A INFORMATION SHEETS—UNIVERSAL

- T1, T2 AND T3
Getting to Know You: Attitudes and Values of Generation Y Public Health Graduates, and Implications for Transition to Work

What is this research about?
Futurists and policy analysts predict employers will have to work harder to recruit and retain new graduates over the next decade. Research suggests the challenges will be greater for employers in the human services especially health. This study focuses on graduates destined to work in preventive health: a sub-group often overlooked in studies on the health workforce which tend to concentrate on clinical or acute care workforce needs. The study aims to gain an understanding of what it is like for public health graduates entering the workforce in order to develop theories about their preparedness for work and induction into the workplace.

Who is being asked to take part in this research?
It is important that a range of perspectives are explored in order to develop a good understanding of what it is like for public health graduates entering the workforce. Interviews are being sought with:

- Graduands of the Bachelor of Health Science programs or equivalent who will be actively seeking employment as a health professional post graduation
- Educators currently responsible for the teaching and/or coordination of Bachelor of Health Science programs or equivalent
- NGO and government employers who have supervisory responsibilities or role in workforce development and representatives of peak professional bodies

What are the benefits of the research?
By taking part in this study, you will be contributing to unique empirical research on generation Y public health graduates and their transition to work. This research may lead to a less tumultuous transition to work for graduates by providing guidance to educators, and employers, on how to better prepare graduates for professional practice, as well as improve work opportunities and conditions so they are more attractive to new graduates.

What does the research involve?
The research comprises interviews with graduands, employers and educators.

If you choose to take part in this study, you will be interviewed in person at a time and place that is convenient for you. The interview will take about 45 to 60 minutes. The interview will be recorded, subject to your approval. Please note the researcher may need to contact you again to clarify any points raised in the interview, however, you will only be contacted if you consent to follow-up.

If you are a graduand, you will be interviewed in your final year of study with follow-up interviews at 6 months and 18 months post graduation. In your final year, you will be asked about your career aspirations and preparedness for professional practice. Following graduation, you will be asked about your experiences of work and thoughts on public health as a vocation. In addition, data on your age, gender, and prior work experience will be collected at the first interview, and professional work experience at the follow-up interviews.
The researcher will also maintain contact with you in between the interviews, possibly by a periodic email so as to keep you informed about the study and update your contact details if needs be. Additionally, you will be provided opportunity to clarify issues, and add further information if desired, and be alerted to professional development events and seminars open to graduands taking part in this study.

If you are an educator or employer, you will be interviewed once during the study and asked about your views on graduates’ transition to work and expectations of them in the workplace. Data on your age, gender, years teaching in the tertiary sector or supervisory experience will be collected too.

**Do I need to sign any forms?**

No. Your participation in this study is entirely voluntary. You are free to withdraw at any time without reason and without prejudice.

**Will my privacy be protected?**

Any information you may provide will be treated as confidential and will not be released by the researcher unless required by law.

**How will information gathered in this research be used?**

Information gathered for the study may be used in the researcher’s thesis and in papers submitted for publication in refereed journals, however, real names or other identifying information will not be used.

**How will the information be stored and for how long?**

All information collected during the research will be retained in the School of Population Health at The University of Western Australia. All notes and recordings from the interviews will be stored in a secure and lockable cabinet. Any information stored on computer will be password protected. Access to this information will be restricted to the researcher.

It is usual practice for data to be retained for a minimum period of 5 years from date of completion of the thesis or publication.

**Who do I talk to if I have any questions about the research?**

This research is being conducted by Denise Sullivan, the researcher, as a doctoral research project. If you have any inquiries, please contact Denise on 0408 038 137 (or email dsullivan@meddent.uwa.edu.au) who will be happy to assist.

If you would like to speak with the Chief Investigator for the study, Professor D’Arcy Holman, he may be contacted on 6488 1251 (or email darcy@sph.uwa.edu.au).

The Human Research Ethics Committee at The University of Western Australia requires that all participants are informed that, if they have any complaint regarding the manner, in which a research project is conducted, it may be given to the researcher or, alternatively to the Secretary, Human Research Ethics Committee, Registrar’s Office, University of Western Australia, 35 Stirling Highway, Crawley, WA 6009 (telephone number 6488-3703). The Committee also requires that all study participants be provided with a copy of the Information Sheet for their personal records.

This research project has been approved by The University of Western Australia’s Human Research Ethics Committee (Project No. RA/4/1/1889).
Getting to Know You: Attitudes and Values of Generation Y Public Health Graduates, and Implications for Transition to Work

What is this research about?

Futurists and policy analysts predict employers will have to work harder to recruit and retain new graduates over the next decade. Research suggests the challenges will be greater for employers in the human services especially health. This study focuses on graduates destined to work in preventive health: a sub-group often overlooked in studies on the health workforce which tend to concentrate on clinical or acute care workforce needs. The study aims to gain an understanding of what it is like for public health graduates entering the workforce in order to develop theories about their preparedness for work and induction into the workplace.

Who is being asked to take part in this research?

It is important to that a range of perspectives are explored in order to develop a good understanding of what it is like for public health graduates entering the workforce. Interviews are being sought with:

- Graduands of the Bachelor of Health Science programs or equivalent who will be actively seeking employment as a health professional post graduation [recruitment completed]
- Educators currently responsible for the teaching and/or coordination of Bachelor of Health Science programs or equivalent
- NGO and government employers who have supervisory responsibilities or role in workforce development and representatives of peak professional bodies

What are the benefits of the research?

By taking part in this study, you will be contributing to unique empirical research on generation Y public health graduates and their transition to work. This research may lead to a less tumultuous transition to work for graduates by providing guidance to educators, and employers, on how to better prepare graduates for professional practice, as well as improve work opportunities and conditions so they are more attractive to new graduates.

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If you are a graduand, you will be interviewed in your final year of study with two follow-up interviews four years post-graduation. In your final year, you will be asked about your career aspirations and preparedness for professional practice (T1). Following graduation, you will be asked about your experiences of work and thoughts on public health as a vocation (T2). You will later be invited to take part in a group discussion, and reflection, with other graduates taking part in this research project on your shared experience of the transition to work and others’ responses (educators and employers) to your collective journey (T3).

Individual in-depth interviews will be conducted at T1 and T2 and focus group at T3. In addition, data on your age, gender, and prior work experience will be collected at the first interview, and professional work experience at the follow-up interview.

The researcher will maintain contact with you in between the interviews, mostly by a periodic email so as to keep you informed about the study and update your contact details if needs be. Additionally, you will be...
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If you are an educator or employer, you will be interviewed once during the study and asked about your views on graduates’ transition to work and expectations of them in the workplace. The interview will be conducted as part of separate focus groups with educators and with employers. Data on your age, gender, years teaching in the tertiary sector or supervisory experience will be collected too.

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**Will my privacy be protected?**

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Should you decide to withdraw from the study at a later time; all information obtained relating to you will be destroyed and will not be used in this research unless you give permission for it to be used.

**How will the information be stored and for how long?**

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**Who do I talk to if I have any questions about the research?**

This research is being conducted by Denise Sullivan as a doctoral research project. If you have any inquiries, please contact Denise on 0427 808 346 (or email denise.sullivan@uwa.edu.au).

If you would like to speak with the Chief Investigator for the study, Winthrop Professor D'Arcy Holman, he may be contacted on 6488 1251 (or email darcy.holman@uwa.edu.au).

**Who has approved this research?**

Approval to conduct this research has been provided by The University of Western Australia, in accordance with its ethics review and approval procedures. Any person considering participation in this research project, or agreeing to participate, may raise any questions or issues with the researchers at any time.

In addition, any person not satisfied with the response of researchers may raise ethics issues or concerns, and may make any complaints about this research project by contacting the Human Research Ethics Office at The University of Western Australia on (08) 6488 3703 or by emailing to hreo-research@uwa.edu.au

All research participants are entitled to retain a copy of any Participant Information Form relating to this research project.
Getting to Know You: Attitudes and Values of Generation Y Public Health Graduates, and Implications for Transition to Work

What is this research about?

Futurists and policy analysts predict employers will have to work harder to recruit and retain new graduates over the next decade. Research suggests the challenges will be greater for employers in the human services especially health. This study focuses on graduates destined to work in preventive health: a sub-group often overlooked in studies on the health workforce which tend to concentrate on clinical or acute care workforce needs. The study aims to gain a deeper understanding of what it is like for public health graduates entering the workforce, their preparedness for work and induction into the workplace.

Who is being asked to take part in this research?

It is important to the research that a range of perspectives are explored and inform the findings and conclusions so as to ensure their relevance for the field. Interviews are, therefore, being sought with:

- Graduands of the Bachelor of Health Science programs or equivalent who will be actively seeking employment as a health professional post-graduation
- Educators currently responsible for the teaching and/or coordination of Bachelor of Health Science programs or equivalent
- Government, NGO and private sector employers who have supervisory responsibilities or role in workforce development and representatives of peak professional bodies

What are the benefits of the research?

By taking part in this study, you will be contributing to unique empirical research on generation Y public health graduates and their transition to work. This research may lead to a less tumultuous transition to work for graduates by providing guidance to educators, and employers, on how to better prepare graduates for professional practice, as well as improve work opportunities and conditions so they are more attractive to new graduates.

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If you are a graduand, you will be interviewed in your final year of study with two follow-up interviews four / five years post-graduation. In your final year, you will be asked about your career aspirations and preparedness for professional practice (T1). Following graduation, you will be asked about your experiences of work and thoughts on public health as a vocation (T2). You will later be invited to take part in a focus group, and reflection, with other graduates taking part in this research project on your shared experience of the transition to work and others’ responses (educators and employers) to your collective journey (T3). Individual in-depth interviews will be conducted at T1 and T2 and a focus group at T3. In addition, data on your age, gender, and prior work experience will be collected at the first interview, and professional work experience at the first follow-up interview (T2).

The researcher will maintain contact with you in between the interviews, mostly by a periodic email so as to keep you informed about the study and update your contact details if needs be. Additionally, you will be
provided opportunity to clarify issues, and add further information if desired, and be alerted to professional
development events and seminars open to graduands taking part in this study.

If you are an educator or employer, you will be interviewed once during the study and asked about your
views on the graduates’ transition to work and expectations of them in the workplace. The interview will be
conducted as part of separate 90 minute focus groups with educators and with employers. Data on your
age, gender, years teaching in the tertiary sector or supervisory experience will be collected too.

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This research is being conducted by Denise Sullivan as a doctoral research project. If you have any
inquiries, please contact Denise on 0427 808 346 (or email denise.sullivan@uwa.edu.au).

If you would like to speak with the Chief Investigator for the study, Professor Colleen Fisher, she may be
contacted on 6488 2193 (or email colleen.fisher@uwa.edu.au).

**Who has approved this research?**

*Approval to conduct this research has been provided by The University of Western Australia, in accordance
with its ethics review and approval procedures. Any person considering participation in this research
project, or agreeing to participate, may raise any questions or issues with the researchers at any time.*

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research project.
B  Phase 1—Graduand Interviews (T1)

- Recruitment flier
- Overview of study, PowerPoint x2 (Pre and post-commencement of research; aid to recruitment)
- Semi-structured interview guide, individual
- Student data sheet
- Table X: Summary of participant attributes @T1
- Preliminary results and analysis, PowerPoint x1
Feel like everybody’s talking about you?

But nobody hears a word you’re saying?

Now’s your chance to be heard … and make a difference!

Futurists and policy analysts predict big challenges for the health sector over the next decade with population growth and ageing creating unprecedented demand for services. There are concerns as to whether the health workforce has capacity to meet future needs. Studies of the health workforce tend to concentrate on clinical or acute care workforce needs. The School of Population Health at The University of Western Australia is auspicing a doctoral research project on Generation Y public health graduates. The study aims to gain an understanding of what it is like for public health graduates entering the workforce in order to develop theories about their preparedness for work and induction into the workplace.

By taking part in this study, you will be contributing to unique empirical research on Generation Y public health graduates. In fact, with your input, future graduates may experience a less tumultuous transition to work, be better prepared for professional practice, and find more attractive work opportunities and conditions.

To find out more, contact: Denise Sullivan 0408 038 137 (or email dsullivan@meddent.uwa.edu.au)
Getting to know your attitudes and values of generation Y public health graduates, and implications for transition to work

Denise Sullivan
PhD candidate
Schools of Population Health, and Social & Cultural Studies

Aim

- To gain an understanding of what it is like for generation Y public health graduates entering the workforce in order to theorise about their preparedness for work and induction into the workplace
- Focus will be on graduates destined for non-clinical roles in public health administration, policy or programs

Context

- Projections on impact of population growth and ageing on services, the labour force and economy
- Concerns over ability of health to meet future needs
- Dynamism of environment add to pressures
- Anticipated shortfall in those willing to enter the human services, such as health
- Growing preoccupation with the multi-generational nature of the workforce, and challenges ahead for employers, especially attracting and retaining generation Y employees

Generation Y

- Born 1980-2000
- Global generation
- At ease with technology
- More inclusive views of gender and race
- Positive outlook on life
- Crave inspiration and diversity in the workplace
- Less likely to define ‘selves’ by their jobs and potentially more demanding
- Conflicting views on values

“A tumultuous journey”

- Generational profiles suggest traits and values to which employers may appeal, but:
  - Employers need to offer an environment in which people want to work (AHMC 2004)
  - Employers and educators need to work better together “so that graduates are prepared to work in the health system and the transition to work is smooth” (Alexander & Thomson 2004)
  - Foci of health workforce planning and policy tends to be on the clinical and acute care workforce and issues of supply

Research questions

- What are the career aspirations and doubts of generation Y public health graduates?
- What is and will be expected of these people in the health workforce?
- Where are the greatest potential gaps between the expectations of generation Y as prospective employees and their prospective employers?
- How can employers be better prepared to provide work opportunities and conditions that will be more attractive to generation Y?
**Approach to research**

- Grounded theory
  - A reflexive, emergent process and over time
  - To further knowledge of subjective experience of graduates
- Ethnographic (in-depth) interviewing
  - Provides more detail about an individual’s understandings and experiences
  - “Attempts to understand the world from the subject’s point of view, to unfold the meaning of people’s experiences, to uncover the lived world prior to scientific explanations.”
  - (Kvale 1996)

**Sampling**

- Purposive and comprising 3 groups
  - Graduates: 10-20 per site (pool 30 p.s.)
    - Final year BHSci graduands at UWA, CUT
    - And will be seeking employment post-graduation
  - Educators: 2-3 per site (pool 5-10 p.s.)
    - Currently teach, coordinate &/or design BHSci programs at UWA, CUT
  - Employer groups: 8-10 (pool 15-25)
    - Reps of peak professional associations and employers (government, NGO)
    - And have supervisory responsibilities and/or role in workforce development

**Recruitment**

- Students
  - With help of Schools of Population Health
  - Presentations, fliers, email listings
- Educators and Employers
  - Via personal professional networks and with input of supervisors
  - Email, telephone, letter

**Data collection**

- Timing
  - T1 – Graduands
  - T2 – Graduates, educators and employers
  - T3 – Graduates
  - Interim contact with graduates to maintain interest and participation
- Data collection
  - Face-to-face
  - Settings
  - Semi-structured
  - Recording

**Data analysis**

- Thematic
- 2-step process
  - Identify
  - Elaborate
- Reliability and integrity
  - Documenting the research process
  - Talk with other researchers

**Limitations of the study**

- Use of generational profiles
  - Tend to obscure differences in experiences
  - Difficult to predict values of a generation that is still emerging and evolving (Huntley 2006)
- Purposive sampling
  - Not representative of all generation Y, or all public health graduates
- Possibility of interviewer effect
  - Researcher as peer and prospective employer
- Generalisability of results
  - Study is not a measure of prevalence of experiences
Ethical issues and concerns
- Informed consent
- Confidentiality
- Researcher as
  - Peer
  - Prospective employer
- Ethics committee approval
- Help to recruit

