all components of ethical rules for conducting reliable and valid research.

FINDINGS

Research Question 1

Will significant differences be found between the two study groups in levels of selfefficacy, motivation to choose nursing, work values, job satisfaction, burnout and turnover intentions?

Self-Efficacy

A significant difference was found in self-efficacy levels between the two generations, t(148) = 2.05, p = .042. Self-efficacy levels in Generation X primary care nurses (M = 34.88, SD = 3.81) was significantly higher than Generation Y primary care nurses (M = 33.59, SD = 3.93).

Qualitative research revealed that both generations felt a sense of self-efficacy – confidence in their professionalism. However, self-efficacy was based on experience in Generation X nurses while it was based on knowledge in Generation Y.

Theme	Category	Evidence
Self - Efficacy	1. Confidence in one's professionality	Gen X - "I am a person who adapts to any situation" "I have been in the profession for 40 years and have withstood the pressure. I have faced the challenge" Gen Y - "I learned that I'm strong and that I'm really good." "I know I'm a good at my profession"
	Confidence in one's knowledge	Gen X - The younger generation comes with a lot of knowledge". Gen Y - "The younger generation has a lot of knowledge and thus we are more competent".
	Confidence in one's experience	Gen X – "I think because I came with a hospital background and experience, I was able to adapt more appropriately to the changes". Gen Y – "It could be that the older generation has more experience because they have been in more situations, they may have more tools".

Self-Efficacy Theme

Motivation

A significant difference was found in the level of factors affecting the choice of nursing as a career between the two generations, F(2,147) = 3.45, p = .034, $p^2 = .05$. A one-way ANOVA examining each factor affecting the choice of nursing as a career indicated that while no significant difference was found between the two generations in the level of intrinsic factors, F(1,148) = .14, p = .708, $p^2 = .00$, the level of extrinsic factors affecting the choice of nursing as a career was significantly higher in Generation Y than Generation X primary care nurses, F(1,148) = 4.99, p = .027, $p^2 = .03$.

Intrinsic factors emerged as significant to nurses but primarily in Generation X nurses. Extrinsic factors such as public appreciation, patients' gratitude and organizational recognition were found to be internally rewarding for both generations, but more critical to Generation Y nurses. The extrinsic factor of promotion emerged as a strong motivational factor for Generation Y nurses, while stability emerged as one preferred by Generation X nurses. Salary was found to be more significant for Generation Y nurses than Generation X nurses.

Theme	Category	Evidence
Motivation - intrinsic factors	Caring / Helping	Gen X – "I came into the profession and it fascinated me" Gen Y – "I work 24/7 because I am committed to my patients"
Motivation - extrinsic factors	Recognition	Gen X – "Patients and families are very grateful to us, appreciate us" Gen Y – "I think I do things wholeheartedly and in a good way. I want recognition"
	Money / salary	Gen X – "I cannot say I prefer money; I would rather spend time with my children" Gen Y – "If I was offered more money I'd take it"
	Retention vs. promotion	Gen X – "Today, when there was an excess of manpower everywhere, they are less into advancing but more into retaining a job." Gen Y – "I am a hard worker and I want promotion"
	Stability	Gen X – "I wanted more stability; it drew me to the system" Gen Y – "I'm not afraid of change"

The Motivation theme

Work Values

Overall, the quantitative study showed no significant difference in levels of work values between the two generations at employee level. Yet, work values at an organizational level were significantly higher in Generation Y than Generation X primary care nurses: levels of achievement and transparency in the organizational level were significantly higher in Generation Y than Generation I level were significantly higher in Generation Y than Generation I level were significantly higher in Generation Y than Generation I level were significantly higher in Generation Y that Generation X nurses.

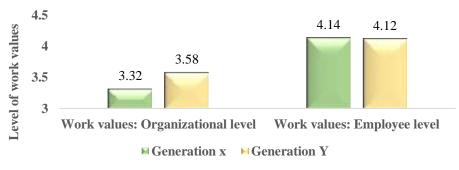


Figure 2: Work values – Generations X and Y

In conclusion, the qualitative study revealed differences between the generations, only some of which emerged in the quantitative study. For example, Generation Y's technological/digital orientation did not yield a difference in the innovation factor.

