studier av

SOS

Managerial Positions and Generational Change
A study in the Health Care Sector
of the Västra Götaland County

EWA WIKSTRÖM
RIKARD ERIKSSON

organisation
och samhälle

no. 2003:5

Managerial Positions and Generational Change
A study in the Health Care Sector of the
Västra Götaland County

Abstract: The study highlights a number of circumstances that constitutes as incentives for changing the management within the health care sector. Today the physicians and the medical competence are not necessarily regarded as "the natural leaders". The tradition that doctors become managers can also be characterised as a vertical gender-distribution in the organisation since the majority of doctors are men. One has started to call in to question the knowledge forming the basis of becoming a manager and the typical characteristics of a manager. The typically "male" characteristics such as objectivity, authority, and competition are seen as out-of-date and inefficient. Another ground for transforming the leadership is the coming generational shift. The interviewees advocate, in the same rhetorical manner as in the private sector, for a combined leadership, where one can take advantage of both the young and old competences and creating something new. The younger are described as more flexible, team- and responsibility-oriented. They also have a different view on power, hierarchy, and gender, and lastly they tend to view loyalty in a different manner. Earlier studies have shown that managers within the health care sector identify with their own profession rather than the organisation and the employer. In contrast to this, the study throws light upon the fact that managers in a greater extent identify with management (from an organizational/employer perspective).

Authors: Ewa Wikström, tel. 031-773 4489, e-mail: ewa.wikstrom@handels.gu.se
Rikard Eriksson, tel. 0705-77 89 18, e-mail: rikard.eriksson@vgregion.se

CONTENT

SUMMARY

The thesis of this pilot study is partly to determine how different generations of managers comprehend and form managerial positions. The thesis is also to generate discourse for a deepened study of managerialness and generational change.

The study was conducted from November 2000 until June 2001 at School of Economics and Commercial Law, Department of Business Administration, Göteborgs University. A total of 22 managers ranging from department heads to chairmen of the board. 17 of these individuals were 40 or younger and 5 were 50 or older. The interviewees work in different organisations in the Västra Götaland region. The majority work in healthcare organisations. The actual organisations that have been involved are Sahlgrenska University Hospital, Östra Hospital, Mölndals Hospital, NU-Hospital, Kungälv Hospital, Skaraborg Hospital, Naturbruk Agricultural High School, Alingsås Laundry, and the Disabled Administration.

The work situation of today is characterised by an extensive generational shift of managers in public organisations. The change is taking place at a time that is deeply enveloped by structural and cultural changes which together arouse questions as to what distinguishes the meeting of the older manager's experience with the younger managers. Another important question is how managers from both generations perceive their work. Earlier studies show that knowledge about leadership and generational change in a public organisation are rather poorly developed. The result of this study shows that leadership goals, content and value differ among managers from different generations.

The following subjects are studied in less detail due to earlier research on leadership and public organisations. The terms manager and leadership are used as synonyms without deeper analysis of implied differences between the two. Few studies have focused on the special characteristics that exemplify a managerial position in a public organisation. Many studies begin with theoretical models of leadership which causes the manager's view and definition of his/her managerial position to be neglected. There are also studies that analyse the differences and similarities between managers belonging to different generations. Lastly, few studies of leadership in public organisation have a pronounced interdisciplinary approach.

Summarily, many of the interviewees separate the roles of leader and manager. They perceive a difference between leader and manager where leader is a more positive term than manager. Manager/manager is perceived as a formal position that includes subordinates. A leader, however, is someone that stimulates and engages co-workers to follow his/her directives. According to this view, a manager can also be a leader if he/she has co-workers, but a leader is not necessarily a manager. In keeping with this view the two roles are not strictly separated from one another. Responsibility for an organisation can therefore be managed by a manager or a leader, but responsibility can even be managed by an integrated form of a manager and a leader. The interviewees however do not emphasize this synergistic effect. Responsibility for an organisation can therefore be informal or formal. According to many of the interviewees, the ideal situation is to exercise his/her managerial position by being a leader.

The results of the pilot study illuminate problems that in general derive from differences between managers from different generations. There are three central themes: Power. Managers from different generations differ in their perception of and ability to exert power. Diversity. Managers from different generations vary in their perceptions of working with

diversity and examples of diversity are ethnicity and educational level. Gender. Managers from different generations have differing perceptions of working with men or women.

The term generational change deals with how managers of varying ages describe the similarities and differences in how they carry out and speak about their managerial role. Generational change even deals with how managers talk about the changes in their assignment with terms such as reorganisation and development. By analysing generational change three basic themes have been found that in a fruitful fashion can be tied to managerialness and generational change in the current study. The first theme deals with cultural production and reproduction of managerialness. The second theme is how older and younger managers communicate. The third theme deals with age and cultural preferences.

BACKGROUND

The ideals that control how a manager in a public organization should think, act and lead his/her co-workers change over time. Now in the beginning of the 21st century we see a tendency that values and lifestyles change and exchange more and more often. Theses ideals are shaped and mirrored of the time period in which they are used.

Because the majority of managers in public organizations are born during the 1930's and 1940's, a widespread generational change has begun. At the same time healthcare organizations as well as public organisations are going through structural changes in a variety of areas. These changes include the progressive movement of specialised healthcare from the hospital to local health clinics and homes. These changes mean that politicians have an opportunity to control the substance and day to day operations of healthcare because healthcare contracts are determined with help of orderer-exerciser models. These two structural changes can possibly require a different managerial role compared to previous ideals and practices. From the 1950's until today, Sweden has even undergone a notable modernisation from a post-war welfare state to today's post-industrial IT hausse. The latter can have created meaningful differences between the older and younger generations' managers' cultural preferences, which among other things could be about what is perceived as the best way to live and be a manager. Generational change occurs in a time characterised by structural and cultural change. With it arise questions of the meeting of older managers' experience with the younger managers' views and perspectives of a managerial role.

