As noted in 2 prior Management Moment columns, the need is great for better public health messages (and better messengers) in these times of political division and societal turbulence. In those columns, the authors advocate for a richer range of messages designed to extend beyond the more traditional “liberal” public health community to intentionally connect with more “conservative” members of those same communities who have been heavily affected by adverse health outcomes. In this column, we offer the potential for a further expansion of this communication strategy by highlighting the unique potential of “public health millennials” as new messengers for public health.

Historical Context

In 1936, amid the turbulent depths of the Great Depression, President Roosevelt wisely stated, “To some generations much is given. Of other generations much is expected.” In today’s context it is the firm view of the eldest of our coauthors (G.W.M.) that it was to his Boomer generation that much was given and that it is the millennials now entering our public health workforce who will and already are facing remarkable challenges. In addition to facing unprecedented student loan debt, employment and economic setbacks associated with the Great Recession, and a shortage of entry-level jobs as older generations stay in the workforce longer, millennials are also inheriting a politically divided country that is in urgent need of constructive dialogue. Indeed, one certain challenge we all face in this century is how to communicate more effectively in our deeply splintered, yet instantly connected world.

Staggering degrees of polarization and partisanship plague our nation. To resonate with a broader swath of the American public—including both liberals and conservatives—Matthews et al have argued that public health messages must incorporate the full range of intuitive moral values identified in Moral Foundations Theory rather than relying almost exclusively on the 3 “liberal-favored” values of care, liberty, and fairness. Messages must also incorporate the values of loyalty, authority, and sanctity if they are to reach politically diverse communities. In fact, the content of a message may not matter as much as the way it is framed, how it is delivered and what emotional connection it establishes.

As the largest generation in the US workforce and the first generation with the technological savvy of digital natives, millennials (born 1981 to 1996) are already key players in the public health workforce, although underrepresented in governmental public health. Interestingly, different from previous cohorts, they are primarily motivated by causes rather than institutional loyalty and, with their tremendous reach via social media, they have unique potential to pioneer a movement toward cause-driven public health communication. In the sections that follow, our multigenerational team of authors will first discuss generational trends that characterize millennials as well as their integration into the public health field. Ultimately, we will investigate opportunities and challenges for millennials to serve as effective public health practitioners and messengers.

Who Are Millennials and How Are They Different?

Like other generations, US millennials are deeply affected by our nation’s current extremely polarized political climate. Millennials have also come of age in an era of instant and constant technological connection. Together, these factors influence how millennials work and communicate in 2 ways.
Millennials are driven by causes rather than by loyalty to institutions

The 2016 Millennial Impact Report observed that “cause, not loyalty, drives engagement” among millennials. Whether this trend results from disillusionment with traditional institutions (eg, political parties and religion) or a heightened sense of individual empowerment, one apparent effect is that millennials may be more motivated by achieving results than by following established protocols. They may approach their work with a fluid mindset that is less confined by perceptions of who should do what, when, and with what limitations. This fluidity is exemplified by the relative ease with which millennials seek out nontraditional allies, abandon outdated practices, develop innovative solutions, and collaborate across sectors.

Social media provide important platforms for millennials to signal their identities and values

Widespread Internet access and the proliferation of social media have yielded huge societal shifts, from enabling people to build and maintain wide social networks, to democratizing news sharing and publishing, to providing new platforms for identity building. Social networking sites in particular have led to a constant need and opportunity for self-representation in order to interact, inviting millennials to express their values and opinions in local and global online communities. These individual expressions have the potential to build connections and, in turn, a sense of community among people who otherwise may never have met one another or recognized common concerns; thus, social media create new opportunities for sharing knowledge, inviting discourse, and assembling coalitions. If employed carefully, social media may provide an effective tool for state and local public health departments to “look deeper and go local,” as urged by Matthews et al in their 2017 column.2

What Can Millennials Contribute as Public Health Messengers?

The new cache of young public health practitioners can be a tremendous asset to the field in both their approach to practice and their intuitive use of technology. Having been recently trained, they bring with them the benefit of recent exposure to a public health education that is in a continuous cycle of improvement. Many millennials enter the field because they are passionate about their communities and driven by cause; accordingly, they are attracted by public health programs that appeal to their desire to do good. This may be true for the whole workforce, but millennials bring a powerful combination of dedication to public health, commitment to social justice, and robust education and training, curated before they even step foot in a health department. Ultimately, a cause-motivated mindset means that millennials are willing and prepared to go beyond traditional roles and relationships of public health departments, forging new relationships with nontraditional partners, interrogating the system that produces inequality, and utilizing all of the tools at their disposal in pursuit of their cause: public health.

Who Are the Millennials in the Public Health Workforce?