The qualitative study revealed a minor difference in the older and younger nurses' attitudes to the organization – Generation X appeared more genuinely committed while Generation Y seemed more digitally oriented. In addition, Generation X nurses seemed more committed to regulations and compliance with protocols than Generation Y nurses. However, Generation Y nurses appeared more oriented to innovative ventures, technology, and digitalization than Generation X nurses. Finally, teamwork emerged as a constraint obligating collaboration and communication between the two generations.

Theme	Category	Evidence
Work values	Organizational	Gen X – "We are committed to the organization although we had some difficulties in the last two years."
		Gen Y – "I got into work and understand its' complexity."
	Compliance with	Gen X – "The material that came out of nursing schools 40 years ago was programmed, according to procedures, according to logic."
	guidelines	Gen Y – "Generation X is a bit hard to say, fixed. Older nurses are stiffer, more frightening towards staff and patients."
Innovation orientation Teamwork	Gen X - "It's easier for them to deal with new things because they're very good at technologies"	
		Gen Y - "The older generation doesn't search to make changes in the workplace compared to young people who are all digital"
	Teamwork	Gen X – "The younger and older generation work collaboratively, but the younger generation lacks practice in nursing patients, which can be resolved through mentoring and being accompaniment by an older team member"
		Gen Y – "Now following the epidemic, it is important for me to cooperate with the whole team to overcome this period and go through it together"

Work Values Theme

Job Satisfaction

In the quantitative study no significant difference was found in levels of job satisfaction between the two generations.

The qualitative study differentiated between satisfaction at an individual level stemming from recognition and appreciation and satisfaction at an organizational level that is outcomes of nurses' expectation of a workplace. Only minor differences were found in the latter.

Job Satisfaction theme

Theme	Category	Examples
Job satisfaction	Individual	Gen X - "Patients and families are very grateful to us, appreciate us, which led to a sense of satisfaction".
		Gen Y – "Following COVID-19 there is a significant increase in satisfaction. Employees learned they are vital. It greatly improved their appreciation for the workplace."
Organizational	Gen X – "The workplace gave us incentives, vouchers, we felt the workplace appreciated us, which helped us continue to work with a sense of mission".	
		Gen Y – "I expected more appreciation from the organization, they did a lot for patients and a lot less for employees. I feel disappointed, I felt I needed an emotional response from the organization and did not receive it".

Burnout

In the quantitative study a significant difference was found in burnout levels between the two generations. Three factors were used to measure burnout levels: exhaustion, cynicism, and professional self-efficacy.

While no significant differences were found between the two generations in levels of exhaustion and professional self-efficacy, cynicism levels were significantly higher in Generation Y than Generation X nurses F(1,148) = 66.49, p < .001, $p^2 = .31$.

The qualitative study showed that nurses generally denied they were burned out although participants had all experienced workloads and various stressors commonly identified as sources of exhaustion.

Burnout theme

Theme	Category	Theme
Burnout	Workload	Gen X – "I'm less worn out personally. Although I worked a lot of hours, but there were also many hours of rest in between".
		Gen Y - "Sure, I worked 7 days a week, I was not with my kids, I had no leisure."
Exhaustion /		Gen X – "Some found it difficult to adapt on a personal level; Burnout was individual."
		"To live a life that is up and down on emotional, mental, physical levels, makes it very stressful, especially during COVID-19."
		Gen Y – "Lots of things have changed. You work harder while you have to take care of your children who are left alone at home and you have to be at work. It is huge and crazy stress".

Turnover Intentions

The quantitative study showed a significant difference in level of turnover intentions between the two generations. It was significantly higher in Generation Y nurses compared to Generation X nurses t(137.579) = 3.43, p < .001.

The qualitative study revealed that intentions to leave were ascribed to Generation Y nurses by both older and younger nurses.

Turnover intentions theme

Theme	Category	Theme
Turnover Intentions	Commitment / change orientation	Gen X – "The truth is I have not heard of any intention to leave, if they (Generation Y) were offered something else they would go without hesitation and without thinking twice."
		Gen Y – "It is easier for us to move from one place of work to another. Because if we don't like something in the workplace, we just leave."

Research Question 2

Will significant correlations be found between levels of self-efficacy, motivation to choose nursing and work values and levels of job satisfaction, burnout and turnover intentions among the two study groups of primary care nurses?