This study, therefore, intends to study what happens when a group of managers born during the 1930's and 1940's retire and are replaced by a new group born primarily during the 1950's and 1960's. It is, however, important not to assume that the change itself creates a new and different managerial role. It is for this reason significant to clarify how the term generational change will be used in this study. Associations, connected to the terms generational and change, are presented here. Generational can be used with at least four different meanings. The first definition, a group of individuals with roughly the same age, includes for example managers born at some time during the 1960's. The emphasis here is on the circumstances and occurrences that are typically perceived for particular individuals in a particular generation. The literary genre that generational novels constitute are characterised by attempts to describe such circumstances and occurrences. The second definition is relational and covers the relationship between parents and their children, for example, or the relationship between a manager born during the 1940's and a manager born in the 1960's. This definition includes

aspects of cultural differences between younger and older individuals which are often described with terms like generational gap and generational antagonism. The third definition that can be tied to the word generation are time related and span the years from when a person is born until he/she has his/her own children. The fourth and final definition that is dealt with her is evolutionary. Examples such as second-generation mobile phones or third-generation computers can be seen as similar products belonging to the same developmental stage.

The term change can indicate a transformation from one state to another. Examples of change are terms such as change of power, change of leadership and change of regime. Change can even be used with the meaning that alterations are taking place in the structure of an organisation. An example is when two different research departments in the same company merge into one and only one of the previous department heads remains as the head of the new and larger department. A third interpretation of change is a constant state of change where an organisation or person constantly shifts between different states. A fourth meaning that can be attributed change is to lead something, whether a person or an organisation, in a direction it has never been before. In summation, the term generation is about how managers of varying ages describe themselves as similar and different in their way of exercising and discussing their managerial roles. The term change addresses how managers talk about alterations in their assignment with words such as reorganisation, development and exchange. Three fundamental themes from the analysis of generational and change have been revealed that in a fruitful way can be tied to a managerial role and generational change in this study. The first theme deals with cultural production and reproduction of managerialness. The second theme deals with how older and younger managers communicate. The third theme deals with age and cultural preferences as they pertain to managerial goals, substance and worth. (for example Arber & Attias-Donfut 2000, Ryder 1965, Kertzer 1983, Marshall 1983, Pilcher 1995, Cournot 1872, Comte 1880, Mannheim 1952, Kohli 1996, Riley & Riley 1996, Kets de Vries 1988, Brown 1999).

PURPOSE

The aim of this pilot study is partly to map perceptions of the managerial role that managers from different generations have and form. In addition the aim is to generate points of view for further study of managerialness and generational change.

METHOD

The study is done with interviews. The interviews are recorded with a minidisk and transcribed afterwards. A total of 22 managers from department heads to CEOs have been interviewed. 17 of these individuals were 40 years old or younger and 5 were 50 years old or older. They were done with the aim of clarifying possible differences between generations regarding attitudes towards the manager role, leadership and colleagues. All names that are included in this study are assumed because the interviewees were promised anonymity. It is irrelevant exactly who has said what. The individual's position is enough. This inability to identify a specific person has encouraged managers to speak their minds without fear of retribution for what they have said. This fact has lead to greater candour in the responses. Material that deals with the manager role such as policy documentation and strategies for future managers has also been collected from the Västra Götalands region.

SELECTION OF INTERVIEWEES

The selection of managers has been made from lists of all managers in the Västra Götaland region. The selection was done systematically with the intention of interviewing an equal amount of men and women, as well as systematically selecting individuals to obtain an equal division in regards to geography and organisation.

PREVIOUS RESEARCH

A summary of the primary studies of managers in public organisations is presented in the following text. The summaries describe how the authors define managerness, what their conclusions are and on what they base their arguments. Hagström (1990) gives a research summary of public leadership and describes the current level of knowledge of public leadership. He states that the distinctive features of public organisations have implications for leadership. It is therefore important to distinguish roles such as leader, manager, co-worker and subordinate and functions that include leadership, managerness and fellowship among colleagues. It is also important to study public leadership and public leaders, or rather "[…] the administrative leadership that is practised by administrative leaders on distinct hierarchical levels within different sections of the public administration." (Hagström 1990:9).

In regards to "the public sectors distinctive characteristics" it can be discussed as to what degree and/or how private and public organizations differ from one another. In regards to leadership how much can be transferred from one area to the other. One difference is that within public organizations exists a connection to and influence of political decisions as well as an occasionally unclear role division between political and administrative levels, which does not exist in private organisations. Public organisations are also managed more by formal rules and more open to control from outside the organisation, primarily due to the principle of public access to official records. Hagström defines the terms manager and leader accordingly: An manager is characterised as a person who has subordinates in a formal position who provide him/her with certain tools for the purpose of fulfilling the requirements (among a variety of tasks) necessary to exercise leadership. (Haggström 1990:52) A leader is an individual who has co-workers, in other words, one who in a given situation, by exercising a more or less conscious leadership, not solely consisting of violence, coercion or threat, is able to steer other individuals in accordance with his/her intentions (Haggström 1990:53). An manager can be a leader according to this view, if he/she has co-workers, but a leader is not necessarily an manager. The two terms are intertwined and can facilitate for each others respective success. It is possible to emphasise individual traits as well as situational influence for leadership. There are those who advocate individual traits as most important while others emphasise situational influence.

Hagströms primary conclusion is that there is a lack of knowledge about public leadership and about possible differences in leadership among public and private organisations. He deems that more researchers should study the relationship between leader/manager and the system, the system being the environment and conditions surrounding the leader/manager in public organisations.

Tollgerdt-Andersson (1995) begins her discussion about "managers in the county council – leadership in politically controlled organisations" with a current situational analysis for politically controlled organisations, where actual changes are described. Examples of

situational changes are internationalisation, lack of competent and well-educated labour as well as technological development. Tollgerdt-Andersson writes that there is a deficiency of extensive research about leadership in politically controlled organisations. A particular section deals with, among other things, an unequal division for men and women regarding higher respectively lower positions, in both public and private organisations. For example, there are few women who hold high positions, if the situation in politics is disregarded. Even female leadership is discussed. Afterwards the results of the two studies are described. One of the conclusions is that managers in the county council devote a great deal of their time developing relationships with other individuals through formal and informal meetings. The author believes that this fact implies that managers develop a greater social competence which is perceived as personal ability.

