Retirement Policies and Support for Emergency Service Personnel: The Transition to Retirement*

Mairéad Bracken-Scally,[1] Sinéad McGilloway,[2] and Jeffrey T. Mitchell[3]

RÉSUMÉ

L'objectif principal de cette étude a été d'examiner les politiques et les procédures pour soutenir les employés prenant leur retraite de leur travail aux services d'urgence. On a mené des entrevues avec les participants qui connaissaient bien les politiques et les procédures actuelles d'un grand ambulance (n = 8) et le service d'incendie (n = 6) en Irlande. Quatre thèmes principaux ont été révélés: (1) «Je ne pense pas que ce soit un bon travail d'etre ambulancier d'urgence quand on a 65 ans»; (2) "ils se sentent véritablement un tout petit peu isolé"; (3) l'amélioration du «choc culturel»; et (4) «Je continue a m'avancer en espérant que tout aille pour le mieux. » Les conclusions indiquent que la retraite est un changement majeur de la vie, et mettent en évidence la nécessité pour une préparation de pré-retraite plus structurée et efficace. Les éléments uniques au personnel des services d'urgence comprennent: le stress physique et émotionnel intense impliqué dans les services d'urgence; une forte identification avec ce service; et un manque de clarté sur les règles et les droits, exigeant meilleure renseignements et préparation pour prendre sa retraite.

ABSTRACT

The aim of this study was to explore policies and procedures to support employees who retire from the emergency services. Interviews were conducted with participants who were familiar with existing policies and procedures in a large ambulance (n = 8) and fire (n = 6) service in Ireland. Four key themes were identified: (1) "I don't think it's a job at 65 to be running out on an emergency ambulance"; (2) "They genuinely feel a wee bit isolated"; (3) improving the "cultural shock"; and (4) "I just keep going and hope for the best". Findings point towards retirement as a major life change and highlight a need for more structured, effective pre-retirement preparation. Factors unique to emergency service personnel include the physical and emotional stress involved in emergency service; a strong identification with the service; and a lack of clarity about rules and entitlements, requiring better information and preparation.

Background

Considerable evidence now exists to illustrate the negative impact on health of occupational stress throughout a working lifetime (e.g., Antoniou, Davidson, & Cooper, 2003; Buddeberg-Fischer, Klaghofer, Stamm, Siegrist, & Buddeberg, 2008; Gray Blix, Cruise, McBeth Mitchell, & Blix, 1994; Law, Steinwender, & LeClair, 1998). For example, it is widely acknowledged that prolonged exposure to excessive occupational demands can lead to poor physical and mental health, increased sick leave, and lower productivity (Cocker, Martin, Scott, Venn, & Sanderson, 2012; Danna & Griffin, 1999; Fox, Dwyer, & Ganster, 1993; Sparks, Faragher, & Cooper, 2001; Tennant, 2001). Johnson et al. (2005) found that people in occupations that involve a high level of stress, such as ambulance personnel, teachers, and police, report below average levels of physical health, psychological well-being, and job satisfaction. Likewise, in a study of stress and chronic disease in aging and retired workers ($n = 100$; mean age: 62), it was found that prolonged stress was associated with overall morbidity and numerous physical and mental illnesses (Salonen, Arola, Nygard, & Huhtala, 2008). However, little is known about the extent to which the effects of such occupation-related stress are sustained into retirement, or how employees in typically "high risk" occupations are appropriately prepared for, and supported during, retirement.

Retirement is a unique transition involving changes in relationships, roles, income, daily routines, and health (Burr, Santo, & Pushkar, 2011). Although at one point retirement was the shortest stage of life, it may now be the longest (Anthony, 2006), and today's workforce will typically spend 10 to 15 per cent of their lives in retirement (Hoyer & Roodin, 2009). The nature and definition of retirement have evolved to emphasize activity and engagement rather than leisure and rest (Anthony, 2006) and to encompass both paid and unpaid employment (Wang & Shultz, 2010). Typically, models of "transition to retirement" relate specifically to the end of labor market participation (Stone & Deschênes, 2003). However, key aspects of the transitional process may occur without a change of position in the labor market, including a phased retirement programme with reduced working hours, fewer working days, job sharing, and so on (Clark & Quinn, 2002). Thus, Stone and Deschênes (2003) argued for a broader definition of "transition to retirement" that extends beyond labor market position to include activities undertaken, steps made, or decisions taken (including psychological preparation and deliberate knowledge acquisition and planning), thereby providing an extended model of the transition to retirement which incorporates a significant element of preparation.