Graduand role in the study
- 3 x 45 minute interviews
  - Pre-graduation
  - Post graduation – 6 and 18 months
- Interim contact to
  - Clarify details of interviews
  - Update on professional development opportunities open to participants
  - Provide career advice where wanted

Benefits of participation
- Contribute to unique empirical research
- Potential to influence
  - the design of academic programs
  - the transition to professional practice
  - work opportunities and conditions for public health graduates

Additional incentives
- Transition to work seminar
  - Venue and date TBA
- Ongoing coaching and mentoring
- Exclusive access to professional development opportunities
  - On a first come first served basis

Transition to work seminar
- Offered by Anson, a recruitment consultancy specialising in the human services and not-for-profit sectors
- 3 hour seminar covering:
  - Job search tools and skills
  - Setting achievable career goals
  - Compiling a targeted resume and applications
  - Understanding how recruiters work
  - Interview preparation and skills

Questions
Getting to know you
Attitudes and values of generation Y public health graduates, and implications for their transition to work
Denise Sullivan, PhD Candidate

Background
• Master of Public Health research project on the evolution of a national coalition in tobacco control
  – Identified issue of generational change
• Shifting context for health service planning and delivery
  – Changes in socio-economic environment
  – Implications for policy, planning and delivery
  – Concerns about capacity to meet future demand
• Growing preoccupation with generational differences
  – Significance for sustaining a vital and engaged workforce

Context for health
• Projections on impact of population growth and ageing on services, the labour force and economy
• Concerns over ability of health to meet future needs
• Dynamism of environment add to pressures
• Anticipated shortfall in those willing to enter the human services, such as health
• Growing preoccupation with the multi-generational nature of the workforce, and challenges ahead for employers, especially attracting and retaining generation Y employees

Generation Y
• Born 1980-2000
• Global generation
• At ease with technology
• More inclusive views of gender and race
• Positive outlook on life
• Crew thinking and diversity in the workplace
• Less likely to define themselves by their job and potentially more demanding
• Conflicting views on values

The Transition to Work
• “A tumultuous journey”
• Generational profiles suggest traits and values to which employers may appeal, but:
  – Employers need to offer an environment in which people want to work
  – Employers and educators need to work better together
• Focus of health workforce planning and policy on the clinical and acute care workforce and issues of supply

Aim
• To gain an understanding of what it is like for generation Y public health graduates entering the workforce in order to theorise about their preparedness for work and induction into the workplace
• Focus is on graduates destined for non-clinical roles
• Opportunity to also challenge myths about generation Y
Research questions

- What are the career aspirations and doubts of generation Y public health graduates?
- What is and will be expected of these people in the health workforce?
- Where are the greatest potential gaps between the expectations of generation Y as prospective employees and their prospective employers?
- How can employers be better prepared to provide work opportunities and conditions that will be more attractive to generation Y?

Approach to research

- Grounded theory
  - A reflexive, emergent process and over time
  - To further knowledge of subjective experience of graduates
- In-depth interviewing
  - Provides more detail about an individual’s understandings and experiences

“Attempts to understand the world from the subject’s point of view, to unfold the meaning of people’s experiences, to uncover the lived world prior to scientific explanations.”
- (Kvale 1996)

Sampling

- Purposive and comprising 3 groups
  - Graduates
    - BHSci graduates from UWA, CUT
    - Seeking employment post-graduation
  - Educators
    - Teach in BHSci programs at UWA, CUT*
  - Employer groups
    - Representatives of peak professional associations and employers (government, NGO)
    - Have supervisory responsibilities and/or role in workforce development

Data collection

- Timing
  - T1: Graduands
  - T2: Graduates, educators and employers
  - T3: Graduates
  - Interim contact with graduates to maintain interest and participation
- Data collection
  - Face-to-face
  - Semi-structured IDIs
  - Convenient settings
  - Recorded

Data analysis

- Thematic
- 2-step process
  - Identify
  - Elaborate
- Reliability and integrity
  - Documenting the research process
  - Talk with other researchers

Ethical issues and concerns

- Informed consent
  - What, who, why, how
  - Written vs. verbal
- Confidentiality
  - Privacy
  - Use and storage of data
- HREC approval
  - Who to call
Limitations

- Use of generational profiles
  - Tend to obscure differences in experiences
  - Difficult to predict values of a generation that is still ‘emerging and evolving’ (Huntley 2006)
- Purposive sampling
  - Not representative of all generation Y, or all public health graduates
- Possibility of interviewer effect
  - Researcher as peer and prospective employer
- Generalisability of results
  - Study is not a measure of prevalence of experiences

Benefits

- Contribute to unique empirical research
- Potential to influence
  - Design of academic programs
  - Transition to professional practice
  - Employment opportunities and conditions for public health graduates

Graduand role in the study

- 3 x 45 minute interviews
  - Pre-graduation
  - Post graduation – 6 and 18 months
- Interim contact to
  - Clarify details of interviews
  - Update on professional development opportunities open to participants
  - Provide career advice where wanted

Incentives

- Transition to work seminar
- Coaching and mentoring
- Professional development
  - Launches
  - Seminars
  - Meet public health leaders
  - Private tours and briefings
  - Be “a fly on the wall” at strategic meetings
  - Local and national

Status and challenges

- Phase 1 fieldwork (T1)
  - 17 graduate participants
  - Interviews completed and transcribed
  - Write up of introductory chapters of thesis
  - Analysis of interviews
  - Set up of learning and development events
  - Preparation for phase 2 fieldwork (T2)
  - Recruitment
  - Discussion guide
- Challenges
  - Retention to study
  - Iterative nature of qualitative research
  - Need to alter methods as research progresses
  - Finding novel ways of engaging participants in the research process
  - Maintaining awareness of influence of personal beliefs and values

Questions
GRADUANDS—TIMES 1—IN-DEPTH INTERVIEW GUIDE

INTRODUCTION (5 MINUTES)

- As per information sheet
  - Interviewer and aim of study
  - Privacy of discussions
  - Permission to record
  - Free to exit interview and study at any time no questions asked
  - Who to ask if they have questions about the study (me, D’Arcy, HREC)

PARTICIPANT DATA (5 MINUTES)

- Age
- Gender
- Postcode
- Confirm enrolled in BHSci and graduating in 2008
- Prior study and work experience

THEMES TO EXPLORE (30 MINUTES)

Choice of degree
- Probe influences on choice (peers, parents, other)
- Motivations and values that vocational choice reflects

Career goals (aspirations and doubts)
- Probe short vs. longer term goals
- Explore type of job role and benefits seeking (immediate vs. delayed; intrinsic vs. extrinsic; material vs. philanthropic)

Expectations of the workplace/employers
- Workplace conditions and culture, management and decision-making, autonomy, ongoing professional development, promotional opportunities,
- Probe basis for expectations (personal networks, past work experience, other)

Perceptions of generation Y and likely contribution to working life
- Do you see any differences in how your generation will approach work and career in 25 years time compared with what you observe of the older generation today?
- What will be the differences?
- How do you explain the reasons for these differences?

What would be their ideal job and why?

Preparedness for work
- Probe how job ready and confident they feel
- How easy or difficult they expect it will be to find the type of work they want
CLOSE (5 MINUTES)

- Thank for taking part in the interview
- Permission to contact (and how best to do so)
  - if need to clarify points raised in the interview
  - Give them the opportunity to update on contact details if likely to change
  - keep up-to-date on progress of research
  - alert to professional development opportunities that may interest them
- Any questions?

CONSIDERATIONS

- Themes explored are consistent with aims, objectives and research questions the study aims to address, namely values, motivations and career aspirations of generation Y (as typified by generational studies)
- Participants are not constrained by the guide, but encouraged to raise other issues they perceive as relevant
NAME:

CONTACT DETAILS (EMAIL & MOBILE PHONE NUMBER):

AGE:

GENDER:

POSTCODE:

CONFIRM ENROLLED IN BHSci AND GRADUATING IN 2008:

PRIOR STUDY AND WORK EXPERIENCE:

CHECK:

Provided and discussed information sheet on the study

Confirmed participation is voluntary and able to withdraw at any time

Gave consent to record interview
Table X: Summary of participant attributes @T1

<table>
<thead>
<tr>
<th>Cases</th>
<th>Age</th>
<th>Degree</th>
<th>Early job offer</th>
<th>Gender</th>
<th>Medicine preference</th>
<th>Prior or deferred study</th>
<th>Sector preference</th>
<th>SEIFA Decile</th>
<th>Vocational work experience</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grad1</td>
<td>20</td>
<td>BHSci</td>
<td>Other</td>
<td>Male</td>
<td>No</td>
<td>No</td>
<td>No preference</td>
<td>9</td>
<td>Practicum</td>
</tr>
<tr>
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1 Preferences evenly distributed: most keen to gain experience and work in a pleasant work environment, sector was of less importance. All the same, most had formed opinions about the various sectors largely based on hearsay or limited first or second-hand experience [appeal of government and private – larger bureaucracies perceived as offering more opportunities for social interaction, greater variety of experience and job security: no surprise therefore that larger NGOs were seen as more appealing than smaller NGOs among those who expressed favourable opinions of work in this sector]

2 Started another undergraduate course at | before enrolling in the BHIM at | | | | |

3 Completed one year of under-graduate medicine at | |

4 Took a year off study on completion of TEE | |

5 Completed one year of a Bachelor of Science ( | | ) at | |

6 Not seeking to work in commerce – studies in commerce seen as providing useful knowledge and skills to have in the workplace | |

7 Deferred studies one year to undertake Rotary Exchange to | | | | |

8 Started a number of other undergraduate courses at | and | before enrolling in the BHSci/Comm at | |
The Graduands – Looking forward
Report on preliminary findings of interviews with graduands

Denise Sullivan, PhD Candidate
August, 2014

Agenda
• Update on progress
• Share preliminary findings
• Answer questions
• Talk about next stage in the project
  – Fieldwork planned and timing
  – How you can help, take part

Phase 1 of the research
• Aimed to explore
  – Why health?
  – Career aspirations
  – Influences
  – Thoughts about Gen Y
• Circumstances
  – Endings in beginnings
  – The novice interviewer
  – Developing trust

Perth, WA – 2008-09
• Speculation about future skills shortages
• Preoccupation with generational profiles
  – Work ethic
  – Career expectations
• Advent of the GFC
  – Job losses
  – Government budget cuts
  – Delays in start of major infrastructure projects

Results – Choice of degree
• ‘I originally wanted to do medicine’
  – ‘I actually started out in medicine’
• ‘I did want to do physio’
• ‘I would have liked to do nursing, but I have a really bad phobia of needles’
• ‘The only other thing I had my heart set on was doing an arts degree to study languages’
• ‘Well I started off doing a different degree’
  – ‘…and I didn’t really like it; that was natural resource management’
  – ‘I didn’t mind commerce – it was a little bit dry’
• ‘That’s a story and a half…’

Results – Desire to make a difference
• ‘I was always attracted to health because I always wanted to make a difference. I figured that health was one area where you really could.’
• ‘You do get satisfaction out of helping others’
• ‘I still wanted that underlying meaning, purpose in my work.’
• ‘You can make a difference to a large number of people.’
• ‘Health science has a greater understanding of all the different ways that you can influence health; social change and smaller things that can make a huge difference that aren’t necessarily just medical.’
• ‘To be able to leave your own mark through creativity….it’s not yours per se but part of you is in it, that’s making the difference’
Results – Motivations for choice of degree

- ‘Health has always been something that really interested me’
  - ‘But I knew I didn’t want to do anything hands-on’
- ‘I didn’t want to waste my high TER’
- ‘I thought it would also be a good stepping stone … to medicine’
  - ‘I had it in my mind as a back-up if I didn’t get in, and I didn’t get in.’
- ‘I wanted something broad because …’
  - ‘I didn’t know exactly what I wanted to do.’
  - ‘I got to cover a lot of my interests at once’
  - ‘To make it a bit more exciting’
- ‘It’s very flexible, you can go out and not only work in research, but …’
- ‘I wanted a change’

Results – Influences on choice of degree

- ‘My parents were pretty big influences’
  - ‘My grandfather was a doctor … he made me think something with the option for a bit more diversity would be good’
- ‘Because my brother was also doing health science’
- ‘My school … because it would look good for the school’
- ‘Speaking to as many people as possible’
- ‘What the university could offer’, ‘the prestige that goes along with [the university]’, ‘proximity to home’, ‘it had a good social scene’
  - ‘And the fact that it was within the Faculty of MedDent’
- ‘I ended up stumbling into the Health Science [talk]’
  - ‘LR was presenting. She’s quite charismatic.’
- ‘I just looked through the list of courses …’

Results – Likes and dislikes about degree

**Liked**

- ‘It’s so broad’
- ‘It was quite well-rounded’
- ‘It also allows your creativity’
- ‘Learning about the health system’
- ‘The biostatistics and epidemiology, the case-mix and clinical classification, the coding …’
- ‘Like a family’

**Disliked**

- ‘I love that I did Anthropology, but it’s a dead end as far as a job goes’
- ‘I work a full day Saturday and a full day Sunday and I’ve got three other jobs while doing my practicum’
- ‘A lot of students struggle with it’
- ‘I don’t feel I did health that much until my final year’

Results – The new beginning

- ‘First of all I’ve got to get permanent residency’
- ‘We’re given so many options … but at the same time that can be quite daunting’
- ‘… what to apply for’
- ‘It would be nice to have a direction really’
- ‘I know what I’ve enjoyed studying but in practice they could be totally different’

Results – A time to explore …

- ‘I am not going to get a wow job out of graduation’
- ‘I don’t feel that I am at a stage where I can be too picky just yet’
- ‘I’d just like to try as many areas as I can and just see what I like and what I don’t like … I don’t have anything set in mind yet. I guess I’m just waiting to stumble upon it.’
- ‘I’m not really looking that far ahead’
  - ‘I imagine in [a few months’ time] I’ll probably have a completely different view of things’
  - ‘I can see that there would be a few career changes’
- ‘Research’, ‘management’, ‘consulting’, ‘further qualifications’
  - ‘Many travelling and work’, ‘depending on how my job goes’
  - ‘Doctors without Borders’

Results – Influences on ideas about career

- ‘… people tell you about their jobs but you don’t really know what it’s like until you actually go out there and do it yourself basically.’
  - ‘Opens my eyes to what sorts of jobs are out there’
  - ‘Oh is that where I am going to be?’
- ‘The fruits of my practicum have been very large’
- ‘If this is what they’re like in a 10 minute presentation to us, how is it going to be working for them?’
- ‘… you kind of really have to base [it] on what you enjoy studying as to what you think you’ll do in the future.’
Results – Fields of interest

Interests
- ‘the clinical side of things’
  - ‘you would take a lot of that knowledge to any other job in the health sector’
- ‘a management role’
  - ‘there’s always something happening’
  - ‘how things are run’
  - ‘that allowed me to use all my qualities’
- ‘health economics’
- ‘health promotion’
  - ‘the benefits of prevention’, ‘creativity’
  - ‘a sense of satisfaction’, ‘interaction’
- ‘people research’

Disinterests
- [Health promotion]  
  - ‘I know it’s really beneficial, and I think it’s fantastic people do it, but it’s a bit flimsy for me.’
  - ‘depending on what’s out there’
- [Research]  
  - ‘not lab research’
  - ‘you could be pipetting all day’
  - ‘I need interaction’

Results – Views on sectors

• Government
  - ‘you can move within it ... there are options ... it’s so broad’;
  - ‘stability’
  - ‘structured and process oriented’; ‘hard to get things done’;
  - ‘stagnant’
• NGO
  - ‘a different culture [to] the workplace ... more committed and passionate about their work’;
  - ‘helping the community’
  - ‘funding’, ‘job security’, ‘promotional opportunities’, ‘limits of’
• Private
  - ‘a good culture’, ‘better access and to more resources’, ‘more training and more development really quickly’, ‘the money’
  - ‘they had to work very hard, probably more so than I’ve had to here’;
  - ‘you’ll end up doing less’, ‘lose sight of the bigger picture’, ‘risk of’

Results – Expectations of work

• ‘The things that for me make a difference are the things that you can’t judge when you go into an interview so much.’