Ingrid Tollgerdt-Andersson finds inspiration for a definition of social competence from Argyle, "The psychology of interpersonal behaviour" (1984), and sees it as "[…] the ability to produce desired results for other individuals in social situations." (Tollgerdt-Andersson 1995:68). Another important conclusion is that an important task for the county council managers is for them to be a communicative link between politicians and managers. This takes place through cooperation with politicians by being attentive and having or developing trust. A central point in Tollergdt-Andersson's study is the differences in leadership between public organisations and the private sector. She deems that an exchange between the two can be positive, however not just a one-sided and uncritical exchange from the private sector to politically controlled organisations. One difference is that people in political committees can oppose one another because it is built on a "conflictual base" and members often belong to different parties. It is up to the county council director to have the controlling as well as the opposing parties' faith because a shift in power can occur quickly. The requirement of openness is also much larger in public organisations compared to the private sector due to the principle of free access to public records.

Östergren and Sahlin-Andersson (1998) state that physicians' managerness is about "dealing with separate worlds – physicians' managerness a meeting of profession, politics and administration". The centre of attention is what a normal day looks like for physicians who are manager managers. The authors' state and other studies show that there is often a meaningful difference between ideal models and what managers actually do in their daily work. The central theme as the title implies is the meeting of the three different ideologies: the professional, administrative and political. The book emphasises the integration of the three areas, instead of making distinctions between them. In the study the term managerness is used and with this term the authors indicate that they see the managers' formal position with its position, responsibility and authority as the starting point. The manager position means being responsible for and controlling the organisation, results, control systems, accounting and follow-ups. Leadership is a task that is included in a manager position. A more detailed discussion or definition of terminology is not done. According to the authors the three aforementioned ideologies are characterised "[…] by three fundamentally different theoretical models of how organisations are thought to work." (Östergren and Sahlin-Andersson 1998:36).

In the professional system the organisation is the place where management is exercised. Structuring the organisation takes place collegially within the professional group, but the professional is also expected to take personal responsibility for his/her work. The administrative system concentrates on finance and administration as well as how the

organisation and business operations can be systematically coordinated. Organising takes place based on hierarchical principles with distinct divisions of labour. That, which the authors view as most important in manager roles, is dealing with the merging of a number of overlapping regulatory systems – "[…] dealing with separate worlds" (Östergren and Sahlin-Andersson 1998:3). The study shows that it is not enough to only formally change in order to overcome boundaries between different healthcare professions. The boundaries between the different professions within healthcare are still distinct. Even the distance and in some cases the mistrust between politicians, administrators and professionals is still large. They do not understand one another's inner logic and culture. The authors therefore believe that more dialogue is needed between the different groups and ideologies.

In conclusion, Östergren and Sahlin-Andersson think that both the manager role and leadership within healthcare should be widened. Due to previous research on managerness and public organisations the following aspects are studied in less detail. The terms managerness and leadership seem to be used as synonyms without deeper analysis of significant differences between the two. Few studies have focused on the distinctive features that characterise the manager role in public organisations. Many studies start with theoretical models of the manager which causes the practicing manager's views on and definitions of her/his manager role to be overlooked. There is also a lack of studies that analyse the differences and similarities between managers that belong to different generations. Finally, few studies of managers in public organisations have a pronounced interdisciplinary approach.

SUMMARISING PORTRAIT OF SEVEN INTERVIEWEES

In this section seven condensed descriptions of interviewees are presented. The intention of this section is to give the reader an understanding of the material upon which the result is partially based.

Riita, head of a hospital clinic:
According to Riita, a woman in her 40's, the biggest problem in the organisation is a lack of labour and funding. Another interesting aspect is even the power struggle that Riita perceives among her older colleagues as well as the fact that she finds that the younger managers are more likely to "roll up their sleeves". This is exemplified by the fact that the younger managers change into their hospital smocks while the older managers do not. Riita means that this is a sign that the older managers are afraid of losing authority, a problem that the younger managers do not perceive.

Olle, head of a hospital clinic:
Olle, a man born in the early 60's, emphasises how exposed one is as a middle manager. Heads of hospital wards are generally registered nurses which creates problems with other professions such as physicians who out of tradition see themselves as having an manager role. An interesting point is that Olle states that it is advantageous that he is a man. Olle sees it as a strength that he does not need to be a manager for his department but rather a leader. It is more interesting to contemplate the younger generation that is coming into the workforce than the existing older generation. Olle means that it is hard for him to understand how these "youngsters" think, that youth today have different values, norms and attitudes than Olle's generation had.

Marika, head of a hospital clinic:
On thing that permeates the interview with Marika, a woman in her 40's, is availability. That is the importance of being there for her personnel and taking the time to listen, primarily concerning work but even personal issues. It is important that her personnel feels well, not only for themselves but for the organisation as well. Marika sees herself as not just a manager, but as a fellow human being. A central issue is also the formal name of her job, *head* of a hospital ward. This is a clear indication for others that she is the boss. Previously, the majority has viewed the physicians as bosses. Another important issue is the network of department heads in which Marika is a member. This camaraderie enforces their role as manager and it is provides important support when one can otherwise feel rather lonely as a middle manager. Marika also discusses the differences among men and women to a greater extent than generational differences. Men and women, for whom Marika has responsibility, require different leadership and the "gender concentration" is high in certain professions. Marika would preferably have an equal division of men and women in the different professions.

Conny, head of a hospital ward:
Conny, a man born in the 60's, talks primarily about himself as a person during the interview and not so much about the organisation. He feels that he must show respect for older colleagues. He does not want to feel required to "put on a show" for them. He would rather be a manager than a leader because he sees that role as more clear-cut.