Arguably, many of us are "defined" by the jobs that we do, and consequently, loss of occupation can lead to a profound sense of loss, boredom, and feelings of uselessness (Lazarus & Lazarus, 2006). The benefits of employment that are often missed by retirees include (a) identity and status, (b) camaraderie and affiliation, (c) structure and routine, (d) direction and meaning, (e) personal satisfaction, and (f) intellectual stimulation and challenge (Rich, Sampson, & Fetherling, 2000). Such losses may present significant challenges for the retired individual and/or their family and especially in the absence of sufficient preparation (Brenner & Shelley, 1998). With growing numbers of people living longer, it is becoming increasingly important to understand predictors and moderators of well-being in retirement (Burr et al., 2011) as well as what is needed to support people both in retirement and immediately before and during the transition to retirement.

In our current study, we focused on emergency service personnel, a group of people who regularly execute extraordinary duties that benefit, and often save, the lives of others (Mitchell & Bray, 1990). They work in an unpredictable environment and face a unique set of challenges in their role (Sofianopoulos, Williams, & Archer, 2012). One of the most distinctive characteristics of emergency service work is the reality of regular exposure to trauma and a range of other work-related stressors (Beaton, Murphy, Johnson, Pike, & Corneil, 1999). Despite this extraordinary role, emergency personnel remain ordinary human beings subject to the stresses and strains of daily life (Mitchell & Bray, 1990).

Recent years have seen a growing interest in the impact of trauma on emergency personnel, and it has been argued that they may experience an increased risk of developing symptoms of post-traumatic stress as a result of incidents at work (Chamberlin & Green, 2010; Mitani, Fujita, Nakata, & Shirakawa, 2006; Hill & Brunsden, 2009; Ward, Lombard, & Gwebushe, 2006). Therefore, employers have a duty of care to protect their staff against the effects of stress and trauma (e.g., Deahl et al., 2000; Hobbs & Keane, 1996; MacEachern, Jindal-Snape, & Jackson, 2011). Optimal workplaces recognize and value the needs of employees beyond their specific job and work duties to address the "whole person" (Burchell & Robin, 2011). Arguably, this duty of care also applies to employees who are about to retire, or who have just retired, from high-risk occupations: employees such as military personnel, intelligence analysts, first responders, firefighters, and police officers (Britt & McFadden, 2012). As we just indicated, employees retiring from such high-risk occupations require a great deal more adjustment than do older workers in general and have different pre- and post-retirement needs due to the high-octane nature of their profession.

The current study utilized Stone and Deschênes's (2003) "transitions to retirement" framework and formed part of a larger mixed-methods study on the quality of life of those who have retired from the emergency services in Ireland – a topic about which very little is known. The current study provides important background/context to the other two stages of the investigation which examined experiences, quality of life, trauma symptoms, and well-being in emergency service retirees (Bracken-Scally, McGilloway, Gallagher, & Mitchell, 2014). We selected the Stone and Deschênes (2003) framework following a review of a large number of retirement models as it most accurately fit with the research question of our study. Our overarching aim of this qualitative study was to explore current policies and procedures for retirement in the emergency services in Ireland, with a view to (a) improving the transition to retirement for this occupational sub-group; and (b) improving our theoretical understanding of retirement and transition. The central research question focused on how we can best use the knowledge and experience of current emergency service personnel to improve the transition to retirement for those retiring from high-risk occupations.

Method

We based the study on qualitative methods as these were considered the most appropriate means by which to address the aforementioned objectives and also to generate in-depth accounts of the topic under investigation (Carlsen & Glenton, 2011; Kuper, Reeves, & Levinson, 2008).