• Work that is
• A work environment that is
  - ‘comfortable’, ‘friendly’, ‘supportive’, ‘somewhere I felt that I was valued’;
  - ‘what if I’m stuck in a place where everybody is horrible?’
• Supervisors / managers who are
  - ‘genuine and upfront and open and honest’, ‘available’ and ‘not afraid to let you have a go’
  - ‘I guess seeing qualities that I feel I have, that care and the passion for the topic. I guess I’m more attracted to those sorts of people.’

Results – Financial vs non-financial benefits

• On financial benefits
  - ‘You have to be realistic and ...understand you’re a graduate ...’
  - ‘something that justified me studying’
  - ‘I pretend I want to feel I was getting enough to get by’;
  - ‘The worry at the moment is that I’ll never buy a house’
• On non-financial benefits
  - ‘flexible working hours’, ‘work-life balance’
  - ‘I can push further down my career pathway to have a tenby’;
  - ‘good IT support’, ‘recognition’, ‘opportunities for progression’
• Committed – if the conditions are right
  - ‘meaningful work and a good atmosphere ... would keep me at a place’
  - ‘aims and vision ... aligned with things that you believed in’
  - ‘If I’m interested in my work I’ll push on’

Results – Optimism about finding work

• ‘I wouldn’t say that I’m actually looking for jobs at the moment’

• ‘A lot of people think that it is not that hard to find a job’

• ‘I think people are just basically expecting it to take a bit longer than they thought. No-one is going to be stressing too much about it.’

• ‘it depends how picky you are ... we’ve got to be realistic’

• ‘There is definitely nervousness because you don’t know exactly where you’re going to end up and whether the first position you gain is going to be that one that you’re going to stick with.’

Results – Perceptions of job readiness

• ‘I’m ready to work but still I am very worried about finding a job I want to do.’

• ‘[My coursework has] given me the confidence to take on new learning experiences ... and it’s equipped me with the basic skills’

• ‘[the university] has a very good professional reputation for high quality graduates, especially in health science’

• ‘and you’ve got that IT savvy side to it ... so you’ve got that edge that a lot of employers are looking for’

• ‘The practicum we did at the end of our degree helped a lot.’

• ‘the [School] is quite proactive in telling students what’s going on in the job scene and stuff’
Results – Thoughts about Gen Y type

- ‘It’s usually quite negative.’
  - ‘we live at home ‘til we’re 35’, ‘Don’t like to work’, ‘on Facebook all day’
- ‘It’s really a stereotype … My peers and my classmates … they’re definitely not like that, they’re just the opposite.’
  - I think people that do this kind of course do it because they want to do something good rather than just doing it for themselves.”
- ‘I guess we recognise some parts of ourselves.’
  - ‘I don’t want to say we’re disloyal … just that we want more experiences.’

On employment of
- They don’t have a choice do they … more important is the skill shortage, but there’s just a general people shortage as well.

Results – Contribution to public health

- As employees
  - ‘potential to stick at it’
  - ‘emphasis on work-life balance’
  - ‘but a hardworking generation’
  - ‘more aware of priority … issues’
  - ‘able to integrate a lot of different aspects of health’
  - ‘that balance of understanding public health, a bit of health economics, a bit of epidemiology and having that broader range of thought’
- As leaders
  - ‘build on what’s … been started’
  - ‘a big focus on chronic diseases … with a different slant maybe’
  - ‘primary prevention’, emphasis on
  - ‘different problems to tackle’
  - ‘more efficient … evidence-based’
  - ‘be a large slant in the things we try and get done’
  - ‘issues would be as gradual’
  - ‘collaboration’
  - ‘cultural awareness … sensitivity … to minority groups’
  - ‘making people responsible for their own choices’
  - ‘the technological stuff … ways of getting to people’

Key findings – Looking for differences

- Among participants
  - ≈ Age, gender, SEIFA decile, prior or deferred studies, vocational work experience, receipt of early job offers, favoured sector for employment
  - √ Current course of study, preference for medicine as a course of study
  - √ Student visa
- As Gen Y
  - ‘Altruistic; valuing of flexibility and choice, shared values, teamwork, mentoring and empowering leadership, drive and ambition, influence of family and friends’
  - ‘Selfish, lazy, fickle, unrealistic expectations’
- New beginnings
  - ‘Optimism and apprehension’
  - ‘Getting off to a good start’

Key findings – On the brink of a career

- ‘Making a difference’ – a core value driving study and career choices
- A blend of idealism and pragmatism
  - ‘Realistic about career prospects’
  - Early career a time to acquire knowledge and experience
  - ‘Hopeful for a career that offered’
  - ‘Meaningful work, and a collegial and supportive work environment’
  - ‘Supervisors and managers they can admire and respect’
  - ‘Adequate remuneration, opportunities to advance, work-life balance’
  - ‘Potential to stick at a career in public health’
- Positive about the future
  - ‘Studies have prepared for a new beginning’
  - ‘Breadth, vocational context and relevance, exposure to community of practice’
  - ‘Ideas about future career in flux, but forming before entry into workforce’

Looking forward

- ‘I’m not going to just waste away my time just working for the sake of working. I want it to be working for something. That’s not necessarily money…’

Exploring
- Career beginnings and development
- Career changes and choices
- Surrounding conditions
- What has mattered most
- Thoughts about future career
- Accord with Gen Y

Questions
C  PHASE 2—GRADUATE INTERVIEWS (T2)

- Semi-structured interview guide, individual
- Employment history post-graduation—2009 to 2013, template
- Table Y: Summary of employment history post-graduation—2009 to 2013 @T2
- Preliminary results and analysis, PowerPoint x1
GRADUATES—TIMES 2—IN-DEPTH INTERVIEW GUIDE

INTRODUCTION (5 MINUTES)

- As per information sheet (recap of information provided at T1)
  - Purpose of study, privacy of discussions, voluntary participation
  - Highlight any changes to method since T1
  - Free to exit interview and study at any time no questions asked
  - Who to ask if they have questions about the study (me, D’Arcy, HREO)
  - Permission to record
- Encouraged to raise other issues they perceive as relevant

EMPLOYMENT HISTORY POST GRADUATION DATA SHEET (5 MINUTES)

- For the period 2009–2013: sector, field, position and company

THEMES TO EXPLORE (30 MINUTES)

What was it like reading our last interview? [Looking back]
- Mull over hopes and doubts, motivations and values, career preferences expressed then

What’s happened since then? [Appraisal of the past]
- Probe career course over the last 4 ½ years
- Explore changes in attitudes and expectations, choices and their reasons
- Reflect on experiences of transitions from student–professional, first job-to-next job …

What has work been like for you so far? Prompt for [Critical domains]
- Workplace conditions and culture
- Job roles and satisfaction
- Professional development
- Mentoring and support
- Perceptions of own competence, ‘job readiness’, own power to influence
- Developing a professional identity / becoming part of a professional community
- Awareness of and influence of personal and social-political-economic conditions

How have experiences over the last 4 ½ years? [Working out what matters]
- Shaped ideas of a career in health
- Clarified / caused to reconsider what matters most in making a career in health (values, motivations and aspirations): ‘what have you learned about yourself?’
- ‘Making a difference’ – form and function

In thinking about the future of the public health system [Looking forward]
- What has it been like for you as a young professional especially? (expectations / preconceptions based on notions of generation Y / graduates)
- What has mattered most in ‘getting off to a good start’? Prior work / life experience / people and places
- What advice would you give to educators and employers in planning for the future?
- Views on restructure of UWA undergraduate programs
- Thoughts about future career / contribution of your generation based on early experiences
CLOSE (5 MINUTES)

- Thank for taking part in the interview
- Permission to contact (and how best to do so)
  - Share interview transcripts for review and comment
  - Seek opinions and advice on issues or questions the research may raise
  - Give opportunity to update on contact details if likely to change
  - Keep up-to-date on progress of research
  - Alert to professional development opportunities that may be of interest
- Questions, comments, tips?

CONSIDERATIONS

- Themes explored are consistent with aims, objectives and research questions the study aims to address, namely values, motivations and career aspirations of generation Y (as typified by generational studies)
- This interview picks up on where we last left off …
- Participants are not constrained by the guide, but encouraged to raise other issues they perceive as relevant

PREVIOUS INTERVIEW (T1) EXPLORED:

- Reasons for, influences on choice of degree, career goals
- Expectations of future work and employers
- Perceptions of preparedness for work
- Awareness of and thoughts about generation Y social commentary
- Impressions of their generations likely contribution to public health

T2 INTERVIEW TO EXPLORE:

- Experience of the transition to work and making a career in public health
- Changes in attitudes, expectations and choices over time
- Surrounding conditions and their influence (personal and social)
- What has mattered most in getting off to a good start
- Thoughts about future career based on early experiences
## Employment History Post-Graduation — 2009 to 2013

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**Legend:**
- G = Government organisation (Commonwealth, State)
- P = Private enterprise
- N = Non-government organisation
- A = Academia
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<tr>
<td>G7</td>
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<td>38</td>
<td>16</td>
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<td>G8</td>
<td>Y</td>
<td>3</td>
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<td>28</td>
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<td>G9</td>
<td>Y</td>
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<td>Y</td>
<td>Y</td>
<td>Y (Finance)</td>
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<td>N</td>
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<tr>
<td>G10</td>
<td>Y</td>
<td>4</td>
<td>2</td>
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<td>42</td>
<td>12</td>
<td>4</td>
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<td>Y</td>
<td>Y</td>
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<td>Y</td>
<td>Y</td>
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<tr>
<td>G11</td>
<td>Y</td>
<td>4</td>
<td>4</td>
<td>2 (0.8/0.2 FTE)</td>
<td>26</td>
<td>11</td>
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<td>-</td>
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<td>Y</td>
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<tr>
<td>G12</td>
<td>Y</td>
<td>5</td>
<td>3</td>
<td>-</td>
<td>36</td>
<td>6</td>
<td>12 months (work)</td>
<td></td>
<td>3</td>
<td>1</td>
<td>1</td>
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<td>Y</td>
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<td>Y</td>
<td>Y</td>
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<tr>
<td>G13</td>
<td>N</td>
<td>7</td>
<td>5</td>
<td>2 (FT study, casual tutor)</td>
<td>54</td>
<td>4</td>
<td>4 months (3xtrips, recreation)</td>
<td></td>
<td>1</td>
<td>1</td>
<td>5</td>
<td>-</td>
<td>-</td>
<td>Y</td>
<td>-</td>
<td>Y</td>
<td>Y</td>
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<tr>
<td>G14</td>
<td>N</td>
<td>5</td>
<td>4</td>
<td>-</td>
<td>18</td>
<td>8</td>
<td>-</td>
<td>3</td>
<td>2</td>
<td>-</td>
<td>-</td>
<td>Y</td>
<td>-</td>
<td>-</td>
<td>Y</td>
<td>Y</td>
<td>Y</td>
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<tr>
<td>G15</td>
<td>Y</td>
<td>4</td>
<td>4</td>
<td>-</td>
<td>18</td>
<td>8</td>
<td>10 months (3xtrips, recreation, working holiday)</td>
<td></td>
<td>1</td>
<td>3</td>
<td>-</td>
<td>-</td>
<td>Y</td>
<td>Y</td>
<td>-</td>
<td>Y</td>
<td>-</td>
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<tr>
<td>G16</td>
<td>N</td>
<td>5</td>
<td>3</td>
<td>2 (2x0.5 FTE)</td>
<td>36 (SCGH)</td>
<td>18</td>
<td>-</td>
<td>2</td>
<td>-</td>
<td>1</td>
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<td>Y</td>
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<td>Y</td>
<td>Y</td>
<td>Y</td>
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<tr>
<td>G17</td>
<td>Y</td>
<td>4</td>
<td>2</td>
<td>3 (overlapping RA, project administration roles)</td>
<td>39</td>
<td>10</td>
<td>3 months (work)</td>
<td></td>
<td>1</td>
<td>2</td>
<td>-</td>
<td>-</td>
<td>Y</td>
<td>Y</td>
<td>-</td>
<td>Y</td>
<td>-</td>
</tr>
</tbody>
</table>
1 Participant accepted into a Graduate Program prior to graduation or practicum placement lead to offer of employment by the host agency that was taken up

2 Significant periods of travel, and study, are all counted as ‘jobs’ for the purpose of capturing changes in primary occupation over the period of research; job changes could also occur within an agency or through movement to another agency; in some instances participants were working in concurrent part-time positions

3 Maximum length of service with an individual employer, measured in months and approximate

4 Minimum length of stay with an individual employer, measured in months and approximate: note, in some instances positions had only recently been commenced at time of T2 interview

5 G=Government (Local, State, Federal); P=Private; N=NGO; A=Academia (includes full-time study); in some instances participants had cycled through job changes within a sector

6 Subsequent positions have been largely promotional, that is into roles of greater seniority and responsibility

7 Subsequent positions have been largely at similar levels, that is into roles that have broadened knowledge and experience of public health

8 Concurrent jobs in entertainment / arts industry; number not known

9 Concurrent jobs in retail sector to support self and self-funded studies
The Graduates – the transition to work
Report on preliminary findings of interviews with graduates
Denise Sullivan, PhD Candidate
September, 2015

Agenda
• Update on progress
• Share preliminary findings
• Answer questions
• Talk about next stage in the project
  – Fieldwork planned and timing
  – How you can help, take part

Phase 2 of the research
• Aimed to explore
  – The transition to work
  – Changes in hopes, aspirations, careers
  – Surrounding conditions and their influence
  – What mattered most to making a good start
  – Thoughts about future career
  – Accord with Generation Y
• Circumstances
  – Developing careers
  – Juggling commitments
  – Picking up where we left off …

Perth, WA – 2009 to 2013
• A relentless onslaught of man-made and natural disasters
• Global political and financial market turmoil post the GFC1
• An uncertain labor market: jobs growth in some sectors constrained in others2
• Erosion of image of government as a model employer3
• Fractious national Australian and state politics
• Significant achievements and scandals in public life (corporate, political, sporting)
• Increasing cynicism and distrust of institutions and public figures
• Continued preoccupation with the generations, their differences and implications for industry sectors (consumer / employee behaviors)

Results – Mobility, 2009 to 2013

<table>
<thead>
<tr>
<th>No. of employers</th>
<th>No. of appointments</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>7%</td>
</tr>
<tr>
<td>3</td>
<td>13%</td>
</tr>
<tr>
<td>4</td>
<td>27%</td>
</tr>
<tr>
<td>5</td>
<td>40%</td>
</tr>
</tbody>
</table>

Results – Career patterns, 2009 to 2013

<table>
<thead>
<tr>
<th>Nature of trajectory</th>
<th>Constancy of employment in health</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vertical</td>
<td>53% Never 20% Never</td>
</tr>
<tr>
<td>Horizontal</td>
<td>47% Some 60% Mostly</td>
</tr>
<tr>
<td>7</td>
<td>13% Always 13% Always</td>
</tr>
</tbody>
</table>
Results – Looking back

• 'I didn’t really have an idea about where I wanted to work, what I wanted to do.'
• 'I felt really lost'
• 'I was so wide-eyed and didn’t really know what was coming'
• 'I didn’t realise how difficult finding a job was going to be back then. I thought it shouldn’t be too hard because there are jobs out there.'
  – ‘I imagine that’s true of everybody about to enter the workforce’
  – ‘that’s just part of being young and not really understanding the workforce’
• 'It made me realise how much I had matured... Looking back, I felt I had grown a lot. I guess I’ve got more life experience now'