Birgitta, deputy head of a hospital clinic:
Birgitta, a woman born in the 40's, talks about the changes that have occurred with job assignments and the policy that one could only hold a fulltime job has lessened considerably (women with children). She sees a difference in how one communicates with information technology as dependent on one's generation. The use of technical apparatus concerns healthcare as well. Younger nurses choose technical apparatus instead of communicating with the patients. Birgitta emphasises clearness and would rather be a leader for her personnel than a manager. Managerness is for her a "hallmark of a dictatorship". A problem that Birgitta experiences in the organisation is that people are tired of change. Birgitta states that a change has taken place with the younger employees who demand more than her generation. This change in demands includes even patients, which according to Birgitta, will lead to conflicts in the future. One hazard with generational change that Birgitta points out is the loss of experience that disappears when the older generation retires.

Margit, head of a hospital clinic:
Many of Margit's, a woman born in the 40's, points of view are related to the practical problems, with which the organisation is plagued, primarily the acute lack of personnel. In general, it is the practical organisation that is in focus when Margit speaks of the manager role and leadership. One problem that comes to the surface during the interview is the different starting points different managers have, for example physicians and heads of clinics. Margit also discusses the lack of a comprehensive and long-range plan for healthcare. She believes that each person is only looking out for his- or herself. Margit, as well as many other managers, also discusses the complexities of being a middle manager because of the lack of support from above. Margit views the coming generational change positively, and she hopes that younger generations bring in new ideas which will make the realisation of change easier. It is interesting to note that Margit herself belongs to the "old" generation of managers that within five or ten years will retire.

Siv, head of a hospital ward:
Siv, a woman born in the 30's, states that personnel today expect the supervisor to be a manager and not a leader. The problem within the organisation is the economic pressures that cause one to stretch the boundaries of what employees are capable of. This includes primarily young college graduates who do not know where the boundaries are. They make greater demands, like young patients who nowadays are more enlightened than previous generations. Siv even deals with the negative picture that is painted of healthcare by the mass media. The total picture is that fewer individuals apply for healthcare professions and that the existing personnel are often burnt out.

ANALYSIS AND DISCUSSION

Managers and leaders
The majority of the heads of the clinics focused on leadership as more positive than management, however one interviewee mentioned the importance of the designation boss in order to clarify for outsiders that one holds a manager position primarily for physicians. To be a good manager and leader words such as clearness, presence and availability are emphasised to a large degree. It is even important to dare to be a manager and make decisions. The problem with one's own manager position is that one must often stand for decisions that come from above even though not being personally involved in making the decision.

The interviewees can be divided into two groups. Those who use the term manager as something positive and those make more negative connections to the term. The latter are more positive to being a leader than exercising manager authority. Managerness for them is pointing with the entire hand and giving directives. They want to instead be leaders and on a larger scale develop a dialogue with their co-workers. However, there are a few individuals who regard the term manager as something positive. One individual state that the use of the term manager clarifies for other managers and co-workers the role a person has in the organisation. To be the boss is perceived as a mandate to make decisions. It is a more straightforward way to lead the organisation. Everyone knows who is in charge and who takes the final responsibility.

It is even interesting that the interviewees call attention to the fact that their current title includes the term head. Previously, the position was entitled manager of the clinic, but now the position is entitled head of the clinic. According to the interviewees, this made it clear within the organisation and to other organisations which was in charge. It is primarily nurses who are heads of clinics. Many of the individuals who are entry level managers discuss their function and role versus the physicians. These nurses want to accentuate that it is they who are in charge and have the responsibility for the budget and all personnel including the physicians. According to tradition, physicians have for a long time been perceived as department heads, regardless if they had an actual manager position or not. This is something that deals more with professional affiliation than generational affiliation. According to a few younger managers, the older managers employ a different type of leadership than they themselves. The older generation give more directives to their subordinates instead of creating a dialogue.

Some clinical heads describe differences between healthcare and other professions. This perceived difference is well documented in a variety of reports. Traditionally, healthcare can be divided into caretaking work, medical/clinical work and administrative work. Manager roles

are divided among medical expertise and the administrative staff. Over these positions are the politicians who decide the budget, laws, et cetera (Orban 1995). The hierarchical healthcare organisation has its roots from the 1800's and has obtained its model from the church and military (Lennerlöf 1991). There exists a conflict among the different groups within the medical and caretaking personnel regarding influence and control. Nurse assistants have limited opportunities for influence because communication between nursing assistants and physicians are is very limited. When such communication does occur it is typically in the downward direction in the hierarchical structure. Even among registered nurses and physicians there exists a conflict regarding influence over medical decisions. Medical care is strictly conservative, due to the necessity of maintaining the public's faith in the organisation. At the same time the medical portion of medical care is stringently regulated by laws and ordinances (Orban 1995). These relationships create obstacles for change. Traditionally it is the physicians who exercise the manager role. Nowadays there is a instead a linear organisation where registered nurses as well as physicians can hold an manager position.

The majority of the higher ranking managers and physicians are men, which can produce consequences for middle managers such as heads of wards. Both managerial meetings and meetings with attending physicians take place late in the workday. This is a phenomenon that works poorly for parents with small children. Previously it was a requirement that an manager must work full-time, something one of the interviewees sees as discrimination. This has however changed now and she now works 80% of full-time.

Most of the interviewees stated that they had received good managerial and leadership training, however only in one of the two areas sometimes. In general, many individuals stated that the educational opportunities were good within healthcare. Education is one of the few factors available for attracting personnel. The variance in responses depended on the profession to which the interviewee belonged as well as his/her educational level. For example, managers who were registered nurses were more positive to continuing education and aware of the relevance of education for managerial and leadership positions than managers who were medical secretaries.

How the interviewees view the development of the organisation is also dependent on educational background and professional category. Those individuals with a nursing background clearly saw his/her role in developing the organisation. As a nurse it is possible to further the work of the clinic through the use of discussions with co-workers, personal patient care and restructuring of the organisation.

Many wards experience communication problems. One important reason is understaffing which causes everyone to struggle with their own ward's tasks, leaving little time for communication and distribution of information. This communication problem can even be due to the fact that the various wards have different cultures and are geographically distant from one another. Yet another problem understaffing leads to is that a couple of managers state that they do not have time to attend training courses to the extent they would like to.