Participants and Settings

Purposive sampling was used to elicit a wide diversity of views across two key emergency services; thus, we recruited participants from the ambulance ($n = 8$) and fire services ($n = 6$) through personal contact with interviewees and liaison with the management of each of these services. The former were from a national ambulance service within the Republic of Ireland, covering both urban and rural areas, whereas the fire service was based in the eastern region of Ireland where all staff are trained as both firefighters and paramedics. Participants were recruited until data saturation had been reached (i.e., no new information was being given), and, as recommended by Kuper, Lingard, and Levinson (2008), the final sample size was also deemed to be entirely appropriate in addressing the research questions. Participants were identified with a primary focus on managers ($n = 10$), who were mainly office-based but with considerable previous operational experience; this group was considered to have some knowledge of relevant policies and procedures due to,

for example, their personal experience and/or knowledge of the topic (Cleary, Horsfall, & Hayter, 2014), their high level of interaction with a significant number of staff on a day-to-day basis, and their considerable number of service years in the organization. The sample also included trade union representatives ($n = 2$) and others (i.e., 1 staff representative body [personnel association] and 1 member of a retired members association).

All but one participant were currently employed within the service; the other, who had retired from the fire service, was actively involved in the organization's Retired Members Association, and was, therefore, identified for inclusion in the study. The study focused on the prospect of retirement and perceptions of retirement as most participants were currently employed within the service. All but one interviewee was male, and the average age of the participants was 53 years ($SD = 7$, ages 42–73) with an average of 27 years in the service ($SD = 6$). All participants had worked in a variety of roles within the service, thereby demonstrating a considerable breadth of experience and included the following: ambulance service management (AM); ambulance service representative (union or other; AR); fire service management (FM); and fire service representative (union or other; FR).

Interview Procedure

Each interviewee was furnished with an information sheet and consent form and provided written informed consent to participate in the interview, and to have the interview recorded. A semistructured interview schedule was devised to elicit detailed information on a number of pre-defined key topics (selected through background reading and initial informal discussions with key stakeholders, later developed into four anticipated key themes) with the opportunity for participants to expand upon these and other relevant topics. Pre-defined topics were as follows: (a) perception of current retirement policies and procedures; (b) support for retirees; (c) improving the transition to retirement; (d) current contact with retirees; and (e) facing one's own retirement. We conducted interviews on either a face-to-face basis or via telephone, and they lasted, on average, about 30 minutes. All data were transcribed verbatim, edited for purposes of clarity only and subjected to a framework analysis using five steps: familiarization; identifying a thematic framework (as per pre-defined key topics); indexing; charting; and mapping and interpretation (Srivastava & Thomson, 2009). Data were coded primarily by one author, with inter-rater reliability established through an examination of a sub-set of interview data by a second author.

The study was conducted in accordance with the ethical Code of Conduct of the Psychological Society of Ireland

(2011) and the British Psychological Society (2009). Ethical approval was received from the Social Research Ethics Sub-Committee of Maynooth University in 2011.

Results

We identified four anticipated key themes from the analysis, all of which are described in this section (see Table 1).

'I Don't Think It's a Job … at 65 To Be Running Out on an Emergency Ambulance'

Notably, there is a difference in retirement age between the ambulance and fire service personnel that our study involved. Although ambulance personnel ordinarily retire at age 65, per organizational policy, the fire service has a retirement age of 55 (with the option to extend this by up to 10 years). Hence, retirement age is discussed separately for each emergency service.

Ambulance Service
Some minor discrepancies existed among participants in relation to their perceptions and views around the retirement age in their service; for example, some (*n* = 3) outlined that the retirement age is 65 for all staff, two stated that personnel can retire any time after age 60, while one indicated that retirement age is 60 for officers and 65 for operational staff. This demonstrates some disparity in knowledge and/or information available to personnel surrounding retirement age. The option to apply for a one-year extension to retirement age was also mentioned by two interviewees. The physically demanding nature of frontline ambulance service work was highlighted in relation to the difficulties staff may have remaining in this role until 65. Furthermore, one participant expressed a concern that many people have to retire before they reach 65 because of this, while another expressed a concern as to whether he will be in his current occupational role at retirement age as he did not feel that the current job is suitable for someone aged 65.