To examine the second research question, Pearson correlation analyses were conducted between research variables (see Table VII.2).

Furthermore, Fisher r-to-z transformations were conducted to examine the differences between the two generation groups in correlation coefficients (see Table VII.3). In this part, correlations were examined for the entire sample.

Table 3: Pearson correlation coefficients between levels of research variables (N = 150, df = 148)

	Job satisfaction	Burnout	Turnover intentions
Self-efficacy	.25**	17*	14
Motivation: intrinsic factors	.14	15	25**
Motivation: extrinsic factors	01	06	02
Work values: organizational level	.32***	02	.02
Work values: employee level	.06	14	13

p < .05, p < .01, p < .01, p < .001

As seen in Table VII.2, significant positive correlations were found between levels of nurses' self-efficacy and levels of the work value at an organizational level and levels of nurses' job satisfaction [r(148) = .25, p = .002 and r(148) = .32, p < .001, respectively]. These results indicated that as levels of self-efficacy and levels of work values at an organizational level increased, so too did job satisfaction among primary care nurses, respectively.

In addition, a significant negative correlation was found between nurses' selfefficacy and burnout levels, r(148) = -.17, p = .043. This result indicated that as selfefficacy levels increased, level of work burnout in primary care nurses decreased. Finally, a significant negative correlation was found between levels of intrinsic factors affecting the choice of nursing as a career and turnover intention levels, r(148) = -.25, p= .002. This result indicated that as levels of intrinsic factors affecting the choice of nursing as a career increased, levels of turnover intentions in primary care nurses decreased. Table 4: Pearson correlation coefficients between self-efficacy, motivation to choose nursing and work values levels and job satisfaction, burnout and turnover intentions levels (N = 150, df = 148)

	Job satisfaction			Burnout			Turnove	Turnover intention		
	Gen X	Gen Y	Fisher	Gen X	Gen Y	Fisher	Gen X	Gen Y	Fisher	
			(1 tailed)			(1 tailed))		(1 tailed)	
Self-efficacy	.34**	.16	1.16	11	12	0.06	14	03	0.67	
Motivation										
Intrinsic factors	.32**	08	2.47**	23*	07	0.98	39***	05	2.17*	
Extrinsic factors	.08	09	1.02	19	10	0.55	06	08	0.12	
Work values										
Organizational level	.42***	.25*	1.15	15	06	0.55	02	06	0.24	
Employee level	.27*	15	2.57**	30**	02	1.74*	27*	.04	1.90*	

p* < .05, *p* < .01, ****p* < .001

Only in Generation X were significant positive correlations found between levels of nurses' self-efficacy, intrinsic factors affecting the choice of nursing as a career and work values at both organizational and employee levels and the nurses' job satisfaction level.

In addition, negative correlations were found between levels of intrinsic factors affecting the choice of nursing as a career and work values at employee level and nurses' burnout in primary care nurses from Generation X..

Similarly to the results regarding the level of burnout, significant negative correlations were found between levels of intrinsic factors affecting choice of nursing as a career and work values at employee level and level of nurses' turnover intention in primary care nurses from Generation X.

As for Generation Y, significant, positive correlations between work values at an organizational level and job satisfaction were found. No other associations were found between research variables and job satisfaction.

Furthermore, no correlations were found between research variables and burnout or turnover intentions.

Research Question 3

Will socio-demographic characteristics contribute significantly to the explained variance of levels of self-efficacy, motivation to choose nursing, work values, job satisfaction, burnout and turnover intentions?

To examine the third study question addressing the contribution of sociodemographic characteristics to EPV of self-efficacy, motivation to choose nursing, work values, job satisfaction burnout and turnover intentions levels, multiple regression analyses were performed.