According to some of the interviewees, manager positions out of tradition are perceived to be made for people who have "help at home", which few women have traditionally had. Others say instead that this is something that is undergoing change in today's society. These individuals mean that both genders are taking more and more responsibility for housework. This creates the need for new ways to view work and its presumptions. A male manager states

that this new equality causes younger men in leading positions to work more than full-time compared to previous generations. At the same time they are taking a more active role in family life. Despite this development, the majority of the younger men who were interviewed discussed their manager position from a more egocentric perspective than women. Women are more focused on the needs of the family.

In conclusion, many of the interviewees see differences in the roles of leader and manager. There is a difference between leader and manager in which the younger generation views the title leader more positively than manager. Manager is perceived as a formal position that includes subordinates. A leader is of course someone who stimulates and engages co-workers to follow the leader's intentions. A manager can, according to this viewpoint, also be a leader if he/she has co-workers, but a leader is not necessarily a manager. In accordance with this view, the two roles are not strictly distinct. Responsibility for an organisation can be managed by being either a manager or a leader. It can even be managed by integrating the two roles. The interviewees however do not emphasise this synergistic effect. Responsibility for an organisation can therefore be formal or informal. As said by many of the interviewed managers, the ideal is to exercise a manager role by being a leader.

Generational change
The younger managers as a whole perceive a struggle for power towards the older generation of managers. Some of the younger managers think that the older managers try to be mother figures and this is often perceived as offensive by the younger managers. A few even bring up the perceived power struggle that occurs between different professions, especially nurses who are heads of clinics and managers for physicians. A male manager even mentions the gender factor and that in such situations it is easier being a man than a woman. He means that it is easier to be perceived as an authority figure because historically it has mostly been men who have held managerial positions in healthcare. Many of the younger managers cite a difference between themselves and the older managers which is that the younger managers change jobs many times during their careers.

A common problem mentioned by the majority of managers is the lack of economic resources and personnel. One individual used the expression "to get caught up in putting out fires" and means that majority of one's time is used solving daily problems instead of building long-term strategies. The younger managers say that they deal with this by "rolling up their sleeves and working overtime". The younger managers say that the older managers do not change into hospital gowns and because of this, they separate the managerial and clinical aspects of their work. Normal clothing is perceived as authoritative in the clinics. One of the older clinical heads admits that she does not change into hospital gowns because she no longer feels that she can offer adequate care to the patients due to not working actively as a nurse for such a long time.

The answers differed greatly to the direct question as to whether or not the interviewed managers experienced differences in communication and cooperation with others based on generation. Some answered yes, other no and some were unsure. Those who answered yes elaborated with different examples. Some mentioned problems and differences towards managers belonging to another generation. Many brought up the younger managers' expectations of their work, which differed from the older generations' expectations. For example, this group when hired asked what the position could give them personally and what

opportunities for development were involved with the position. This can be compared to the older generations who were glad to be offered a job and gladly accepted a temporary position.

Another factor besides generational gaps that according to some of the interviewees aggravates differences among different co-workers is how long an individual has worked in the organisation. This can sometimes have more effect than the generational gap. Many managers assert that differences are more closely tied to the individual than his/her generation.

A few individuals have pointed out that different generations have different demands for their work. It is far from certain that everyone plans to work full-time in order to be a manager. Furthermore, young nurses fresh out of college make different demands on their work than previous generations. They figure in their free time when choosing a position and insist upon opportunities for personal development. This is something that influences the conditions and terms that are suitable for different positions, especially managerial positions. Therefore it would be interesting to study this in greater detail.

One interesting point is that so many of the interviewees have focused on the younger generation entering the work force, and that they are very involved and work much more than the older generation did right out of college. Also, this generation fresh from university demands more growth in their work. The older managers have even noticed similar types of demands from the patients. They fear that these greater demands will bring about more conflicts between patients and staff in the future.

Which conditions and demands that are suitable for different positions depend greatly on the point of view one takes. An interesting point is that attention was brought to this fact by two different interviewees with two different perspectives, an older and a younger manager. The older manager emphasised the advantage of the earlier system where all positions in her clinic were full-time positions. It was much easier to disseminate information among co-workers and coordinate the organisation. Nowadays with a mixture of part-time positions it is much harder to make the organisation work in an acceptable manner. The younger manager mentioned instead the advantages in not being required to have a full-time position as a manager. She also wants to change certain things in an attempt to adjust working hours according to the needs of the personnel. For example, moving the time a shift starts from 6:45 A.M. until a later time. Many co-workers with children cannot arrive at work that early due to the necessity of first dropping off the children at day-care. Many day-cares do not even open that early. One conclusion from these two points of view is that the older manager starts with the organisation and the younger with the employee.

One question that can be asked is what were the managers born in the 40's like when they were 20 years old? It is easy to be tempted to believe that there is a generational difference, but the question is if that really is the case. Every age has different circumstances. 20 year olds, in general, have big plans and a more flexible family situation. 40 year olds have "settled down" and often want to establish a more stabile lifestyle. The phenomenon of generational change in itself is not new, and it is therefore interesting to see what, if anything, is unique with this generational change. A more general difference between a person born in the 40's and a person born in the 60's is the situation at home regarding how housework and childcare are divided. For example, in Sweden today fathers have two months of child leave and fathers are taking advantage of this more and more. This is something that has changed greatly since

those born in the 40's had children. In the past, it was more common for the man to concentrate on his career and the woman on household duties.

The generational change awaiting us is very special in that there has never been so many in an older generation on their way out of the labour force in relationship to the relatively small amount of people on their way in.

RESULTS

The results of the pilot study highlight problems that in general can be coupled to differences between managers from different generations. There are there central themes:

Power. Managers from different generations vary in their perceptions of and ability to exercise power.
Diversity. Managers from different generations vary in their perceptions of working with diversity and examples of diversity are ethnicity and educational level.
Gender. Managers from different generations have different perceptions of working with men and women.

The following is a presentation that illustrates the different perceptions of power, diversity and gender of managers from different generations.