The difference between the retirement age in the ambulance service and other emergency services was raised by two participants, with a view that 65 is an unsuitable retirement age for operational staff (i.e., those working "on the ground", and not in office-based positions) (*n* = 4):

> I don't think it's a job for someone at 65 to be running out on an emergency ambulance, having to go up four flights of stairs … to be putting them under that pressure when you're seeing other services retiring earlier. (AR02)

Conversely, it was suggested by other participants (*n* = 3) that staff should be allowed to contribute to the service after retirement age if they wish. This concurs with recent research which suggests that the challenge of the aging workforce may be addressed by encouraging retirees to return to work (Armstrong-Stassen, 2008). However, it was felt that this contribution, post-65, should be on a voluntary basis (i.e., not mandatory). For example, one interviewee stated:

> In the past 12 months I've had four people … asking me … and nearly pleading with me personally, could I not keep them on or have a word with somebody to keep them on for so many hours a week, post 65, because they just did not want to stop. (AM02)

Fire Service
Here, again, participants offered a range of views on how retirement age varied by rank and role. For instance, one interviewee indicated that retirement age differs by role; for example, firefighters must retire at age 55 while district officers recruited after 2004 must work until age 65. Two interviewees indicated that, generally, retirement is at 55 after 30 years' service while there were mixed views on the suitability of 55 as a retirement age:

> [55 is] generally a young age to be retiring so there's a long time between 55 and the normal retirement age, and not everybody would be interested in going out to do a different job. (FR01)

Table 1: Key themes and sub-themes

Theme	Sub-themes (if applicable)
"I don't think it's a job at 65 to be running out on an emergency ambulance"	Ambulance service Fire service
"They do genuinely feel a wee bit isolated"	Nature, and extent of, current contact with retirees The need for support and supports available
Improving the "cultural shock"	Information and communication Wind-down to retirement Recognition Health promotion
"I just keep going and hope for the best"	Important considerations Retirement as freedom

> The 55 age limit, I feel, is correct. I don't think it should be increased because of the shift work involved, it's a long shift; I know that as I get older it's getting harder to do the shift. (FM04)

One interviewee reported that the retirement age of 55 was a major incentive in pursuing the job, whereas others highlighted that staff are more cognizant of the retirement age than those within other organizations because of the reduced retirement age. Ambulance work within the fire service was also mentioned as being a more difficult, physically demanding aspect of the job, despite the provision of supports such as stretcher lifts. The physical health implications of the job were also highlighted and included reference to back problems, which may have longer term effects into retirement. The need for a physical assessment for all personnel over age 60 was also indicated as something the service might wish to consider as a means of monitoring the physical health of older personnel:

> You have to be fairly physically fit and you have to be young, and it's not doing anything physically for people in their late fifties …if they're trying to do that sort of work. … I think that it's reducing their possibilities of having a long and healthy retirement. There should be a proper physical assessment of people at 60 if they want to stay on until 65. (FR02)

This is consistent with Stone and Deschênes's (2003) model of transitions to retirement. Notably however, the introduction of such an assessment may mitigate against employees if they are not deemed physically fit for the job, and may result in negative "knock-on" effects within the organization more generally.

'They Do Genuinely Feel a Wee Bit Isolated'

There was a general consensus among participants that retirement may bring isolation for some retirees who "do genuinely feel a wee bit isolated because there's no formal process for them still having contact with something that was a significant part of the lifestyle" (AM01). Nonetheless, it is reassuring to note that all interviewees reported that they had at least some contact with other staff who had retired from the service, mainly on an informal basis. This suggests, in line with continuity theory (Parker, 1982), that coping with retirement is improved through continuation of previous roles (e.g., through continued contact with former colleagues). The close relationship which often exists between former work colleagues was highlighted by two participants and, in particular, the relationship and camaraderie between crews. Thus, staff from both services often stay in contact with retirees as they have developed career-long friendships.