Results – Reception into working life

• 'I went into a very non-corporate small workplace... I really flourished in that environment'
• 'I had already had a taste from doing a summer internship'
  – ‘...but walking in as a full-time employee was [still] daunting'
  – 'you’re offered support and training and eased into things'
  – 'the people there were a bit busy and... didn’t have a lot of time to... show you around'
  – 'tapers off when you become part of the furniture'
• 'I had a support network of nine other people who were just like me'
  – 'there needs to be some kind of... interim step... a market for... students after they’ve graduated'
• 'I was still in a learning phase'
• 'a lack of supervision'
• ‘this myriad of [just rejections]'
• 'I didn’t have a residency status'

Note to employers

• '[An] open mind about what other skills this person has'
• 'you may not be used to your maximum capacity and you may not enjoy everything you do'
• 'having key staff and supervisors present when somebody starts'
• 'making your expectations really clear early on, and having a chat about your management style'
• 'gradually building up to higher level [tasks] and more responsibility'
• 'spelling things out... [especially things I hadn’t] done before: that was really helpful'
• 'regular communication or catch-ups, even if they’re informal'

Results – Adapting to the work environment

• 'the shock of working full time'
• 'as a new graduate I was always trying to prove that I could do things'
  – ‘...it’s difficult as a younger person going into [an] organisation that can be quite hierarchical'
  – 'I have often thought [I’m] a bit young for this'
• 'the workplace culture...'
  – 'how you fit in with other people, “suddenly I had a manager”'
  – 'at uni you’re given... a lot of direction... whereas in the workplace'
• 'I feel a lot more relaxed now... I’ve formed friendships’, “[an] appreciation for why things happen the way they do”'
• 'I’ve formed friendships, [an] appreciation for why things happen the way they do. I’m developing lot more of a specialty’, [people are coming to me to ask about things], “I’m starting to see the value in [being part of a community of practice]”'

Results – Aspirations satisfied / frustrated

• 'I managed to find the area I wanted to go into through that program'
• 'I woke up every day and enjoy coming to work’
• ‘That’s why I’m in healthcare’
  – ‘it’s more a career rather than a passion now, I think’
  – ‘it’s more abstract than what I thought it would be’
  – ‘it’s much more removed than what I experienced in health promotion’
  – ‘the reality of doing that is very different to the ideal’
• 'This makes a difference... feeling like you’re doing productive work'
  – ‘talking about issues [with] community groups and people on the ground’
• 'that’s also why I enjoy my work so much’
• 'that internal struggle... but having followed a different path'

Results – Making a difference

• 'there needs to be some kind of... interim step... a market for... students after they’ve graduated'
• 'I was still in a learning phase'
• 'a lack of supervision'
• ‘this myriad of [just rejections]'
• 'I didn’t have a residency status'
Results – Career trajectories

- "I fell into [a] placement that’s just snowballed into a potential career"
- "I was so scared of working"
- "I don't feel that need to go somewhere"
- "that's why I'm not too concerned about"
- "it would I even be able to perform"
- "getting out in the community, health and hospital reform: it's a nice tie-in with my [studies]"
- "it was very situational...the direction I thought I wanted to go in had a lot to do with what I'd recently been studying"
Results – Role of mentors

- ‘A sounding board’
- ‘Quite structured’, ‘just happens’
  - ‘understood [what] I was going through’
  - ‘advice on [career],’
  - ‘[created] opportunities for me’
- ‘the mutual benefits’
  - ‘you learn from each other’
  - ‘It’s rewarding’
  - ‘I put my hand up to be a mentor’
- ‘other people have these big dreams for me, but...’

“Let’s try it without the parachute.”

Results – Financial vs non-financial benefits

- On financial benefits
  - ‘I wouldn’t say money is a major motivator’
  - ‘You want to get something back because you have worked hard, but...’
- On non-financial benefits
  - ‘being able to link what you do to a social good outcome’, ‘being happy in the job and surrounded by supportive people’, ‘[my career] development’
  - ‘it’s quite hard to scrape what it is that’s required’
  - ‘flexi-time’, ‘job security’ – ‘I’ve a relaxed attitude’, ‘It is a consideration’, ‘but by the same token if you wanted to get a mortgage or start a family’
- Committed – if the conditions are right
  - ‘it’s really about the culture of the organisation’, ‘I would not move unless I felt I had stopped learning and work ceased to be a challenge’
  - ‘I can’t imagine wanting to work anywhere else [even though] I’m struggling with [some of the limitations of my current position].’

Results – On value of undergraduate studies

- Coursework
  - ‘you got a taste of so many different areas’, ‘a good grounding for what I do now’, ‘the “bedrock for my daily work’
  - ‘a step ahead... just in understanding how the system worked’
- Professional practice / exposure to the health industry
  - ‘the sprinkling of fairy dust... [it set us apart] other graduates’
  - ‘practical understanding of jobs you could go into’, ‘a foot in the door’, helping to form networks, as well
- The role of educators / university in preparing for working life
  - ‘It’s not all about getting ready for the workforce’
  - ‘[Employers]’ ‘responsibility to make sure you’re engaged and supported’
  - ‘the skills set’, ‘setting expectations’ of the transition to work

Results – On new course structure

Pros
- ‘For the first three years you’re kind of just getting used to Uni life’
- ‘depending on what’s taught in the degree(s),’
- ‘What you really need is that passion,’
- ‘passion, – “changing the degree won’t necessarily change someone’s ability to do the work we’re doing’

Cons
- ‘I don’t know that you’ll get as many people doing public health’
- ‘people have to be highly motivated and interested in the topic to do it’
- ‘the industry long term may suffer – because you’re taking that dedicated pool of high quality grads’
- ‘the collegiality brought, as well, in terms of enthusiasm for public health’
- ‘the different skills that they bring’

Results – Back to the future

- ‘I’ve found the niche that I enjoy for the moment’, ’I’m still finding out’
- ‘I’ve thought about doing a Masters’
- ‘I’ve often wondered, will I do this forever and, if not, what could I do’
- ‘I’d like to stay in public health’
- ‘other stuffs important as well’
- And on travel
  - ‘I’ve still there, that isn’t less than does’
  - ‘to do something a bit different’
  - ‘I really enjoyed it and got to see what other areas you could’

Results – Gen Y in the workplace

- NO, not a factor in treatment / working relationships
  - ‘I was accepted as someone who wanted to work and would work’
  - ‘there’s no conflict over our approaches to work or expectations’
  - ‘I think with some people I’ve certainly had to prove myself’
  - ‘I’ve been [working] within health the whole time’
- YES, a factor in treatment / working relationships
  - ‘I’ve faced discrimination in terms of my age on pay issues’
  - ‘it’s not really age that counts as much as experience’
Results – Contribution to public health

- As employees
  - ‘loyal’, ‘proactive, ideas-driven’
  - ‘willing to look at new ideas [and] to try new things’
  - ‘fresh perspective’
  - ‘the variety in our education ... that would be [our] greatest asset’
  - still value ‘a work-life balance’
  - BUT, ‘we work hard and we get the work done’

- As leaders
  - ‘build on the advocacy and other work’ of past generations
  - Persist in tackling ‘obesity and alcohol’, ‘traffic congestion, infrastructure, a growing population, sedentary lifestyles and mental health’
  - ‘challenge the status quo’ aided by... Innovative use of technology ...
  - ‘holistic approach to preventive health, the most cost-effective way to go’
  - ‘innovative use of technology ... to promote public health’ and foster ‘collaboration’
  - A ‘harder line’ on charity toward others
  - Greater interest in ‘civic engagement’

Key findings – Looking for differences

- Among participants
  - ≈ Age, SEIFA decile, prior or deferred studies, vocational work experience, receipt of early job offer
  - √ Gender, course of study, preference for medicine as a course of study, favoured sector for employment

- As Gen Y
  - ≈ Altruistic; valuing of flexibility and choice, shared values, teamwork, mentoring and empowering leadership; drive and ambition; influence of family and friends
  - ≠ Selfish, lazy, fickle, unrealistic expectations

- Making a career
  - = Adapting to environments
  - = Clarifying work values
  - = Building and sharpening a portfolio of portable skills

Findings – Making a career

- A dynamic concept, as much a felt need as an outcome of the times, and characterised by:
  - A movement from exploration of different roles and options through work, travel and volunteering to the honing of a widening portfolio of knowledge and skills and becoming part of a community of practice
  - A need for flexibility and employability in a more volatile labour market
  - Greater certainty as to work values, what’s central to job satisfaction
    - indicative of gradual social changes that have occurred over time and life and career stage: less so of generational type
  - Studies, induction and professional development
    - Have power to enthuse – an already primed cohort – with a lifelong passion and commitment to public health
    - Effectiveness of, reliant on elements / synergies between the domains

Key findings - Implications

- The importance of open minds and communication to workforce planning and development
  - Eschewing ideas of generation as a problem
  - Hearts and minds as critical to the vitality of workforce as size and skills

- A more seamless nexus between academia and industry
  - A vocational context for learning

- Unpicking the concept of career
  - An individual and social project
  - The role of prophets (inspired teachers / leaders) and mentors
  - Developing a portfolio of portable knowledge and skills
  - Making a living wage vs. making a career

Tips on workplace induction - employers

- A realistic assessment of the graduates’ knowledge and capabilities
- A program of work that gradually increases the complexity of tasks and responsibilities allocated, ensures graduates are fully occupied and takes into account additional skills they may bring
- Availability and ready access to staff with whom graduates will be working
- Provision of mentoring and buddy systems
- Clarity as to expectations and roles of the workplace
- Appropriate levels of supervisory support and guidance, especially when allocating new tasks and responsibilities
- Regular communications and catch ups, informal and informal, to monitor progress, make certain issues or questions are dealt with in a timely fashion and provide feedback and encouragement

Tips on course design - educators

- Breadth, flexibility and vocational relevance and context of courses of study
  - Noting the distinction between a course that has a vocational context and a vocational course
- Culture and cohesiveness of the academic community linked to courses of study
  - And inclusive of students and staff; and the latter’s professional networks
- Early and ongoing exposure to industry leaders and settings
- Profile, standing and connectedness of academic staff
  - And capacity to infuse students with a passion for public health
  - Not necessarily contingent on a cadre of larger-than-life personalities
- A mutually reinforcing system of curricula, activities, people and incentives
  - That engage and inspire students
Tips on attracting / retaining

**Attracting**
- **Massage**
  - Making a difference, becoming part of a bigger movement of like-minded people for change
- **Medium**
  - What you say and do
  - How they see you, and public health
- **Keeping it real**
  - Not for the faint-hearted
  - Challenges and obstacles
  - Celebrating the small and the big wins
  - What energises and sustains us

**Retaining**
- **Work**
  - Varied, at times demanding, requires individual and collective efforts
- **Culture**
  - Collegial, safe, promotes learning
- **Management**
  - Accessible, connected, competent, respectful, encouraging, shows trust
- **Benefits**
  - Fair pay, flexibility, career development
  - Open mind, considered communication
  - Alignment of values – and a ‘line-of-sight’

Phase 3 of the research

**Aims to explore**
- Relevance of findings to teaching and practice
- Bearing of external events
- Reflections on and of Gen Y

**Circumstances**
- Quickening pace of change
- Growing uncertainty of policy, political and economic environments
- The sense of an ending… and the next new beginning…
**D Phase 3—Educator and Employer Focus Groups (T3)**

- Email invitations, and reminders
- Semi-structured discussion guide, focus groups
- Employers / Educators—times 3—data sheet
- Table Z: Summary of participant attributes @T3
- Preliminary results and analysis T1 and T2, PowerPoint x2
- Preliminary results and analysis T3, PowerPoint x1
Dear colleague

Please accept this personal invitation to take part in a focus group in which I will present the results of my doctoral research on the subject above. The Information Sheet attached and link below briefly describe the purpose of the study in more detail.


You have received this invitation because of your standing and first-hand knowledge of the education and training of public health undergraduates. Some of you are known to me in my full-time role as Director Chronic Disease Prevention with the WA Department of Health, and others have been recommended to me by colleagues.

Invitations have been issued to a wide range of people drawn from various, relevant teaching areas within your School of Population Health / Public Health.

I do hope you are able to accept this invitation as your perspective on the research findings will be most helpful in ensuring its relevance for policy and practice.

The focus groups are planned for early September, and a link to a Doodle Poll and further background information will be provided prior to the focus group, should you accept this invitation.

If you are unable to accept the invitation, but feel another colleague may be more appropriate, please discuss with me before forwarding on this email. For your information, the criteria for the selection of tertiary education sector representatives is outlined below:

- Responsible for teaching of undergraduate Health Science students for >2 years
- Input / role in undergraduate course design and curricula development
- Knowledge of issues affecting the tertiary education sector
- Willingness to participate in a focus group comprising peers from own and other WA universities
- Commitment to maintaining confidentiality of research documentation shared

Should you have questions about the study and your involvement, please don’t hesitate to contact me. Current contact details are provided in the auto-signature below.
Kind regards

Denise

Denise Sullivan  
PhD Candidate  
School of Population Health • M431, Perth WA 6009 Australia  
T +61 8 6488 7687 • M +61 427 808 346 • E denise.sullivan@uwa.edu.au
Dear colleagues

This email is by way of a quick reminder about the focus group set for 2.30 pm next Monday (note no change to venue but shifted to the Conference Room on the 1st Floor).

In order to make best use of your time and the time we have for the focus group, I have provided the link below to a video presentation on the first phase of my research, which I won’t cover in the focus group. I’ve also attached a PDF of the PowerPoint presentation used in the video presentation (notes version). At the very least review the PDF if you are pushed for time!

https://youtu.be/wzrv5Vkxyog

In the focus group, I will briefly recap on the main findings of T1, but the focus will be on the results of my interviews with the graduates 4 to 5 years later and thoughts on findings and implications for attraction, recruitment and retention of public health graduates.

STOP PRESS:

- Light refreshments will be provided on the day
- I have also arranged to cover the costs of beverages (coffee, tea, hot chocolate, chai) with Rocketfuel Coffee Roasters, which is across the road from the UWA Nedlands Campus (just up from the traffic lights at the Hampden Road / Stirling Highway intersection). I have provided a list of people attending the focus group. All you need to do is give your name and advise you are attending Denise Sullivan’s focus group and place your order. BUT DON’T BE LATE TO THE FOCUS GROUP. It needs to start 2.30 pm sharp!
- Let me know if you need me to arrange access to staff parking on the day (red bays)

Looking forward to the group on Monday!

PS. Note – mobile number 0427 808 346 – if need to make contact with me on the day.

Kind regards

Denise

Denise Sullivan
PhD Candidate
School of Population Health • M431, Perth WA 6009 Australia
Dear colleague

Please accept this personal invitation to take part in a focus group in which I will present the results of my doctoral research on the subject above. The Information Sheet attached and link below briefly describe the purpose of the study in more detail.


You have received this invitation because of your standing and first-hand knowledge of the recruitment, supervision and career development of new graduates and early career professionals. Some of you are known to me in my full-time role as Director Chronic Disease Prevention with the WA Department of Health, and others have been recommended to me by colleagues.

Invitations have been issued to a wide range of people representing the diversity of sectors in which graduates with public health or combined degrees find employment.

I do hope you are able to accept this invitation as your perspective on the research findings will be most helpful in ensuring its relevance for policy and practice.

The focus groups are planned for early September, and a link to a Doodle Poll and further background information will be provided prior to the focus group, should you accept this invitation.