Power

The younger managers state that they exercise power by participating in and guiding dialogue with their co-workers. They feel however that the older managers have another way of exercising power and communicating:

> One difficulty is that there is a tendency not to "get down in the trenches" among the managers of the different clinics. There is often a struggle for power instead of dialogue. All the other managers that I deal with except for one are between 55-60 years old. These older managers often sweep problems under the rug instead of dealing with them. There role is characterised by being mothers for their clinics. They view their leadership in another way than the younger managers. They issue orders to their subordinates instead of creating dialogue. An example is that none of the older mangers can imagine volunteering and working a weekend as a normal nurse if their clinic is understaffed. My colleague and I do this from time to time. Another example is that the older managers do not change into hospital gowns at work, but instead wear their personal clothes. This is a declaration that they do not work as healthcare givers but instead as managers, and that they are afraid of losing authority if they seem to be on the same level as their subordinates.

Another difference towards the older generation is that the younger managers think it is important to spend time in the coffee room in order to "get a feel for the situation" among their co-workers. The older managers think that this is "suspicious". The younger managers think it is important to listen to their staff, but it is also important to be clear and direct and have the ability to end discussions and make decisions. One younger head of a clinic has a contradictory perception of managerness compared to his/her younger colleagues:

> I have many energetic co-workers, which means that I do not need to take the role of leader. A liken leadership to leading a flock in a certain direction. I am a manager and I see that role as much more straightforward. A managerial position is a formal position that carries with it power and the ability to make decisions.

The older managers describe their communication techniques by saying they communicate with clear directives. They mean that they in their manager role usually distribute tasks by giving clear directives like "now you can do that". They are quick to tell co-workers what to do. The older managers view the manager position positively:

> The good thing about being a manager is that one receives much information and one has the ability to influence one's own and others' work assignments. A great advantage with being an older manager is that if someone believes that one is wrong they will have to wait their time in order to correct it. The bad part of being a leader is being able to be enthusiastic enough.

The meaning of being a manager is linked to responsibility and power. The older managers state that they must have distance to their co-workers in order to take responsibility.

> Previously the boss could be part of the gang, nowadays co-workers expect and demand that the boss will be a boss and take a manager's responsibility. This is because the psycho-social working environment of today is much tougher than it was in the 70's and 80's. The economical restrictions cause individuals to stretch the limit of what workers can handle. I have many cases of burnt-out personnel in my clinic. I feel it is my duty to teach my personnel to distance themselves from their work, especially those fresh out of college.

Paradoxically many of the older managers state that even if the younger managers cannot or do not want to maintain distance and be a manager – or exercise their managerial position by stepping into a role that is characterised by a participatory leadership style – they dare to make greater demands of their work than they themselves did when they were young. Back then one took the salary one got and demanded nothing more.

Another paradox is that the older managers comment on the importance of having distance to their managerial position and their subordinates, but at the same time they want to have a closer relationship with the next level of managers above them. They stress that they desire more support form the hospital board of directors. It is a dialogue with the board of directors that is wanted. They state that all managers in the organisation are invited to meet with the board of directors four times per year, men these meetings are dominated by one-way communication from the board of directors to the hundreds of managers who participate. There are very many chains of command throughout the management structure. One consequence of this is that it can take up to a year to receive a reasonable response to a question. It is very cumbersome.

In the older managers' view on power and the ability to control they mention that communication and structure in the organisation changes with new technology. This development is perceived as a threat by the older generation of managers.

> There is a big difference in how the younger generation of managers use technology, primarily computer technology. It is apparent that the younger generation has been raised with another language. For me it seems unnatural to use computer technology and I feel computer illiterate.

In other words, there is clearly an underlying aspect of power in the generational problem because many of the younger managers feel that they are "babied" by their older managers. Their opinions that show respect for the older managers' knowledge have only come to the surface during an interview. The younger managers often mention how the older managers defend their position with tooth and claw. They brush problems under the rug, they issue orders and they do not change into their hospital gowns. The same conflict does not arise during the interviews with the older managers. For example, the issue about changing into

hospital gowns is explained by one clinic head in saying that she used to always change, but now she has been away from practical work so long that she feels that she does more harm than good. This points more towards a breakdown in communication between generations. When communication breaks down and the younger generation lacks respect for the older generation's knowledge there is a risk that the organisation can lose invaluable competence due to the coming generational change if corrective measures are not taken.

An interesting point with generational change is that the local municipalities do not have the funds to allow the newly hired and the departing employee to work together for a time which means that valuable knowledge is lost instead of shared. When an entire generation retires without being there for the coming generation the chance for mentorships is lost. How does this affect managerness and leadership among younger managers, and what are the consequences for the organisation? Many of the interviewees bring up how exposed their position as a middle manager is. A few of the interviewees also mention how important it is to have contact with others in the same situation through, for example, a network for heads of clinics. This network is very positive and meaningful for their role as manager. An interesting point worth investigating is how one can properly recruit older managers into this network in order to take advantage of his/her knowledge and experience. This can be a form of sounding board or mentorship for a small group of younger managers.

The aspect of power can even be attributed to the difference between different professions. Some of the interviewees point out that the conflicts between doctors and nurses are a much larger problem than generational differences. This is an old conflict which has been further exacerbated by the fact that nurses today are heads of clinics which means that they are administratively in charge of physicians who themselves still have medical expertise. An interesting point is that a few heads of clinics mention that this conflict is reduced if the nurse is a man instead of a woman.

Another interesting aspect is to examine the changes in communication that result from generational changes. This includes daily communication and the support systems that are used such as email. One head of a ward cites that there is a big difference between herself and her younger colleagues because they frequently use email for communication instead of orally conveying information. A fascinating point is how this influences communication between older and younger colleagues as well as how it affects the organisation. Communication is faster but more impersonal.

A central element in the interviews and a subject that all interviewees have mentioned is the lack of economical resources in the Västra Götaland region. This leads to a limiting factor for first-line managers who in turn have reduced authority and opportunities to make long-term plans for the organisation. There work assignments are thereby limited to "the recruiting quagmire". This also inhibits managers from working to improve their situation with physicians and develop and strengthen their positions.