No formal systems were in place (e.g., regular communication from the organization), though, to allow personnel to remain in contact with retirees. Such systems could potentially provide a means of buffering against any negative impact of retirement, and provide an additional source of social support for retirees, particularly for those living alone. Recent research has demonstrated that "feeling that somebody cares" is an important contribution to successful aging (Reichstadt, Sengupta, Depp, Palinkas, & Jeste, 2010), thereby emphasizing the importance of formal supports for retirees. Opportunities for informal contact with retirees included (a) meeting with friends who have retired from the service ($n = 3$); (b) social functions (e.g., Christmas parties) ($n = 3$); (c) contact through the retired officers club (a social organization for retired members of the fire service; $n = 2$); (d) social contact through organized activities (e.g., bowls club [$n = 1$]); (e) "bumping into" (FM03) retirees locally ($n = 1$); and (f) attending funerals of personnel (current or retired) ($n = 1$). The representative of the fire service Retired Members Association was the only individual who had regular ongoing contact with retirees. However, contact with retirees varied according to role; thus, one senior manager stated that he had had contact with personnel prior to retirement when providing retirement and financial advice.

Importantly, those who were currently employed within their service ($n = 13$) were not aware of any formal supports (e.g., counselling, advice service) provided by their organization, thereby demonstrating a clear gap in this respect in both organizations. However, only two people indicated that such supports would be very beneficial, although difficulties in relation to obtaining financial support for such provision were also highlighted. Indeed, the current financial climate was a recurring concern here.

Reassuringly, however, a number of participants highlighted the benefits of hosting regular social gatherings for retirees. Notably, and as mentioned, there was a Retired Members Association in place for the fire service in this study, and, according to interviewees, this provides considerable support for retirees by hosting monthly meetings, as well as organizing day trips, shorter trips around the country and longer holidays abroad: "If you want to stay connected with the social club, they have a very active retirement section there and they go on holidays every year; they organize great trips … and things to get together" (FM02). There were approximately 130 members of this association (of approximately 350 retirees) at the time of the study. However, there was a general consensus among the fire service participants ($n = 4$) that the active involvement of retirees in these organizations varied greatly.

There was no similar association in place for ambulance service retirees at the time of the study despite a number of attempts over the years, although it was noted that a

retirement organization was in place for members of the parent organization (i.e., the Irish Health Service Executive) of the ambulance service. Significantly, interviewees felt that a retirement association specifically for ambulance service personnel would be beneficial: "It would be nice to see an organization where, even if it only organized a get-together once a year for the retired staff rather than this, just, isolation" (AM01). However, a number of (ambulance) interviewees (*n* = 3) referred to informal associations or supports in place for retirees, such as a golf association and an annual mass. No such supports were mentioned by other ambulance interviewees, though, thereby demonstrating considerable variation in this respect across regions. Several participants also alluded to a need for more direct one-to-one support for retirees "because it's such a big change going from being on call, to 12-hour shifts, to nothing" (AM02). The need for more support included suggestions to provide a counselling/guidance service and a retirement coaching service to help personnel decide the most appropriate time to retire:

> My partner – it was a lot of turmoil on him whether to go or not to go. But it was a big, big decision and it caused him a lot of strife and maybe, if there had been supports there for him … even in a coaching type way … to help him make his decision … I'm sure it's the same for a lot of people. (AM04)

The difficulty that retirees experienced in retaining formal links with the ambulance service was also highlighted (*n* = 3), and this was explained, in part, by the geographical spread of the service. It was also suggested here (*n* = 2) that some retirees may not wish to have any organizational contact post-retirement. Possible reasons why retirees might have limited contact with the organization following retirement included the possibility that some retirees "decide to cut all ties once they retire" (FM03); the organization was not sufficiently proactive in maintaining contact with retirees; and there was a loss of "momentum" (AM05) in the motivation to maintain contact between retirees and the organization over time. This notion of extricating and cutting all ties with a former employer post-retirement is in line with disengagement theory which postulates that disengagement is an inevitable process in which the relationships between the individual and society are either severed or altered in quality (Cumming & Henry, 1961).