If you are unable to accept the invitation, but feel another colleague may be more appropriate, please discuss with me before forwarding on this email. For your information, the criteria for the selection of employer / industry sector representatives is outlined below:

- Responsible for recruitment and supervision of new graduates / early career health professionals for >2 years
- Input / role in mentoring of new graduates / early career health professionals
- Knowledge of issues affecting the health / your industry
- Willingness to participate in a focus group comprising peers from own and other WA agencies (incl. public, private, NfP, academia / research, peak professional bodies)
- Commitment to maintaining confidentiality of research documentation shared

Should you have questions about the study and your involvement, please don’t hesitate to contact me. Current contact details are provided in the auto-signature below.
Kind regards

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Dear colleagues

This email is by way of a quick reminder about the focus group set for 8 am this Friday.

In order to make best use of your time and the time we have for the focus group, I have provided the link below to a video presentation on the first phase of my research, which I won’t cover in the focus group. I’ve also attached a PDF of the PowerPoint presentation used in the video presentation (notes version). At the very least review the PDF if you are pushed for time!

https://youtu.be/wzrv5Vkxyog

In the focus group, I will briefly recap on the main findings of T1, but the focus will be on the results of my interviews with the graduates 4 to 5 years later and thoughts on the findings and their implication for attraction, recruitment and retention of public health graduates.

STOP PRESS:

- Light refreshments will be provided on the day
- I have also arranged to cover the costs of beverages (coffee, tea, hot chocolate, chai) with Rocketfuel Coffee Roasters, which is across the road from the UWA Clifton Street Campus (just up from the traffic lights at the Hampden Road / Stirling Highway intersection). I have provided a list of people attending the focus group. All you need to do is give your name and advise you are attending Denise Sullivan’s focus group and place your order. BUT DON’T BE LATE TO THE FOCUS GROUP. It needs to start 8 am sharp!

Looking forward to the group on Friday!

PS. Note – mobile number 0427 808 346 – if need to make contact with me on the day.

Kind regards

Denise

**Denise Sullivan**  
PhD Candidate  
School of Population Health • M431, Perth WA 6009 Australia  
**T** +61 8 6488 7687 • **M** +61 427 808 346 • **E** denise.sullivan@uwa.edu.au
EMPLOYERS / EDUCATORS—TIMES 3—FOCUS GROUP DISCUSSION GUIDE

INTRODUCTION (5 MINUTES)

- As per information sheet (purpose of study, privacy of discussions, voluntary participation, consent to record)
- Encouraged to raise other issues you perceive as relevant

BRIEF RECAP OF T1 RESULTS AND PRESENTATION OF T2 (30 MINS)

THEMES TO EXPLORE (50 MINUTES)

A. General reflections on the graduates’ individual and shared journeys

B. Relevance of findings
   - Correspondence with own experiences / views of
   - Course design / academia-industry linkages / approach to attraction-retention

C. Bearing of external events – past and future
   - Economic, political
   - Organisational (academia, industry)

PROMPTS – EDUCATORS
1. Influence of changes in courses and modes of delivery
2. Value of greater exposure to different sectors in professional practice (noting differences in culture, competencies and understandings looked-for) in smoothing transition to work
3. Differences between Gen Y students / graduates and previous generations
4. Alignment between courses and industry requirements
5. Job readiness of graduates - employer expectations, fairness of
6. Appropriateness and usefulness of recommendations arising out of the research

PROMPTS – EMPLOYERS
1. Experience of work with graduates / early career professionals
2. Induction of graduates as new employees, approaches
3. What has mattered most to graduate employees – meaningful work, work environment, career progression
4. Alignment between courses and industry requirements
5. Job readiness of graduates - employer expectations, fairness of
6. Appropriateness and usefulness of recommendations arising out of the research

CLOSE (5 MINUTES)

- Thank for taking part in the focus group
  - Permission to contact (clarify points raised, update on end of the research)
CONSIDERATIONS

- Themes explored are consistent with aims, objectives and research questions the study aims to address, namely values, motivations and career aspirations of generation Y (as typified by generational studies)
- These focus groups will bring other perspectives to the study, and challenge my own interpretation of the data and thoughts as to its relevance to the field
- Participants are not constrained by the guide, but encouraged to raise other issues they perceive as relevant

T1 INTERVIEWS WITH GRADUATES EXPLORED:

- Reasons for, influences on choice of degree, career goals
- Expectations of future work and employers
- Perceptions of preparedness for work
- Awareness of and thoughts about generation Y social commentary
- Impressions of their generations likely contribution to public health

T2 INTERVIEWS WITH GRADUATES EXPLORED:

- Experience of the transition to work and making a career in public health
- Changes in attitudes, expectations and choices over time
- Surrounding conditions and their influence (personal and social)
- What has mattered most in getting off to a good start
- Thoughts about future career based on early experiences
EMPLOYERS / EDUCATORS—TIMES 3—DATA SHEET

NAME:

PREFERRED CONTACT DETAILS (EMAIL / MOBILE / PHONE):

AGE:

GENDER:

POSTCODE:

YEARS’ EXPERIENCE TEACHING UNDERGRADUATES (EDUCATORS ONLY):

YEARS’ EXPERIENCE SUPERVISING GRADUATE EMPLOYEES (EMPLOYERS ONLY):

EMPLOYMENT SECTOR (EMPLOYERS ONLY) – TICK RELEVANT BOX

☐ Government
☐ Non-government
☐ Private
☐ Research / academia
☐ Industry peak body

CHECK:

☐ PROVIDED AND DISCUSSED INFORMATION SHEET ON THE STUDY
☐ CONFIRMED PARTICIPATION IS VOLUNTARY AND ABLE TO WITHDRAW AT ANY TIME
☐ GAVE CONSENT TO RECORD INTERVIEW
### Table Z: Summary of participant attributes @T3

<table>
<thead>
<tr>
<th>Educators</th>
<th>Gender</th>
<th>Age</th>
<th>SEIFA Decile</th>
<th>Years teaching UGs</th>
<th>Years supervising new graduate employees</th>
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* Participated in the employer focus group

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<th>SEIFA Decile</th>
<th>Years teaching UGs</th>
<th>Years supervising new graduate employees</th>
<th>Employment sector</th>
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** Participated in the educator focus group

Legend – G (government), N (non-government), P (private), RA (research/academia), I (industry peak body)
Getting to know you
Attitudes and values of generation Y public health graduates, and implications for their transition to work – results and findings of T1
Denise Sullivan, PhD Candidate
September, 2015

Background
- MPH research on evolution of a national coalition in tobacco control
  - Identified issue of generational change
- Shifting context for health service planning and delivery
  - Changes in socio-economic environment
  - Implications for policy, planning and delivery
  - Concerns about capacity to meet future demand
- Growing preoccupation with generational differences
  - Significance for sustaining a vital and engaged workforce

Context for health
- Projections on impact of population growth and ageing on services, the labour force and economy
- Concerns over ability of health to meet future needs
- Dynamism of environment for health add to pressures
- Anticipated shortfall in those willing to enter the human services, such as health
- Growing preoccupation with the multi-generational nature of the workforce, and challenges ahead for employers, especially attracting and retaining generation Y employees

Generation Y
- Born 1980-2000
- Global generation
- At ease with technology
- More inclusive views of gender and race
- Positive outlook on life
- Crave inspiration and diversity in the workplace
- Less likely to define themselves by their job and potentially more demanding
- Conflicting views on values

The transition to work
- “A tumultuous journey”
- Generational profiles suggest traits and values to which employers may appeal, but:
  - Employers need to offer an environment in which people want to work
  - Employers and educators need to work better together
  - Foci of health workforce planning and policy on the clinical and acute care workforce and issues of supply

Aim
- To gain a deeper understanding of what it is like for generation Y public health undergraduates entering the workforce, their preparedness for work and induction into the workplace
- To explore relevance of popular beliefs about generation Y
  - Focussed on graduates destined for non-clinical roles
Research questions

• What are the career aspirations and doubts of generation Y public health graduates?
• What is and will be expected of these people in the health workforce?
• Where are the greatest potential gaps between the expectations of generation Y as prospective employees and their prospective employers?
• How can educators together with employers better prepare graduates for employment in the field so as to maintain their enthusiasm and commitment?
• How can employers be better prepared to provide work opportunities and conditions that will be more attractive to generation Y?

Study design

• Purpose: exploratory, independent of theory and epistemology
• Approach: prospective, longitudinal, cohort study
• Population selection: purposive → snowball
• Data gathering: qualitative methods
  – IDIs, focus groups; semi-structured; data includes transcribed recordings, field notes and researcher’s reflective journal
• Data analysis: thematic analysis
• Personal biography
• Ethical considerations

Sampling

• Criteria for inclusion
  – Undergraduate, ≤ 29 years
  – Attending UWA or Curtin University
  – Enrolled in a BHSc program or similar (non-clinical)
  – Completing all course requirements in 2008
  – Seeking employment (in Australia) after graduation
• Process for recruitment
  – Gained support of Schools of Population Health
  – Presentations to students, fliers, peer recruiter
  – Incentives to participate: personal, professional

Sample characteristics

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<thead>
<tr>
<th></th>
<th>University A</th>
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<tr>
<td>Gender (n)</td>
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<td>8 F</td>
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<tr>
<td>Degree (n)</td>
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<td>BHIM=10</td>
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<tr>
<td>SEIFA (mode)</td>
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<td>Prior deferred studies (n)</td>
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<tr>
<td>Vocational experience (n)</td>
<td>Pracicum (final year)</td>
<td>6 (13 wk. block)</td>
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<tr>
<td></td>
<td>Pracicum plus</td>
<td>- (6 wks., split 4+2 wks.)</td>
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<tr>
<td>Early job offer (n)</td>
<td>Graduate program</td>
<td>6</td>
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<tr>
<td></td>
<td>Other</td>
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</tbody>
</table>

Data collection

• 2 x 45 minute interviews
• Prior to graduation – 2008/9
• Post graduation – 2013
• Interim contact
  – Clarification of interviews
  – Shared interpretation
  – Professional development
  – Career advice where wanted

Data analysis

• Thematic analysis
  – Familiarise with the data
  – Identify, elaborate, refine
• Credibility, trustworthiness, replicability
  – Detail research process
  – Talk with other researchers
  – Shared interpretation
Phase 1 of the research

- Aimed to explore
  - Why health?
  - Career aspirations
  - Influences
  - Thoughts about Gen Y
- Circumstances
  - Endings in beginnings
  - The novice interviewer
  - Developing trust

Perth, WA – 2008-09

- Speculation about future skills shortages
- Preoccupation with generational profiles
  - Work ethic
  - Career expectations
- Advent of the GFC
  - Job losses
  - Government budget cuts
  - Delays in start of major infrastructure projects

Results – Choice of degree

- 'I originally wanted to do medicine'
  - 'I actually started out in medicine'
- 'I would have liked to do nursing, but I have a really bad phobia of needles'
- 'The only other thing I had my heart set on was doing an arts degree to study languages'
  - 'Well I started off doing a different degree'
    - '...and I didn't really like it: that was natural resource management'
  - 'I didn't mind commerce – it was a little bit dry'
- 'That's a story and a half…'

Results – Desire to make a difference

- 'I was always attracted to health because I always wanted to make a difference. I figured that health was one area where you really could.'
- 'You do get satisfaction out of helping others'
- 'I still wanted that underlying meaning, purpose in my work.'
- 'You can make a difference to a large number of people.'
- 'Health science has a greater understanding of all the different ways that you can influence health; social change and smaller things that can make a huge difference that aren’t necessarily just medical.'
  - 'To be able to leave your own mark through creativity... it’s not yours par se but part of you is in it, that’s making the difference'

Results – Motivations for choice of degree

- 'Health has always been something that really interested me'
  - 'But I knew I didn't want to do anything hands-on!'
- 'I didn't want to waste my high TER'
- 'I thought it would also be a good stepping stone ... to medicine!'
  - 'I had it in my mind as a back-up if I didn’t get in, and I didn't get in.'
- 'I wanted something broad because ...'
  - 'I didn’t know exactly what I wanted to do.'
  - 'To get to cover a lot of my interests at once'
  - 'To make it a bit more exciting'
- 'It’s very flexible, you can go out and not only work in research, but ...'
- 'I wanted a change'

Results – Influences on choice of degree

- 'My parents were pretty big influences'
  - 'My grandfather was a doctor ... he made me think something with the option for a bit more diversity would be good'
  - 'Because my brother was also doing health science'
- 'My school ... because it would look good for the school'
- 'Speaking to as many people as possible'
- 'What the university could offer', 'the prestige that goes along with [the university]', 'proximity to home', 'it had a good social scene'
  - 'And the fact that [it] was within the Faculty of Med Dent'
- 'I ended up stumbling into the Health Science [talk]'
  - 'LR was presenting. She’s quite charismatic.'
- 'I just looked through the list of courses ...'
Results – Likes and dislikes about degree

**Liked**
- ‘It’s so broad’
- ‘It was quite well-rounded’
- ‘It also allows your creativity’
- ‘Learning about the health system’
- ‘The biostatistics and epidemiology, the case-mix and clinical classification, the coding…’
- ‘Like a family’

**Disliked**
- ‘I love that I did Anthropology, but it’s a dead end as far as a job goes’
- ‘I work a full day Saturday and a full day Sunday and I’ve got three other jobs while doing my practicum’
- ‘A lot of students struggle with it’
- ‘I don’t feel I did health that much until my final year’

Results – The new beginning

- ‘First of all I’ve got to get permanent residency’
- ‘We’re given so many options … but at the same time that can be quite daunting’
- ‘… what to apply for’
- ‘It would be nice to have a direction really’
- ‘I know what I’ve enjoyed studying but in practice they could be totally different’

Results – Fields of interest

**Interests**
- ‘The clinical side of things’
- ‘Management role’
- ‘Health promotion’
- ‘Health economics’
- ‘People research’

**Disinterests**
- ‘Health promotion’
- ‘Research’

Results – Views on sectors

- Government
  - ‘You can move within it … there are options … it’s so broad’, ‘Stability’
  - ‘Structured and process oriented’, ‘Hard to get things done’, ‘Stagnant’
- NGO
  - ‘A different culture to the workplace … more committed and passionate about their work’, ‘Helping the community’
- Private
  - ‘A good culture’, ‘Better access and to more resources’, ‘More training and more development really quickly’, ‘The money’
  - ‘They had to work very hard, probably more so then I’ve had to here’, ‘You’ll end up doing tax’, ‘Loss sight of the bigger picture’, ‘Risk of’
Results – Expectations of work

- "The things that for me make a difference are the things that you can't judge when you go into an interview so much."
- Work that is
- A work environment that is
  - ‘comfortable’, ‘friendly’, ‘supportive’, ‘somewhere I felt that I was valued’, ‘what if I'm stuck in a place where everybody is horrible?’
- Supervisors / managers who are
  - ‘genuine and upfront and open and honest’, ‘available’ and ‘not afraid to let you have a go’
  - ‘I guess seeing qualities that I feel I have, that care and the passion for the topic. I guess I'm more attracted to those sorts of people."

Results – Financial vs non-financial benefits

- On financial benefits
  - ‘You have to be realistic and understand you’re a graduate…’
  - ‘something that justified me studying’
  - ‘I guess I'd want to feel I was getting enough to get by’
  - ‘The worry at the moment is that I’ll never buy a house’
- On non-financial benefits
  - ‘flexible working hours’, ‘work-life balance’
  - ‘If you've got that it saves a lot of money’ ‘good IT support’, ‘recognition’, ‘opportunity for progression’
  - Committed – if the conditions are right
    - ‘meaningful work and a good atmosphere… would keep me at a place’
    - ‘I do plan further down my career pathway to have a family’
  - ‘good IT support’, ‘recognition’, ‘opportunity for progression’
  - Committed – if the conditions are right
    - ‘Meaningful work and a good atmosphere… would keep me at a place’
    - ‘aims and vision… aligned with things that you believed in’
- ‘I guess seeing qualities that I feel I have, that care and the passion for the topic. I guess I'm more attracted to those sorts of people."