A key aspect that has arisen during the interviews is changes in the psycho-social work environment as a result of diminished healthcare resources. The basis of this is cutbacks in personnel and a salary level that does not follow the curve that exists in other sectors with a workforce in high demand. On many occasions managers mention how burnt-out their colleagues are as a big problem. This places great demands on good managerialness and

leadership as the manager must even function as a therapist. It is worth further investigation to see how these practical conditions influence managerialness and leadership.

Diversity

The younger managers state that they perceive communication problems with other professions. It is primarily physicians who are a difficult group. They see themselves as superior because they have studied longer and because it has always been physicians who have made decisions traditionally.

> There is a myth that physicians are always good managers. This is serious and not necessarily true.

The younger managers' point out that it is not given that physicians are superiors for nurses. There exists a structured organisation where nurses can be managers for physicians. Despite this, the old values live on. Communication should instead take place on similar terms. A younger male manager means that one problem for him and his role as a manger is that he is a nurse. He sees it as an advantage that he is a man, but he implies that his female colleagues have a tougher time asserting themselves with physicians.

Yet another intriguing question we have found and that should be studied further is how increased diversity in regards to ethnical background in society will be reflected in healthcare along with the cultural and linguistical ramifications. Within this area is also included the untapped reserve of academically qualified healthcare personnel who are not offered employment. It is especially interesting in the Västra Götaland region which has a low level of employees with ethnical backgrounds other than Swedish. This is in the long run a problem because many first generation immigrants are aging and in need of healthcare. These individuals often speak Swedish poorly and find themselves in an especially precarious situation.

A comparison shows that 11.6% of the region's inhabitants have a different ethnic background than Swedish while only 4.6% of the healthcare employees in the region have a different background (Göteborgs Posten 010122). Also in the document Visions for Personnel 2010 diversity is emphasised as important for the Västra Götaland region and that employers shall utilise the competencies of foreign immigrants and be a model for increased integration. In the past few weeks in Gothenburg the Västra Götaland region has posted vacancies in healthcare. These job listings have emphasised that applicants with an ethnic background other than Swedish are desired.

Gender

> The male nurses have a totally different way of communicating with the physicians, who are often men, than the female nurses.

The younger managers would like to have a fifty-fifty mixture of men and women in the different professions, but state that the current situation is not so.

One questioned that is raised by the younger managers is how the organisation changes when there are new demands on the conditions of a manager's role and leadership because more and more women (or men) who traditionally are responsible for the family and home, choose

to tackle a managerial position. Changes that have been mentioned but have not yet been adopted are to start shifts, which begin before one has time to drop off children at day-care, later and move times of meetings to times that do not conflict with picking up children from day-care. These are differences that the interviewees have mentioned without being specifically asked. Surely the old traditions have many other problems that must be resolved so that the individual can in harmony combine parenthood with a challenging job. One challenge could for example be to find new forms of employment such as shared managerial positions and greater allowance for flexible working hours.

One of the interviewees deems that women and men demand different types of leadership because women are perceived as being more jealous and as taking more time to solve problems and implement change. Men work faster and candidly. This could even be a reason why the male nurses communicate more easily with the physicians. What do these differences in demands on managers among female dominated and male dominated professions depend on? To what extent is healthcare, a traditionally female dominated branch, adapted to these demands?

Summary of results

The ideal responsibility for an organisation according to the younger managers is leadership. A consistent trend is even the perception that the manager's communicative style should be distinct, humble and believable. The younger managers strive to be a part of the practical work. They state that the older generation work in general with strategic issues. An important gender aspect is that more and more women, who traditionally are responsible for family and home, are managers. In regards to generational change there is a general tendency that the older manager is automatically, because he or she is older, superior communicatively with younger managers. In the study managerial positions and generational change emerge three key themes associated with generational change:
a.   Older and younger managers have different perceptions about the goal of a managerial position.
b.   Older and younger managers have different perceptions about the essence of a managerial position.
c.   Older and younger managers have different perceptions about a manager's worth. Worth is defined as that which is perceived to be desirable and useful for an organisation.

A DEEPER STUDY OF MANAGERIAL POSITIONS AND GENERATIONAL CHANGE

This pilot study has even had as an ambition to identify fundamental areas and questions associated with managerialness and generational change in public organisations. From the results of the study a continued deeper study of manager's goals, substance and worth will be done. Many previous studies begin with theoretical models of managers which does not shed light on the acting manager's view and definition of his/her managerial role. There is also a lack of studies that analyse the similarities and differences between managers from different generations. In conclusion, few studies of managerialness in public organisations have a pronounced interdisciplinary approach.

The basic aim with an extended study is to increase knowledge on how managerialness in public organisations is presented, understood and applied. The intention is even to produce an interpretation apparatus to translate terms in order to understand social, cultural and communicative aspects between different generations of managers. The practical goal is to facilitate generational change for managers in public organisations. The study covers three fundamental problems and six partial problems. In the first problem a discourse about managers is dealt with, in the second managers' practices and in the third the relationship between the discourse about managers and its application.

1. How does the discourse about managers at different levels and among different participants in public organisations appear?
   a. Which concepts are used to make managerial experience meaningful?
   b. Which systems of significance are used by different members in order to define managerialness?
2. What characterises the implementation of managers in public organisations?
   a. Which activities does a managerial position include?
   b. What characterises the relationship between managers and different actors in his or her surroundings?
3. What characterises the relationship between the discourse about managers and the managers' practices?
   a. How does the discourse about managerialness shape a manager's actions?
   b. How does the implementation of a managerial role influence the nature of the discourse of managerialness?

By developing knowledge about a manager's practices and rhetoric in public organisations opportunities are created to ease generational change in public organisations. The practical aim, to ease generational change, deals with increasing the organisational quality of public organisations which is very relevant for working life. From a social perspective the project is meaningful because a developed managerial position can be presumed to be a prerequisite for high quality in ward, care and service for citizens in their role as users, clients and customers. The study will also contribute to the new MBA education at School of Economics and Commercial law, Göteborg University is designing by decree of a proposal from the Västra Götaland region. The education will produce degrees on both the bachelor and masters level.