Explained variable		Characteristics	В	SE.B		R^2	R^2
Self-efficacy	1	Scope of position	-1.90	.78	20*	.039*	.039*
Motivation							
Intrinsic factors	1						
Extrinsic factors	1	Managerial role	35	.13	22**	.047**	.047**
Work values							
Organizational level	1	Generation groups	.26	.10	.20*	.040*	.040*
Employee level	1	Education	.19	.06	.26**	.066**	.066**
Job satisfaction	1						
Burnout	1	Generation groups	.55	.11	.38***	.142***	.142***
	2	Generation groups Education	.43 26	.11 .09	.29*** 24**	.191***	.050**
Turnover intentions	1	Generation groups	.40	.11	.27***	.074***	.074***

Table 5: Results of multiple regression analyses for self-efficacy, motivation to choose nursing, work values, job satisfaction, burnout and turnover intentions levels according to socio-demographic characteristics

As seen in Table VII.4, the "generation group" variable contributed significantly 4.0%, 14.2% and 7.4% to EPV of work values at an organizational level, burnout and turnover intention levels, respectively. In accordance with the results described in the first part of the result section, positive coefficients indicated that levels of work values at an organizational level, burnout and turnover intention levels were significantly higher in Generation Y than Generation X primary care nurses.

In conclusion, Specific demographic characteristics affected study variables: the scope of position, managerial role and education levels of primary care nurses contributed significantly to explained variance of self-efficacy, extrinsic factors, work values at employee level and work burnout levels.

Findings Exclusive to the Qualitative Study

Two themes arose solely in the qualitative study and thus did not accord with quantitative findings.

The first was potential generational conflict.

Potential generational conflict involved several aspects of the profession and interactions/relationships between the generations. When considering the essence of nursing, Generation X held a traditional view (e.g., caring and helping) while Generation Y held a more progressive view (e.g., knowledge and professionalism).

Another aspect was attitude to authority including accepting a hierarchy, doctornurse relationships, and containing patient's (bad) behavior. Generation X nurses tended to be more obedient whereas Generation Y nurses were less submissive.

Potential conflicts also referred to competition between generations, which gave rise to tense dynamics and feelings of superiority / inferiority among nurses.

Finally, communication sessions, training programs, learning processes and even meetings to air and resolve concerns were methods nurses recommended to mediate conflicts between the generations.

Theme	Category	Evidence
Potential Generatio nal	Essence of nursing	Gen X – "Nursing patients, such as caring for them, touching them, there is no such thing (among Generation Y), there is no compassion, no spatial vision."
Conflict		Gen Y – "From what I once knew there were fewer treatment options. When my mother was a nurse, there was less technology, fewer new drugs. Everything she learned was while working. It is different today."
	Attitude to Authority	Gen X – "When the older generation tells the younger generation 'you will do this', they say 'I know better, I have more knowledge'." Gen Y – "My mother was a nurse. Her generation did what the doctor said"
	Competition / Superiority	Gen X – "Whoever is good (Generation Y) poses a threat to the older nurses."
	/_Inferiority	Gen Y - " <i>I</i> think if there are nurses who feel superior to younger nurses, it is clear there is something in the dynamics and some tension is manifested."
	Mediation/	Gen X – "I think there is a possibility of mediation but it is a bit
	Conciliation	feigned for my taste. If it were possible to take down the whole business of personalization and focus more on patient nursing through training and mentoring."
		Gen Y - "I see this as an advantage working with other generations.

The second theme revealed in the qualitative study was the impact of Covid-19.

COVID-19 influenced day to day nursing practice including long working hours, multiple tasks, frequent changes in daily routines and transformation of nursepatient interactions. The emotional impact of the COVID-19 was higher among Generation Y nurses. Furthermore, Covid-19 influenced work dynamics resulting in unity and mobilization concealing generational gaps during peaks of the waves. Finally, nurses perceived the organizational response during the pandemic as partial and reactive.

Theme	Category	Theme
Impact of Covid-19	Impact on practice	Gen X – "Lots of talking, lots of tutorials, lots of stress relief." Gen Y – "We really had hard times, we worked 6 and 7 days a week, whether it's vaccines or a call center."
	Emotional impact	Gen X - "I did not feel fear, it just caught us unprepared. I think because I came with a hospital background and experience, I was able to adapt to the changes, more appropriately".
		Gen Y - "You could say that at first it was stressful, when I treated the first patient with Covid-19, I did not really know how to deal with it. Today with vaccines it is less stressful".
	Work dynamic	Gen X – "You work very hard, everyone is recruited and afterwards, when the wave is over – no one cares. The applause is over."
		Gen Y – "The problem is that there is less contact, distance is created, I did not want to get close to people because I was afraid for myself."
	Organizational response	Gen X – "They realized that the organization was in their corner"
		Gen Y – "The organization did nothing to benefit me"

DISCUSSION AND CONCLUSIONS

Generational differences were found on several variables relevant in the workplace:

- o Generation X nurses were higher in self-efficacy then Generation Y
- Generation Y were higher on extrinsic factors and work values at the organizational level compared to Generation X.
- Generation Y scored higher than Generation X in burnout and turnover intentions.