Results – Optimism about finding work

- ‘I wouldn't say that I’m actually looking for jobs at the moment’
- ‘A lot of people think that it is not that hard to find a job’
- ‘I have a feeling it's not going to be that easy. Maybe it’s because of the credit crunch and times aren't as good as they were’
- ‘I think people are just basically expecting it to take a bit longer than they thought. No-one's going to be stressing too much about it.’
- ‘It depends how picky you are… we’ve got to be realistic’
- ‘There is definitely nervousness because you don’t know exactly where you’re going to end up and whether the first position you gain is going to be that one that you're going to stick with.’

Results – Perceptions of job readiness

- ‘I’m ready to work but still I am very worried about finding a job I want to do.’
- ‘[My coursework has] given me the confidence to take on new learning experiences… and it’s equipped me with the basic skills’
- ‘[the university] has a very good professional reputation for high quality graduates, especially in health science’
- ‘and you’ve got that IT savvy side to it… so you’ve got that edge that a lot of employers are looking for’
- ‘The practicum we did at the end of our degree helped a lot.’
- ‘the [School] is quite proactive in telling students what's going on in the job scene and stuff’

Results – Thoughts about Gen Y type

- ‘It’s usually quite negative.’
  - ‘I think people that do this kind of course do it because they want to do something good rather than just doing it for themselves.’
  - ‘I don’t want to say we’re disloyal… just that we want more experiences.’
- On employment of
  - ‘They don’t have a choice do they… more important is the skill shortage, but there’s just a general people shortage as well.’

Results – Contribution to public health

- As employees
  - ‘potential to stick at it’
  - ‘emphasis on work-life balance’
  - ‘BUT’ instead of ‘instead’
  - ‘able to integrate a lot of different aspects of health’
- As leaders
  - ‘build on what’s been started’
- ‘a big focus on chronic diseases… with a different slant maybe’
- ‘primary prevention’, emphasis on
  - ‘different problems to tackle’
  - ‘more efficient… evidence-based’
  - ‘bolder or bolder in the things we try and get done’
  - ‘things might not be as gradual’
  - ‘collaboration’
  - ‘more connectivity… sensitivity… to minority groups’
  - ‘making people responsible for their own choices’
  - ‘the technological stuff… ways of getting to people’
Key findings – Looking for differences

- Among participants
  - Age, gender, SEIFA decile, prior or deferred studies, vocational work experience, receipt of early job offer, favoured sector for employment
  - Current course of study, preference for medicine as a course of study
  - Student visa

- As Gen Y
  - Altruistic; valuing of flexibility and choice, shared values, teamwork, mentoring and empowering leadership, drive and ambition, influence of family and friends
  - Selfish, lazy, fickle, unrealistic expectations

- New beginnings
  - Optimism and apprehension
  - Discovering consequences
  - Getting off to a good start

Key findings – On the brink of a career

- ‘Making a difference’ – a core value driving study and career choices
- A blend of idealism and pragmatism
  - Realistic about career prospects
  - Early career a time to acquire knowledge and experience
  - Hopeful for a career that offered
    - Meaningful work, and a collegial and supportive work environment
    - Supervisors and managers they can admire and respect
    - Adequate remuneration, opportunities to advance, work-life balance
    - Potential to stick at a career in public health
- Positive about the future
  - Studies have prepared for a new beginning
  - Breadth, vocational context and relevance, exposure to community of practice
  - Ideas about future career in flux, but forming before entry into workforce

Looking forward

- ‘I’m not going to just waste away my time just working for the sake of working, I want it to be working for something. That’s not necessarily money...’

- Exploring
  - Career beginnings and development
  - Career changes and choices
  - Surrounding conditions
  - Working out what matters
  - Thoughts about future career
  - Accord with Gen Y
Getting to know you
Attitudes and values of generation Y public health graduates, and
implications for their transition to work – results and findings of T2
Denise Sullivan, PhD Candidate
September, 2015

Key findings – Looking for differences
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  – √ Current course of study,
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  – √ Student visa
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  and choice, shared values,
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  and ambition; influence of
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Looking forward
• ‘I’m not going to just waste
  away my time just working for
  the sake of working. I want it to
  be working for something.
  That’s not necessarily money....’
• Exploring
  – Career beginnings and
    development
  – Career changes and choices
  – Surrounding conditions
  – Working out what matters
  – Thoughts about future career
  – Accord with Gen Y

Phase 2 of the research
• Aimed to explore
  – The transition to work
  – Changes in hopes,
    aspirations, careers
  – Surrounding conditions and
    their influence
  – What mattered most to
    making a good start
  – Thoughts about future career
    – Accord with Generation Y
• Circumstances
  – Developing careers
  – Juggling commitments
  – Picking up where we left off ...

Perth, WA – 2009 to 2013
• A relentless onslaught of man-made and natural disasters
• Global political and financial market turmoil post the GFC1
• An uncertain labor market: jobs growth in some sectors constrained in others2
• Erosion of image of government as a model employer3
• Fractious national Australian and state politics
• Significant achievements and scandals in public life (corporate, political,
  sporting)
• Increasing cynicism and distrust of institutions and public figures
• Continued preoccupation with the generations, their differences and
  implications for industry sectors (consumer / employee behaviors)
Results – Mobility, 2009 to 2013

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Results – Career patterns, 2009 to 2013

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Results – Looking back

- ‘I didn’t really have an idea about where I wanted to work, what I wanted to do.’
- ‘I felt really lost’
- ‘I was so wide-eyed and didn’t really know what was coming’
- ‘I didn’t realise how difficult finding a job was going to be then. I thought it shouldn’t be too hard because there are jobs out there.’
  - ‘I imagine that’s true of everybody about to enter the workforce’
  - ‘That’s just part of being young and not really understanding the workforce’
- ‘It made me realise how much I had matured… Looking back, I felt I had grown a lot. I guess I’ve got more life experience now.’

Results – Reception into working life

- ‘I went into a very non-corporate small workplace … I really flourished in that environment’
- ‘I had already had a taste from doing a summer internship’
  - ‘… but working in as a full-time employee was just daunting’
- ‘you’re offered support and training and eased into things’
  - ‘the people there were a bit busy and … didn’t have a lot of time to … show you around’
  - ‘tapers off when you become part of the furniture’
- ‘I had a support network of nine other people who were just like me’
  - ‘there needs to be some kind of … interim step … a market for … students after they’ve graduated’
- ‘I was still in a learning phase’
  - ‘a lack of supervision’
  - ‘this myriad of just rejections’
- ‘I didn’t have a residency status’

Note to employers

- ‘[An] open mind about what other skills this person has’
- ‘you may not be used to your maximum capacity and you may not enjoy everything you do’
- ‘having key staff and supervisors present when somebody starts’
- ‘making your expectations really clear early on, and having a chat about your management style’
- ‘gradually building up to higher level [tasks] and more responsibility’
- ‘spelling things out … [especially things I hadn’t] done before: that was really helpful’
- ‘regular communication or catch-ups, even if they’re informal’

Results – Adapting to the work environment

- ‘the shock of working full time’
- ‘as a new graduate I was always trying to prove that I could do things’
  - ‘… it’s difficult as a younger person going into [an] organisation that can be quite hierarchical’
  - ‘I’ve often thought [I’m] a bit young for this’
- ‘the workplace culture’
  - ‘how you fit in with other people’, ‘suddenly I had a manager’
  - ‘let uni you’re given … a lot of direction … whereas in the workplace’
- ‘I feel a lot more relaxed now…’
  - ‘I’ve formed friendships’, ‘[an] appreciation for why things happen the way they do’, ‘I’m developing bit more of a specialty’, ‘people are coming to me to ask about things’, ‘I’m starting to see the value in [being part of a community of practice]’
Results – Aspirations satisfied / frustrated

• 'I managed to find the area I wanted to go into through that program'
• 'I wake up every day and enjoy coming to work'
• 'There was some disappointment in that it wasn’t quite what I wanted’
  – ‘back to study’
  – ‘for whatever reason, I never really pursued it, [but] because I found it hard to get a job in health…’
• 'I was hoping to blend my Health Science and Commerce degree[s]'
  – ‘I feel that I’ve grown much more, in that even though I [haven’t been able to do what I thought I would], I’ve got stuff in my resume that [I’m proud of] … and [I’ve been] able to support myself overseas’

Results – Making a difference

• ‘That’s why I’m in healthcare’
  – ‘It’s more of a career rather than a passion now, I think’
• ‘It’s more abstract than what I thought it would be’
  – ‘It’s much more removed than what I experienced in health promotion’
  – ‘I don’t know whether [making] a difference is the same as feeling like…’
• ‘Giving something back… feeling like you’re doing productive work’
  – ‘talking about issues with [with] community groups and people on the ground’
  – ‘That’s also why I enjoy my work so much’
  – ‘the little wins’, ‘I’ll probably not be rewarded or recognised’, ‘maybe not even something that I’ll see in my career’

Results – Career trajectories

• ‘I fell into [a] placement that’s just snowballed into a potential career’
  – ‘I was in the graduate development program, I was really lucky because…’
• ‘I wasn’t looking….. but…..’
  – ‘I received an email on an advert’
  – ‘I was actually a client of Y and the opportunity came up’
• ‘a focus on [developing] a skillset … that could be universally translated’
  – ‘I did some acting for a while and I went to Sydney and I worked in IT.’

Results – Developing clarity about career

• ‘It’s not really a career in acting … you forfeit so much’
• ‘at some level [X] has been closed off to me…’
  – ‘I would have to start again’
• ‘I do miss health but…’
• ‘I found the reverse to be true’ (not all NGOs are the same)

Results - Fields of interest

• Allied health
  – ‘It sounds like I’ve got more behind me than just my original degree’
• Health administration
  – Health and hospital reform: it’s a nice tie-in with my [studies]
  – ‘I’m still interested in project and people management, bringing those skills together’
• Health promotion
  – ‘getting out in the community, selling a message, talking to people, creating things’
  – ‘not repetitive… [and] fun to go up’

Results - Views on sectors

• Government
  – ‘a broader perspective’, ‘the influence of politics on policy’, ‘see how policy in practice pan out’ (CTH / STATE)
  – ‘the bureaucracy intense’, ‘but… a greater appreciation for formalised structures’
• NGO
  – ‘a good starting point to learn [new] skills and show what I could do, but…’
  – ‘career progression was quite stagnant’, ‘funding issues’
• Private
  – ‘the pressure’, ‘how that affects work-life balance… your happiness and motivation’
  – ‘academia, which is what my roles have been – I never even considered that a possibility’
Results – Surrounding conditions

The self
- I was so scared of working
  - I would be incapable to perform
- It’s about the learning that comes from working in different organisations and industries
- ‘chats with people’
  - I’m not too concerned about being a strict career path in future
  - I don’t feel the need to go somewhere else, but it does make you think
- I want to do something for me
  - ‘I’m not quite sure what it is’
- ‘I feel that I need to do something’
  - ‘I’m not quite sure what it is’

The environment
- ‘that’s life’… I haven’t let it affect me
  - ‘an unanswerable’
- ‘The economy’
  - ‘The GFC’, ‘the recession’, ‘a downturn’
  - ‘funding issue’, ‘a restructuring and some redundancies’, ‘job uncertainty’
- ‘The job market… was hard’
  - ‘officially under-employed’
  - ‘a threat on positions’
  - ‘In advance, they have to study more’
  - ‘It’s hard to know what they are doing’
- ‘The influence of politics on policy’
  - ‘new mining tax’, ‘more work for us’

Results – Surrounding conditions

Results – Role of mentors

- ‘A sounding board’
- ‘quite structured’, ‘just happens’
- ‘understand what I was going through’
- ‘chats with people’
- ‘It’s just happened to me’
- ‘The organisations and industries’
  - ‘they changed the rules for residency’
- ‘The job market’
  - ‘I was so scared of working’
- ‘A step ahead’
  - ‘It was more about networking and finding out what other people did’

The mutual benefits
- ‘you learn from each other’
- ‘It’s rewarding’
- ‘I put my hand up to be a mentor’
- ‘It’s really about the culture of the organisation’
- ‘It would be important to work for a good boss rather than simply the organisation’

‘other people have these big dreams for me, but...’

Results – On value of undergraduate studies

Pros
- ‘For the first three years you’re kind of just getting used to uni life’
- ‘you don’t really know what you want to specialise in’
- ‘Depending on what’s taught in the degree(s)’
  - ‘expands your ability to specialise in different areas of public health’
  - ‘expands your ability to specialise in different areas of public health’
  - ‘health science and public health’
- ‘What you really need is that passion’
- ‘changing the degree won’t necessarily change someone’s ability to do the work we’re doing’

Cons
- ‘I don’t know that you’ll get as many people doing public health’
  - ‘people have to be highly motivated’
  - ‘I’ve been somewhat lost amongst the density and medicine students’
  - ‘The industry long term may suffer’
- ‘You want to get something back because you have worked hard, but...’
- ‘I can’t imagine wanting to work anywhere else’
- ‘I’m struggling with some of the limitations of my current position.’

Results – Financial vs non-financial benefits

On financial benefits
- ‘I wouldn’t say money is a major motivator’
  - ‘You want to get something back because you have worked hard, but...’
- ‘I put my hand up to be a mentor’
- ‘It’s really about the culture of the organisation’

On non-financial benefits
- ‘being able to link what you do to a social good outcome’
  - ‘It’s really about the culture of the organisation’
  - ‘I would not move unless...’
  - ‘they changed the rules for residency’
- ‘flexi-time’, ‘job security’
  - ‘I’ve a relaxed attitude’
  - ‘It is a consideration’
- ‘networking opportunities’
  - ‘new mining tax’, ‘more work for us’

The work environment
  - ‘It’s really about the culture of the organisation’
  - ‘I would not move unless...’