REFERENCES

Alvesson, M. & Berg, P O., 1992, *Corporate Culture and Organizational Symbolism*, Berlin: Walter de Gruyter.

Alvesson, M., 1991, *Kommunikation, makt och organisation*, Norstedts Ekonomi, Stockholm.

Alvesson, M., 1993, *Cultural Perspectives on Organizations*, Cambridge: University Press.

Alvesson, M., och Willmott, H., 1992, On the idea of emancipation in management and organization studies, *Academy of Management Review*, 17 (3).

Arber & Attias-Donfut, 2000, *The myth of generational conflict*, London, Routledge

Beaudoin, 1998, *Virtual Faith*, New York, Jossey-Bass Publishers

Bengtson & Achenbaum, 1993, *The changing contract across generations*, New York, NY Gruyter cop. 1993

Brown och Coverley, 1999, Succession planning in family businesses: a study from East Anglia, UK, *Journal of small business management, vol 37, no 1, january 1999*

Callon, M., 1986, Some elements of a sociology of translation: The domestication of the scallops and the fisherman of St. Brieu bay. In *Power, Action and Belief*, J.Law (ed.), pp. 196-233, London: Routledge & Kegan Paul.

Czarniawska, B., 1997, *Narrating Organizations. Dramas of Institutional Identity*, Oxford: Oxford University Press.

Czarniawska, B., 1999, *Writing Management – Organization Theory as a Literary Genre*, Chicago and London: The University of Chicago Press.

Deetz, S., 1992, *Democrazy in an Age of Corporate Colonization. Developments in Communication and the Politics of Everyday Life*, State University of Albany, New York Press.

Deetz, S., 1994, *Transforming Communication, Transforming Businesses: Building Responsive and Responsible Workplaces*, Hampton Press, Cresskill N. J. USA.

Deetz, S., och Kersten, A., 1983, Critical Models of Interpretive Research, i Putnam, L., & Pacanowsky, M., (red.) *Communication and Organizatio*n, Beverly Hills, Sage.

Eriksson, R. 1999, *Psykoteknik. Kulturell fabricering av personlig identitet.* Stockholm: Carlssons.

Forester, J., 1992, Fieldwork in a Habermasian way: The Extraordinary Character of Ordinary Professional Work, i Alvesson, M., & Willmott, H., (red.) *Beyond Managerialism. Critical Contributions to Management Studies*, London: Sage.

Geertz, C., 1973, *The Interpretation of Cultures.* New York: Basic Books.

Geertz, C., 1983, *Local Knowledge.* New York: Basic Books.

Geertz, C., 1988, *Works and Lives: The Anthropologist as Author.* Stanford: Stanford University Press.

Geertz, C., 1973, *The Interpretation of Cultures.* New York: Basic Books.

Giddens, A., 1979, *Central Problems in Social Theory, Action, Structure and Contradiction in Social Analysis*, London, Macmillan Press.

Gustavsen, B., 1987, Reformer på arbetsplatsen och demokratisk dialog, i Odhnoff, J., & von Otter, C., red., *Arbetets rationaliteter*, Stockholm: Arbetslivscentrum.

Habermas, J., 1971, *Toward a Rational Society*, London, Heinemann.

Habermas, J., 1972, *Knowledge and Human Interests*, London: Heinemann Educational Books.

Habermas, J., 1975, *Legitimation crisis*, Boston: Beacon Press.

Habermas, J., 1988, *Kommunikativt handlande. Texter om språk, rationalitet och samhälle*, Göteborg, Bokförlaget Daidalos.

Hagström, B., 1990, *Chef i offentlig verksamhet – Forskning kring offentligt ledarskap,* Lund: Studentlitteratur.

Isaacs, W. N., 1993, Taking Flight: Dialogue, Collective Thinking and Organizational Learning, *Organizational Dynamics,* Special Autumn number on Organizational Learning, pp. 24-39.

Kets de Vries, 1988, The dark side of CEO succession, *Harvard business review, january-februray 1988*

Knights, D., & Willmott, H., 1987, Organizational Culture as Management Strategy: A Critique and Illustration from the Financial Service Industries, *International Studies of Management & Organization*, 17, 3, pp. 40-63.

Mann, T., 1992, *Huset Buddenbrook*, Juva, WSOY

Räftegård, K., 1990, Metoder i LOM-programmet, i *Utveckling genom diskussion*, Stockholm: Arbetsmiljöfonden.

Schein, E. H., 1993, On Dialogue, Culture, and Organizational Learning, *Organizational Dynamics*, 1993, Special Autumn Number on Organizational Learning, pp. 40-51.

Smircich, L., 1983, Concepts of Culture and Organizational Analysis, *Administrative Science Quartely*, 28, pp. 339-358.

Smircich, L., och Caláis, M., 1987, Organizationall culture: A critical assessment. In *Handbook of organizational communication*, Jablin, F., Putnam, L., Roberts, K., och Porter, L., (ed.), pp. 228-263. Newbury Park, Calif.: Sage.

T. Parsons and E. Shils (1951), *Toward a General Theoryof Action.* Cambridge, Mass.

Tollgerdt-Andersson, I., 1995, *Chef i landsting – ledarskap i politiskt styrda organisationer,* Stockholm: Landstingsförbundet.

Wikström, E., 1995, *Organiserande och Dialog; Engagemang och möte mellan människor i kommunal verksamhet*, Göteborg: BAS ek för.

Wikström, E., 2000, *Projekt och produktiv kommunikation – en studie om sammanhållande dynamik*, Göteborg: BAS ek för.

Yin, R. K., 1984, *Case Study Research: Design and Methods*, Beverly Hills: Sage Publication.

Östergren, K., och Sahlin-Andersson, K., 1998, *Att hantera skilda världar – Läkares chefskap i mötet mellan profession, politik och administration.* Stockholm: Landstingsförbundet.