Qualitative findings exposed delicate differences between the generations that were not evident in the quantitative study:

- Self-efficacy was based on experience among Generation X nurses while it was based on knowledge in Generation Y.
- Motivation to choose the profession was based on intrinsic factors in Generation X and on extrinsic factors in Generation Y.
- Routine motivation relied on recognition for both generations though critical for the Generation Y.
- Generation X appeared more genuinely committed while Generation Y seemed more digitally oriented.
- Perception of the profession itself seemed differentiated where Generation X were devoted care providers and the Generation Y were more health-tech professionals.

Associations between variables:

Self-efficacy was found to be positively associated with work values and work satisfaction and negatively associated with burnout.

Among Generation X, self-efficacy was correlated to intrinsic factors, work values and work satisfaction and negatively correlated to burnout and turnover intentions.

Among Generation Y, work values were correlated to work satisfaction only.

Conceptual Implications

• Generational differences may turn into conflict where different attitudes collide and competition over recognition and/or promotion may emerge.

- Intergenerational relationships in the workplace should be monitored and sometimes mediated.
- The role of nurse manager is significant in generational mediation.
- COVID-19 transformed nurses' work. The qualitative findings expose the physical and emotional toll for nurses.
- The organizational response was perceived by nurses as partial and reactive.
- During acute phases of the pandemic, social cohesion was strengthened concealing generational gaps and "back in routine" period gave rise to the generational divide.
- There is a shift of the nursing profession from a feminine, submissive, caring job to a knowledgeable, health-tech profession.
- This shift is echoed by the generational divide where Generation Y holds a contemporary conception of nursing while Generation X hold a more traditional one.

The next generation of nursing, the Z generation are characterized as are pragmatic, desire convenience and immediacy. They have a limited attention span and they get bored easily (Chicca, & Shellenbarger, 2018). The following figure portrays three nursing types: traditional, contemporary and future.

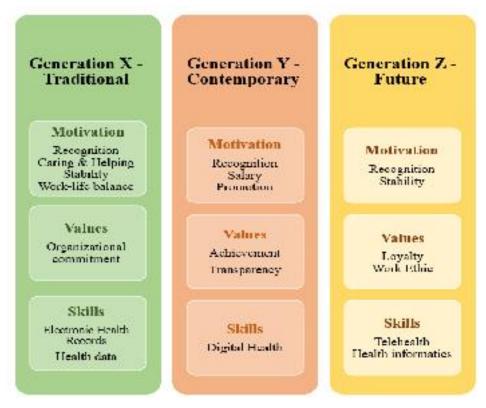


Figure 3: Three types of nursing

Practical Implications

Based on the research findings, the current approach to recruiting and retaining employees is old and conservative and needs to change to a generation adjusted approach and implemented through all phases: recruiting, hiring, training, maintaining, etc. and based on the needs of the system.

These include:

- o Adapt recruiting and maintaining methods for all generations
- Planning and creating a generation mix, assigning roles and mediating between the generations
- Peer learning on how to deal with obstacles at institutional and personal level
- Strategies must be implemented that focus on addressing the logistical problems that health care providers face, such as capacity and burnout problems.
- Managers should encourage an open-door system so that providers can come for help whenever they experience problems.
- Counselling and support guidelines should be developed to empower the registered nurses involved
- Adequate health care providers should be trained to increase the human resource pool and enable a relief system.
- o A model for maintenance of staff working, including debriefing services
- Quality-control protocols, such as psychological assessment tools, should be in place and form an integral part of the monitoring and evaluation system to ensure holistic service as well as availability of psychological and proper social connections support.

Future studies are required:

- To assess the next generation in the workforce (Generation Z)
- o To assess new teaching methods on the next generation of nursing students
- To generalize the research findings to other populations, such as doctors, teaching staff and more
- To examine the generational gaps in the post COVID era were they enlarged or narrowed?
- Social cohesion in health organization what is the status of social relationships in work teams.

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