Results – New course structure

Pros
- ‘For the first three years you’re kind of just getting used to uni life’
- ‘I don’t really know what you want to specialise in’
- ‘Depending on what’s taught in the degree(s)’
- ‘expands your ability to specialise in different areas of public health’
- ‘What you really need is that passion’
- ‘changing the degree won’t necessarily change someone’s ability to do the work we’re doing’

Cons
- ‘I don’t know that you’ll get as many people doing public health’
- ‘people have to be highly motivated’
- ‘I’ve been somewhat lost amongst the density and medicine students’
- ‘The industry long term may suffer’
- ‘because you’re being that dedicated out of high quality grade’
- ‘a really valuable resource’
- ‘for [the] different skills that they bring’
Results – Back to the future

- 'I've found the niche that I enjoy for the moment', 'I'm still finding out'
- 'I've thought about doing a Masters'
- 'I've often wondered, will I do this forever and, if not, what could I do'
- 'I'd like to stay in public health'
- 'other stuffs important as well'

And on travel
- 'It's still there, tho a bit less these days'
- 'to do something a bit different'
- 'more for a life experience ... I've gotten to a point in my current role...'
- 'I really enjoyed it and got to see what else was out there'

Results – Gen Y in the workplace

- NO, not a factor in treatment / working relationships
  - 'I was accepted as someone who wanted to work and would work'
  - 'there's no conflict over our approaches to work or expectations'
  - 'I hear we demand flexibility, which I am offered here, but so is everyone'
- 'I think with some people I've certainly had to prove myself'
  - 'it was very noticeable ... older and younger [staff seated at separate tables]'
- 'It says more about the dynamics of working relationships in research'
- 'most of the [staff] were pretty young. We're all around [the same] age'
- 'I think with some people I've certainly had to prove myself'
- 'It was very noticeable ... older and younger [staff seated at separate tables]'
- '...it [says more about] the dynamics of working relationships in research'

Results – Contribution to public health

- As employees
  - 'loyal', 'proactive, ideas-driven'
  - 'willing to look at new ideas [and] to try new things'
  - 'a fresh perspective'
  - 'the variety in our education ... that would be [our] greatest asset'
  - 'still value a work-life balance'
  - 'but, we work hard and we get the work done'
- As leaders
  - 'build on the advocacy and other work of past generations'

- Period in leading: obesity and alcohol, traffic congestion, infrastructure, a growing population, 'exemplary' facilities and mental health
- An emphasis on, and more 'holistic' approach to preventive health, 'the most cost-effective way to go'
- 'challenge the status quo' asked by...
- 'Innovative use of technology ... to promote public health and foster collaboration'
- 'A harder line' on charity toward others
- Greater interest in 'civic engagement' and other work of past generations

Results – Contribution to public health

- As employees
  - Period in leading: obesity and alcohol, traffic congestion, infrastructure, a growing population, 'exemplary' facilities and mental health
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Findings – Making a career

- A dynamic concept, as much a felt need as an outcome of the times, and characterised by:
  - A movement from exploration of different roles and options through work, travel and volunteering to the honing of a widening portfolio of knowledge and skills and becoming part of a community of practice
  - A need for flexibility and employability in a more volatile labour market
- Greater certainty as to work values, what’s central to job satisfaction
  - Indicative of gradual social changes that have occurred over time and life and career stage: less so of generational type
- Studies, induction and professional development
  - Have power to enthuse – an already primed cohort – with a lifelong passion and commitment to public health
  - Effectiveness of, reliant on elements / synergies between the domains
- Persist in tackling ‘obesity and alcohol’, traffic congestion, infrastructure, a growing population, ‘sedentary’, ‘mental health’ lifestyles and ‘mental health’
  - An emphasis on, and more ‘holistic’ approach to preventive health, ‘the most cost-effective way to go’
- ‘challenge the status quo’ asked by...
  - ‘Innovative use of technology ... to promote public health and foster collaboration’
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  - Effectiveness of, reliant on elements / synergies between the domains

Key findings – Looking for differences

- Among participants
  - ‘Age, SEIFA decile, prior or deferred studies, vocational work experience, receipt of early job offer’
  - ‘Gender, course of study, preference for medicine as a course of study, favoured sector for employment’
  - ‘Student visa’
- As Gen Y
  - ‘Altruistic; valuing of flexibility and choice, shared values, teamwork, mentoring and empowering leadership; drive and ambition; influence of family and friends’
- Making a career
  - ‘Adapting to environments’
  - ‘Clarifying work values’
  - ‘Building and sharpening a portfolio of portable skills’
  - ‘Making a living wage vs. making a career’

Key findings – Implications

- The importance of open minds and communication to workforce planning and development
  - ‘Eschewing ideas of generation as a problem’
  - ‘Hearts and minds as critical to the vitality of workforce as size and skills’
- A more seamless nexus between academia and industry
  - ‘Vocational context for learning’
  - ‘A vocational context for learning’
- Unpacking the concept of career
  - ‘An individual and social project’
  - ‘The role of prophets (inspired teachers / leaders) and mentors’
  - ‘Developing a portfolio of portable knowledge and skills’
  - ‘Making a living wage vs. making a career’
Tips on workplace induction - employers

- A realistic assessment of the graduates' knowledge and capabilities
- A program of work that gradually increases the complexity of tasks and responsibilities allocated, ensuring graduates are fully occupied and takes into account additional skills they may bring
- Availability and ready access to staff with whom graduates will be working
- Provision of mentoring and buddy systems
- Clarity as to expectations and rules of the workplace
- Appropriate levels of supervisory support and guidance, especially when allocating new tasks and responsibilities
- Regular communications and catch ups, informal and informal, to monitor progress, make certain issues or questions are dealt with in a timely fashion and provide feedback and encouragement

Tips on course design - educators

- Breadth, flexibility and vocational relevance and context of courses of study
  - Noting the distinction between a course that has a vocational context and a vocational course
- Culture and cohesiveness of the academic community linked to courses of study
  - And inclusive of students and staff, and the latter's professional networks
- Early and ongoing exposure to industry leaders and settings
- Profile, standing and connectedness of academic staff
  - And capacity to infuse students with a passion for public health
  - Not necessarily contingent on a cadre of larger-than-life personalities
- A mutually reinforcing system of curricula, activities, people and incentives
  - That engage and inspire students

Tips on attracting / retaining

Attracting

- Message
  - Making a difference, becoming part of a bigger movement of like-minded people for change
- Medium
  - What you say and do
  - How they see you, and public health
- Keeping it real
  - Not for the faint-hearted
  - Challenges and obstacles
  - Potential for personal development and career satisfaction
  - Celebrating the small and the big wins
- What energizes and sustains us

Retaining

- Work
  - Varied, at times demanding, requires individual and collective efforts
- Culture
  - Collegial, safe, promotes learning
- Management
  - Accessible, connected, competent, respectful, encouraging, shows trust
- Benefits
  - Open minds, considered communication
  - Alignment of values – and a ‘line-of-sight’

Phase 3 of the research

- Aims to explore
  - Relevance of findings to teaching and practice
  - Bearing of external events
  - Reflections on and of Gen Y
- Circumstances
  - Quickening pace of change
  - Growing uncertainty of policy, political and economic environments
  - The sense of an ending... and the next new beginning...
Getting to know you
Report on preliminary findings of focus groups with educators & employers
Denise Sullivan, PhD Candidate
September, 2016

Phase 3 of the research

- Aimed to explore
  - Reflections on aspirations, career paths of graduates taking part in the study
  - Bearing of external events
  - Relevance of findings to teaching and practice

- Circumstances
  - Quickening pace of change
  - Growing uncertainty of policy, political and economic environments

Perth, WA – 2009 to 2015

- In the wake of the GFC...
  - Rising concerns over public spending and debt
  - Education and health account for large part of public spending
  - Shifts in policies and priorities with change in government
  - Reduced federal government investment / funding to states and territories

- Adapting to the situation...
  - Institutional reforms, focus on organisational efficiencies, performance and quality improvements, the consumer experience
  - Reduced public spending
  - Softening labour markets – a longer term trend

- Implications for vibrancy of workforces...
  - Population growth / ageing driving jobs growth in education and health
  - BUT a shift in focus to targeted recruitment for specific workforce gaps
  - AND policies that encourage retention of older workers

Sampling

- Process for recruitment
  - Tapped into professional networks, snowballing
  - Personal invitation via telephone and email

- Criteria for inclusion
  - Educators, employers
  - Homogeneity vs. heterogeneous groups

- A familiar group…

Data collection

- 2 x 90 min focus group interviews
  - Educators x1, Employers x1
- August / September 2015
- Pre-reading
  - Research context and T1 results (video recording accessed via YouTube, and PowerPoint presentation)
- Self-completion form
  - Demographic data, teaching, supervisory experience, employment sector
- Audio recorded, note-taker

Sample characteristics

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Sample characteristics – sector experience

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- Provision of mentoring and buddy systems

Results – reflections on findings T1 and P2

Concurring views
- Values, beliefs, aspirations
  - ‘Authentic’, ‘making a difference’
- Valuing of work/life balance, shared values, being part of a team, ‘positive work environment’, ‘learning’, mentors
- Skills-sets
  - ‘varied’ skill-set, drive and ambition, comfort with social media/IT
- Transition to work
  - ‘They come in very confident, articulate and ready to work, but the [first] two months has been trying to adjust for them. Sometimes we get a bit writing’
- Making a career
  - Mobility, notion of career progression

Differing views
- Values, beliefs, aspirations
  - Self-confidence, forthrightness
  - ‘Not a homogeneous group’
- Skills-sets
  - Writing skills, critical thinking
  - ‘Political engagement, voluntarism’

Surrounding conditions
- ‘Un in a part of life, an active social life … volunteering … paid work’
- ‘the trajectory over the past 20 years’
- ‘I get surprised at how good they seem, [but] I guess I get to pick and choose those days’

Tips on workplace induction - employers

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- Provision of mentoring and buddy systems

Results – relevance of findings

Concurring views
- ‘a good synergy between the skills that graduates have and what employers want’
- ‘It’s incorporated [X’s] vision’
  - 2017, one of the few courses with a course that has a vocational emphasis in the vocational experience versus the conceptual development

Additional insights
- ‘…we sometimes underestimate how much … [our students are exposed to] a whole array of stuff that maybe they [wouldn’t] get in other courses’

Differing views
- ‘It would be nice to [offer] an experience more like the grad program in which they are exposed to different [work] environments’
  - ‘But there’s a whole range of issues associated with that’
- ‘I would be good … because the skills-sets required would be quite different and adaptability is important’
  - ‘including more stuff in the unit doesn’t necessarily mean they will engage with it or see the importance of it’
- ‘That’s for some but not all’
- ‘I guess it’s the timing of when they have those practical experiences’

Results – relevance of findings

Concurring views
- ‘a view of induction as a tick box’
  - ‘Not just [bed about being shown] where everything is that you understand where you fit within the organisation, where you contribute to’
- Need for ‘some guidance’
  - ‘Understanding the balance’
  - ‘Making the time’

Benefits of
- ‘Supportive manager’, ‘peer support’, ‘mentors’, ‘a “learn environment”’
- ‘Relaxed environment’
- ‘Scholarships’, ‘graduate program’
- ‘These people are really well round and supported’

Differing views
- ‘Nil’

Additional insights
- ‘A universal experience’
  - ‘Some of the issues that are raised for new graduates are fine because for people coming into a new area’
- ‘We’ve had people come in their regional areas and go through a form of culture shock because it’s so different and yet, they’re quite experienced people’
Tips on attracting / retaining

**Attracting**
- **Message**
  - Making a difference, becoming part of a bigger movement of like-minded people for change
- **Medium**
  - What you say and do
  - How they see you, and public health
- **Keeping it real**
  - Not for the feint-hearted
  - Challenges and obstacles
  - Potential for personal development and career satisfaction
  - Celebrating the small and the big wins
  - What energises and sustains us

**Retaining**
- **Work**
  - Varied, at times demanding, requires individual and collective efforts
- **Culture**
  - Collegial, collaborative, promotes learning
- **Management**
  - Accessible, connected, competent, respectful, encouraging, shows trust
- **Benefits**
  - Fair pay, flexibility, career development
  - Open minds, considered communication
  - Alignment of values – and a ‘line-of-sight’

Results – relevance of findings

**Concurring views**
- **Making a difference**
  - ‘Tapped into notions of being a good world citizen’
- **Keeping it real**
  - ‘It’s the difference not always a good time’
    - ‘It made me think about how we describe jobs we advertise’
- **Marking and celebrating wins**
  - Showing them [how] the little wins work towards that bigger difference
- **A portfolio of portable skills**
  - ‘That’s something that attracts them’
- **A line-of-sight**
  - ‘What it takes to progress, other staff don’t get to see what you produce’

**Differing views**
- **Nil**

**Additional insights**
- **Marketing**
  - ‘We could do more in attracting school leavers’
  - ‘Isn’t sure how well we promote [what is] public health’
- **Limitations of workforce data**
- **‘A lot of themes reflective of the general graduate labour market’**
  - ‘Job-specific training, should that be provided by employers or universities?’

Summing up

- **Findings @ T1 and T2 concurred with observations and experiences of educators and employers**
  - Values, expectations, induction into the workforce, career trajectories
- **Encouraged reflection on own perceptions and interactions with graduates / early career professionals**
  - Challenged assumptions, prompted sudden realisations (epiphanies)
- **Validated insights as to implications for educators and employers**
  - Confirmed the value and practicality of recommendations
- **Reinforced importance of the nexus between academia and industry**
  - As well as contextual nature of career behaviours and development
  - And brought to the fore differences in expectations
- **Showed strength of existing connections between two worlds in WA**

Next steps – making sense of it all

- **Perhaps I just feel safer with the history that’s been more or less agreed upon. Or perhaps it’s that same paradox again: the history that happens underneath our noses ought to be the clearest, and yet it’s the most deliquescent.**
  - Julian Barnes, *The Sense of an Ending*
E GRADUATE INCENTIVES TO PARTICIPATE

- 2008 ANSON TRANSITION TO WORK SEMINAR
- 2008 LEARNING AND DEVELOPMENT OPPORTUNITIES
- 2009 LEARNING AND DEVELOPMENT OPPORTUNITIES
- 2010 LEARNING AND DEVELOPMENT OPPORTUNITIES
Transition to Work Seminar

This 3-hour seminar is a shortened version of Anson’s "Career Transition Five Meeting Program", which provides participants with the necessary tools and skills that are essential to effectively manage their job search. Participants set achievable career goals, compile a targeted resume, understand how recruiters work and practice their interview skills.

Topics covered in the seminar include:

- Exploring and resolving any immediate concerns
- Overview of job search materials
- Goal-setting and preparation of an action plan
- Briefing on resume development
- Choosing and preparing your referees
- Reviewing and polishing your resume
- How to write tailored application letters
- Researching the job market for your best opportunities
- Developing job search strategies
- Recruitment agencies
- Networking
- Direct marketing strategies
- Interview preparation
- Interview practice session

Two seminars will be conducted for a maximum of 10 students per seminar.

Study participants are eligible to attend the seminar (with spots randomly allocated through a raffle system).

The seminar is free with costs covered by the study.

Date: TBA, likely to be late November to mid-December

Venue: TBA

Cost: Free to study participants

Anson is a recruitment consultancy specialising in the human services and not-for-profit sectors. The company has customised the seminar especially for graduands taking part in this study.
<table>
<thead>
<tr>
<th>Topic</th>
<th>The Offer</th>
<th>Venue &amp; Timing</th>
<th>√</th>
<th>X</th>
</tr>
</thead>
</table>
| Launch of the tobacco control monograph  | Invitation to private launch of *The progress of tobacco control in Western Australia: achievements, challenges and hopes for the future*, which chronicles the last 25 years of tobacco control in WA. The book will be launched by Professor Bruce Armstrong, an internationally renowned West Australian cancer epidemiologist and longstanding campaigner for tobacco control, and attended by prominent West Australians who have lead campaigning on tobacco control over the last 25 years. | Saturday 25 October 2008  
John Worsfold Room  
Subiaco Oval  
Roberts Road  
Subiaco | ✓              | X |
| Anson ‘Transition to Work’ seminar | 3 hour seminar covering:  
° Job search tools and skills  
° Setting achievable career goals  
° Compiling a targeted resume and applications  
° Understanding how recruiters work  
° Interview preparation and skills | Tuesday 10 February 2009  
Seminar Room  
Crawford Lodge  
Cancer Council WA  
55 Monash Avenue  
Nedlands | ✓              | 7 |

✓ = Event occurred with study participants in attendance; X = Event did not occur, or did but without study participants in attendance
# PhD GenY Study
## Perth-Based Learning and Development Opportunities—2009

<table>
<thead>
<tr>
<th>Topic</th>
<th>The Offer</th>
<th>Venue &amp; Timing</th>
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</thead>
</table>
| Cancer Services in WA                | A tour of the Cancer Council WA’s Cancer Services Division:  
• Meet staff of the Division  
• Learn about the services on offer  
• Gain an understanding of the needs and issues confronted by cancer patients and their families  
• Find out what professional training is available should you wish to develop skill or work in this area | Milroy Lodge & Professional Development Centre, Bedbrook Place, Shenton Park  
For study participants only – day and time to be arranged pending interest |
| Consumer Advocacy                    | Informal meeting with Clive Deverell:  
• Talk about the importance of consumer advocacy in health  
• Hear about his experiences of advocacy as a consumer, founding President of Cancer Voices WA and former CEO of the Cancer Council WA | TBA  
For study participants only – day and time to be arranged pending interest |
| Working with local government        | Take part in a series of workshops and seminars for the staffs of the Cancer Council WA and partner NGOs on working with local government:  
• Gain insight into the operations, priorities and issues confronting local government today  
• Learn from the experiences of other agencies and individuals who have worked closely with local government over many years.  
• Meet individuals involved in the development of the VicHealth resource, *Leading the Way*, to be trialled with select local governments in WA.  
• Discover how the resource was developed and has been used as an aid for Victorian local governments struggling to meet regulatory requirements for municipal health plans. [NB. The resource is designed to increase the level | June 2009  
*Invitation only event – limited places for study participants* |
of understanding across local government about how social, economic and environmental factors can impact upon health and wellbeing, and outline ways in which councils might integrate health considerations into their policy and strategic priorities and planning.