Another trend shaping today’s workforce is an increase in postsecondary schools and graduate programs attracting students by emphasizing mission-driven education centered on paradigms of social justice, social change, and activism rooted in liberal-favored values. Indeed, the 300% growth in the number of public health graduates from 1992 to 2016 is partially attributed to the “do good” appeal of public health schools and programs.9 These principles of social justice align closely with the mission and heart of public health and may strengthen the educational experience and contribute to a new generation of passionate, energized workers. However, these characteristics may also attract and yield a student body and young workforce, which favor liberal values, language, and ideas. Graduates of this environment may find themselves less drawn to professions housed within the bureaucracy of governmental public health and less prepared to forge partnerships across the political spectrum. An intentional focus on incorporating and embracing all 6 moral values in preservice learning might better prepare millennials to effectively shoulder the important bridge-building work of public health. Far from suggesting that schools (or students) compromise their deeply held values, we are encouraging both to incorporate morally diverse communication- and empathy-building elements to accompany the principles of justice, so that graduates are effective public health practitioners and leaders in politically divisive times.
popular movements are built on social media platforms where they gain momentum and produce real outcomes, often by heightening public understanding of key topics. As such, many millennials are adept at facilitating online conversations that mobilize social networks. Equipping and encouraging millennials to share empathetic, morally grounded messages could harness the power of social media to transform popular understanding of public health practice from a bureaucratic function to a movement for healthier, more equitable communities.

Realizing these benefits that millennials bring to the public health workforce will require all of us in public health to engage in meaningful self-reflection to critically examine our own biases as messengers and evaluate the ways in which we craft and deliver messages. This reflection will help us find new ways to cohesively work together across generations to better serve our politically diverse communities. These processes and priorities, taken collectively, have unique potential to build unity or division around the cause of public health with contributions from millennials as new public health messengers.

What Is Needed to Assist Millennials to Serve as New Public Health Messengers?

As noted earlier, millennials’ contributions as public health messengers may be influenced by 2 important trends: the first is generally stronger engagement with causes rather than institutions, and the second is an inclination to signal one’s identity and values via social media. In any given individual, the 2 trends will likely converge in 1 of 2 ways: by prioritizing cause building or identity building, with the second priority being used in service of the first.

If individual identity building via social media is the top priority, a messenger may wield causes as “tools” to convey an online image, rather than considering the type of message best suited to build support for the cause. In the context of today’s hotly divided partisan politics, the result will almost certainly be a message that exacerbates division because, as philosopher Pierre Bourdieu observed, “social identity lies in difference.”

To convey one’s values in a brief hashtag or tweet, millennials (and perhaps others using social media) may be inclined to use socially loaded phrases to instantaneously connect the individual identity to a group identity and differentiate from others. This practice of “virtue signaling,” in which one distills complex moral issues into short phrases to signal righteousness, requires neither an understanding of multifaceted, nuanced challenges nor requires offline action. As a result, this form of shorthand signaling communicates social or group identity more effectively than it conveys ideas or invites dialogue.

In contrast, if advancing the cause of public health is the top priority, a messenger may be motivated to sacrifice virtue signaling in order to speak in a way that reaches across political boundaries and connects with a broader audience in support of the cause. In other words, prioritizing cause over identity may mean prioritizing results over self-righteousness. It may require avoiding socially loaded phrases, as tempting as they are, because they will instantaneously turn off half of the population. Recognizing this opportunity may assist millennials to thoughtfully reflect on their values rather than passively aligning with social trends. The hope is that this shift in self-awareness will result in more grounded messaging that resonates with a broader audience within the communities we serve.

What Are the Methods for Sharing Public Health Messages and Promoting Dialogue?

If millennials lead the way in prioritizing their common cause of public health over loyalty to social groupings and ego-driven identity building, they may find the motivation they need to choose unifying communication and authentic connection over merely signaling their virtue. As illustrated in the Figure, signaling has the limited effect of broadcasting one’s own righteousness, while more thoughtful communication may foster productive dialogue. Going a step further, using social media to truly connect with another person—whether online or in-person—holds the greatest promise for building local face-to-face coalitions that have the capacity to address the deepest-rooted challenges to health.
the cause—the public’s health—over being singularly right about it. And if we are not concerned with being perceived by a particular social “team” as right and virtuous based on our words alone, it may become much easier to speak and connect in unifying ways, using the full range of moral values.

Concluding Thoughts for Millennials’ Colleagues and Supervisors

Structural and generational barriers to engagement are worth overcoming, as millennials are becoming our newest leaders. Folding millennials into the evolving work of governmental public health could help to answer the existing challenges of how to break down siloes, forge new partnerships, envision innovative solutions, and authentically engage diverse communities. Their persistent commitment to cause propels millennials to approach current ineffective structures and hierarchy from a place of curiosity. With critical self-reflection and diverse moral foundations, millennials can help to share the cause of public health beyond the walls of a health department, uniting politically diverse and cross-sector partners around the common goal of building healthy communities.

In challenging times, the field of public health can look to its young people as energetic and willing partners in furthering the field’s core community-oriented mission. In this age, this means building support and disseminating messages on social media. More than ever, it is important for current managers and leaders to reach out to this new generation entering our workforce and intentionally mentor and learn from this unique cohort. Similarly, it is crucial that millennials in public health today actively lean in to this unusual leadership role where they will carry public health forward into the challenges ahead. For millennials and the public health workforce at large, it is no longer enough to be right; we must also be compelling and have the humility to embrace divergent perspectives in ways that resonate.

To some generations much is given. Of other generations much is expected.

This generation of Americans has a rendezvous with destiny.3

References