| Program planning, the grant application process | Observe planning meetings for the Cancer Council’s Tobacco Program:  
- Learn how the program goes about priority setting and planning future activities, and steps and factors taken into account in preparing major grant applications | September/October 2009  
Private – limited places for study participants to attend as observers only | X |
| Macroeconomic effects of reduced tobacco consumption | Attend launch and seminar by internationally renowned health economists, Professors David Collins and Helen Lapsley on their study on the macroeconomic effects of reduced tobacco consumption in Australia:  
- Scheduled for release August 2009  
- A world’s first and likely to garner national and international interest. | August/September 2009  
Media launch – Private – limited places for study participants to attend as observers only  
Seminar 1 – Open to health professionals  
Seminar 2 – Private – limited places for study participants by arrangement | √ 4 |
| Meet the authors | Meet Professors David Collins and Helen Lapsley:  
- Talk to them about their work in health economics  
- Hear how their careers in health economics evolved and the opportunities it has allowed | August/September  
For study participants only – day and time to be arranged | √ 1 |
Cancer Council Updates | *Cancer Council Update* - an annual series of free public lectures for the public and professionals on latest developments in cancer research | July to August 2009
---|---|---
| Additional private functions for specific groups and Cancer Council WA staff – limited places for study participants by arrangement | X |

√ = Event occurred with study participants in attendance; X = Event did not occur, or did but without study participants in attendance

**To note:**

1. Please indicate which events are of interest to you
2. Most events are on week days during working hours, the exceptions being the private events linked to the *Cancer Council Update* which tend to be at the end of the working day
3. A number of the events are still in planning with details to follow
4. There will be a limit on numbers of study participants who can attend the invitation only or private events
5. Places will be offered on a first come first in basis, although efforts will be made to ensure everyone has the opportunity to attend at least one event of their choice
6. Note private events are just that: study participants may attend as observers and on the understanding that the discussions they observe remain confidential
<table>
<thead>
<tr>
<th>Topic</th>
<th>The Offer</th>
<th>Contact</th>
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<tbody>
<tr>
<td>Cancer Council Australia (Sydney office)</td>
<td>Overview of the CCA as a federation, its international links, its work in advocacy and internationally</td>
<td>Prof. Ian Olver, CEO</td>
</tr>
<tr>
<td>Tobacco and Drug Prevention Section, Department of Health and Ageing (DoHA)</td>
<td>The role of the branch in developing and oversight of the National Tobacco Strategy as well as Australia's role in the Framework Convention on Tobacco Control (the first ever public health international treaty). The Director is also happy to talk about her “career” with the DoHA.</td>
<td>Penny Marshall, Director</td>
</tr>
<tr>
<td>National Preventative Health Taskforce</td>
<td>Aims and hopes of the taskforce and potential and challenges in implementing the National Preventative Strategy once endorsed</td>
<td>Prof. Mike Daube, Co-Chair</td>
</tr>
<tr>
<td>Government Relations Program, National Heart Foundation (Canberra Office)</td>
<td>The NHF's government relations program and past work of the Manager with federal and state health ministers as director of public affairs of the AMA (national office) for many years.</td>
<td>Rohan Greenland, Manager</td>
</tr>
<tr>
<td>Public Health Association of Australia</td>
<td>Role and priorities of the PHAA. The CEO is also a former independent member of the ACT Legislative Assembly and Minister for Health so would have an interesting and different perspective on public health advocacy and policy development.</td>
<td>Michael Moore, CEO</td>
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<tr>
<td>Topic</td>
<td>The Offer</td>
<td>Venue &amp; Timing</td>
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<tr>
<td>10\textsuperscript{th} Behavioural Research in Cancer Control Conference</td>
<td>Day registration for the last full-day of the conference</td>
<td>14\textsuperscript{th} to 16\textsuperscript{th} April 2010 Esplanade Hotel Fremantle</td>
</tr>
</tbody>
</table>
| 10\textsuperscript{th} Anniversary Make Smoking History Campaign | Breakfast event celebrating the 10\textsuperscript{th} anniversary of the Cancer Council WA’s (CCWA) Make Smoking History Campaign:  

- Hosted by the Minister for Health, the event celebrates progress in tobacco control in WA over the last decade, and the contribution of the CCWA. The breakfast brings together former Ministers for Health, other Parliamentarians who have played a key role in the passage of legislation on tobacco, leaders in public health, individuals who have shared their personal stories about the effects of smoking on their lives and, early career graduates from Western Australian universities.  

- The event provides an excellent opportunity for graduates to meet with public health leaders and Parliamentarians and hear first hand how they have worked together in curbing use of tobacco. | Tuesday 25\textsuperscript{th} May 2010 7.15 am for a 7.30 am start (ends 9 am) Dining Room Parliament House Harvest Terrace West Perth | ✓ | 6 |
| Digital Symposium                          | Invitation only event for key CCWA, government and NGO partners covering:  

- Internet trends and consumption  
- Incorporating digital media in communications strategies  
- Digital media and the law (IP, copyright)  
- Case study on good website design  
- Research and evaluation using the Internet  
- Case study on an Internet-based advocacy campaign | 21\textsuperscript{st} October 2010 9.30 am to 3.30 pm Case Study Room University Club University of WA Crawley | ✓ | 2 |

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F  CONTEXTUAL INFORMATION OF RELEVANCE TO THE STUDY
In summary, over the last five years participants would have gone about making a career in health against a backdrop of:

- A relentless onslaught of man-made and natural disasters
- Global political and financial market turmoil post the GFC
- An uncertain labour market: jobs growth in some sectors constrained in others, increased casualization of workforce
- Fractious national Australian and state politics
- Significant achievements and scandals in public life (political, sporting)
- Demonstrations of increasing cynicism and distrust of institutions and public figures
- Erosion of image of government as a model employer
- Continued preoccupation with the generations, their differences and implications for industry sectors (consumer / employee behaviors)

<table>
<thead>
<tr>
<th>Year</th>
<th>International news</th>
<th>National / State news</th>
<th>Economy / job market</th>
<th>Talk about generation Y</th>
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</thead>
<tbody>
<tr>
<td>2013</td>
<td>Algeria hostage crisis North Korea nuclear tests Pope Benedict resigns US govt. shutdown in row over Obama Care Boston Marathon bombing Typhoon Haiyan hits Tacloban Tornado ravages Oklahoma Syria civil war Death of Nelson Mandela Birth of British Royal baby</td>
<td>Heat wave southeastern Australia Bushfires NSW, TAS, VIC, WA Storms, floods, tornados QLD, NSW Politics • Rudd replaces Gillard as PM in leadership spill • Elections WA (Coalition govt. returned), Fed (ALP/Rudd govt. out and Coalition/Abbott govt. in)</td>
<td>Slowing labour market /economy • Unemployment climbs to 5.8% (highest in 4 years) • Underemployment at 30% • Better than many OECD countries Public sector cuts announced • FED 4,228 (Coalition 12,000) • QLD 20,000 (3,000 gone so far) • TAS 800 Abbott sacks three public service heads, to shake-up FED bureaucracy</td>
<td>Foibles of Gen Y • Smartphone addiction • Poor grasp of financial planning, struggle with debt ‘Gen Y: the young and the restless’ • Countering Gen Y myths ‘Home ownership a distant goal for Gen Y’ ‘End of Boom Mark II a Gen Y shocker’</td>
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<td>Year</td>
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<td>2012</td>
<td>Costa Concordia cruise ship sinking</td>
<td>Queensland floods, tornados</td>
<td>Softening labour market conditions</td>
<td>Attracting and retaining staff</td>
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<td></td>
<td>Man-made and natural disasters</td>
<td>AUS troop deaths Afghanistan</td>
<td>• Unemployment edged up to 5.2%</td>
<td>• ‘Generation flux’</td>
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<tr>
<td></td>
<td>• Cyclone, hurricane, tsunami</td>
<td>Politics</td>
<td>• But, economy relatively strong</td>
<td>• ‘A great place to work’</td>
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<td></td>
<td>London 2012 Olympics</td>
<td>• Rudd leadership challenge</td>
<td>Air Australia goes into administration</td>
<td>Gen Y as leaders</td>
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<td></td>
<td>British Queen’s Diamond jubilee</td>
<td>• Peter Slipper, Craig Thomson</td>
<td>Fairfax Media slash 1,900 jobs</td>
<td>• Generational differences vs. Evolution of management</td>
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<td></td>
<td>Rioting in Greece (against EU imposed anti-austerity measures)</td>
<td>scandals</td>
<td>Public sector cuts announced</td>
<td>• ‘Hollow managers’</td>
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<td></td>
<td>Civil war in Syria</td>
<td>Gay marriage debated</td>
<td>• NSW 10,000</td>
<td>• ‘Any questions for Ben?’ (AUS film)</td>
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<td></td>
<td>US Election (Obama returned)</td>
<td>Carbon price and new mining tax</td>
<td>• QLD 3,500</td>
<td>Gen Y quarter life crisis</td>
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<td></td>
<td>AUS wins UN Security Council seat</td>
<td>Gillard’s misogyny speech</td>
<td>• SA 1,000</td>
<td>Mapping Gen Y consumption patterns</td>
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<td></td>
<td>Lance Armstrong doping scandal</td>
<td>Resignation Bob Brown, Greens</td>
<td>• TAS 1,098</td>
<td>• Values, quirks and language</td>
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<td></td>
<td>Moves towards democracy, Burma KONY video</td>
<td>Party Leader</td>
<td>• WA salary budget caps</td>
<td>• Reinforcing Gen Y myths</td>
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<td></td>
<td>Felix Baumgartner jump from space</td>
<td>Elections QLD, NT, ACT</td>
<td>‘Managing in volatile times’</td>
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<td></td>
<td>Newtown school shooting</td>
<td>Rise of Rinehart, wealth / influence</td>
<td>‘Confronting the housing affordability crisis’</td>
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<td></td>
<td>Wikileaks founder, Julian Assange, given asylum by Ecuadorian Embassy</td>
<td>Visits, Prince Charles</td>
<td>‘Labour in vain: casualisation presents a precarious future for workers’</td>
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<td>2011</td>
<td>Turmoil in the Arab world</td>
<td>Azaria Chamberlain death resolved</td>
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<td></td>
<td>• Tunisia, Egypt, Bahrain, Libya, Syria, Yemeni</td>
<td>Earthquakes MEL, regional VIC</td>
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<td></td>
<td>Deepening crisis on financial markets</td>
<td>Tobacco industry</td>
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<td></td>
<td>Natural disasters</td>
<td>• Lose High Court appeal against plain packaging of tobacco</td>
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<td></td>
<td>• Tsunami, earthquake, ash cloud</td>
<td>SYD riots in response to US anti-Islamic film</td>
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<td></td>
<td>Deaths</td>
<td>Cpl. Daniel Keighran awarded VC</td>
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<td>Osama Bin Laden, killed</td>
<td>Royal Commission into institutional responses to child abuse</td>
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<td>Muammar Gaddafi, killed</td>
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<td>Floods QLD, VIC</td>
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<td>Bushfires WA</td>
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<td>Cpl. Ben Roberts-Smith awarded VC</td>
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<td>Cyclones QLD</td>
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<td>Heat wave WA</td>
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<td>Villawood Detention Centre riot</td>
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<td>‘Say Yes’ demos on climate change</td>
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<td>‘Occupy Melbourne’ protests</td>
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<td>Qantas grounding</td>
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</tbody>
</table>
| 2010 | Natural and man-made disasters:  
- Earthquake, flood, volcanic ash, tsunami, oil spill, mine collapses  
- Post GFC bail-outs and European Union unrest  
- Sport  
  - Winter Olympics (Canada)  
  - FIFA World Cup (S/Africa)  
  - Commonwealth Games (India)  
- British Election (Labour out, Conservative/Liberal Democrats in)  
- Aung San Suu Kyi released  
- British Royal family announcement  
- Engagement Prince William, Kate Middleton  
- Wikileaks publishes over 250,000 leaked US Embassy cables | Fatal stabbing Indian student  
Floods QLD, NSW, VIC, WA  
Mary Mackillop canonised by Pope  
MEL Storm breach of salary cap  
Perth storms – hail, flood damage  
Chinese bulk carrier runs aground  
- Heavy damage to Great Barrier Reef Marine Park  
Jessica Watson sails the world  
Politics  
- Carbon tax, broadband and water  
- Tax on super profit  
- People smuggling  
- ALP leadership spill, Julia Gillard becomes first female Prime Minister of Australia  
- Elections TAS, SA, VIC, FED  
AUS troop deaths in Afghanistan  
David Jones CEO sex misconduct suit | Public sector cuts announced  
- NSW 5000 vol. redundancies  
- QLD 3,500 vol. separations  
- SA 400  
- VIC 3,500 vol. redundancies, cap on wage rises (2.5% p.a.), additional rises to be linked to service cuts / efficiencies  
- WA vol. redundancies (n=400)  
Spike in searches ‘ethical jobs’ | Dispelling the myths  
- Attracting, retaining  
- Student activism  
- Cautiously optimistic  
- Money savvy  
‘Young want the lot’ |
<table>
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</thead>
<tbody>
<tr>
<td>2009</td>
<td>GFC 2007-2008</td>
<td>Trooper Mark Donaldson awarded VC</td>
<td>Labour market deteriorated post GFC</td>
<td>Generation Why?</td>
</tr>
<tr>
<td></td>
<td>• Housing / stock market collapses</td>
<td>Floods in QLD, NSW</td>
<td>• Stall in employment growth</td>
<td>• Apolitical, apathetic</td>
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<tr>
<td></td>
<td>• Bail-out of banks</td>
<td>Heat waves southeastern Aus.</td>
<td>• Unemployment peaks at 5.9%</td>
<td>• Artifact of relevance of issues;</td>
</tr>
<tr>
<td></td>
<td>• Credit crunch</td>
<td>VIC bushfires kill 173 people</td>
<td>• Aus. Govt. stimulus packages x2</td>
<td>cynicism; some activism</td>
</tr>
<tr>
<td></td>
<td>Death of Michael Jackson</td>
<td>QLD’s Cyclone Hamish kills two</td>
<td>Public sector cuts announced</td>
<td>Digital natives or refugees?</td>
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<tr>
<td></td>
<td></td>
<td>Earthquakes southeast of MEL</td>
<td>• NSW staffing freeze</td>
<td>• Tech savvy; not info literate</td>
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<td></td>
<td></td>
<td>Rugby League sexual misconduct</td>
<td>• QLD vol. redundancies</td>
<td>Has the bubble burst?</td>
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<tr>
<td></td>
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<td>First swine flu fatality</td>
<td>• WA 3% efficiency dividend,</td>
<td>• GFC, ↑valuing of job security</td>
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<td></td>
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<td>Four Mile Uranium Mine approved</td>
<td>staffing ceiling, vol. redundancies (n=469)</td>
<td>Implications for employing</td>
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<td>Dawn raids in SYD on alleged Islamic</td>
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<td>Employing Gen Y</td>
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<td></td>
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<td>terrorists</td>
<td></td>
<td>• Broad professional interest</td>
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<td>Major dust storms eastern Aus.</td>
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<td>(defence, education, librarianship,</td>
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<td>FED govt. decision to return Tamil</td>
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<td>IT, finance</td>
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<td>asylum seekers to Sri Lanka</td>
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<td>Apology to the Forgotten Australians</td>
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<td>Abbott becomes Opposition Leader</td>
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