Improving the 'Culture Shock'

The importance of retirement as a life stage, and a key transition towards a significant life change, emerged clearly from the findings with descriptions such as a "huge life change" (AM02) and a "culture shock" (AR01). It was indicated that retirement can cause distress if staff are not sufficiently prepared, and interviewees

referred to financial issues especially within the context of current economic constraints in Ireland; in other words, recessionary factors and financial cutbacks have led to a "fear factor" (FM02) for staff approaching retirement due to issues surrounding, for example, taxation of pension payments and other entitlements (e.g., lump sum payable on retirement), as well as incentives for early retirement of public sector employees. Ordinarily in the Irish context, personnel are paid a reduced pension if they retire early and have not completed the required number of years in service to qualify for the pension. Notably, this emphasis on retirement preparation and planning is in keeping with Stone and Deschênes's (2003) model of "transitions to retirement", which stipulates that the preparatory period for retirement (transition) should be initiated earlier in the employment cycle of personnel. Two interviewees felt that staff were also thinking more about their retirement (short, medium, and longer term) because of the current financial situation:

> I think maybe the only reason that people are beginning to think more and more about retirement now is because of the current economic climate because it's being pushed on them and they're thinking now "what if I don't go now, will my lump sum be taxed?" (AM02)

Thus, financial issues were an important consideration for retirees as well as for those considering retirement.

The key theme which emerged in relation to improving the transition to retirement related to the implementation of a more structured approach which was discussed and/or suggested by a large number of interviewees, either directly or indirectly. This incorporated the provision of information to personnel in pre- and post-retirement years, and making available a "step-down" facility for staff and/or using a sliding scale of hours in pre-retirement years. Notably, these suggestions expand upon the model of transitions to retirement (Stone and Deschênes, 2003).

The importance of the first of these was evident from the number of interviewees who emphasized the need to increase awareness and to provide information on retirement at an earlier stage through, for example, pre-retirement seminars which would take place between three and four years in advance of retirement. In this way, those in advance of retirement could think about retirement in a more constructive way. This suggestion is inextricably linked to the provision of a pre-retirement course, discussed later in this article. A more specific suggestion in this respect included an information leaflet developed specifically for retirees (and which would include frequently asked questions as well as information on funeral entitlements, and a pension calculation formula). It was highlighted that

difficulties often arise in calculating pension entitlements, and a fixed formula would, therefore, be highly beneficial if included in an information package:

> I would like to see a booklet that's readily available … and all the answers to your questions… that a pensioner would want to ask would be in this booklet. And then even the calculation; how they're actually doing the calculation, things like that. And then, after the fire brigade, what is available for you … At least a booklet or something … to say "this is what you're entitled to; God forbid, if you did die, your family can contact this number." (FM02)

The importance of a structured approach to retirement planning was also mentioned as was the need to inform staff about the financial implications of retirement "because a lot of people find that very difficult to actually get what it actually is they're entitled to; it is complicated" (AM05).

All interviewees were aware of a pre-retirement course, although there was some variation in their knowledge of those provided. Typically, these courses provide information on (a) a positive approach to retirement, (b) financial planning, (c) personal taxation, (d) social welfare entitlements, (e) legal issues, and (f) organization pension scheme (personal correspondence with fire service, 2012). Three (ambulance) participants highlighted a lack of information in relation to pre-retirement courses across a number of areas. For example, while some (n = 3) reported that the course is run specifically for emergency service personnel, others (n = 6) stated that it is a generic course run by the larger parent organizations (i.e., the Irish Health Service Executive, and Dublin City Council). The utility of a pre-retirement course specifically for emergency personnel was identified: "Definitely I think that a general pre-retirement course is not enough for somebody going from frontline ambulance duty; you're coming from a very high octane, very adrenaline driven job to nothing" (AM02).

A number of interviewees (n = 6), from both services, spoke positively about the pre-retirement course and/or remarked that they had received positive feedback about the course. There was a lack of clarity, though, in relation to the duration of the course as some indicated that it had been shortened in recent years. Some suggestions were made in relation to the future development of courses. It was noted (n = 3) that information on courses should be provided at an earlier stage in employees' careers rather than in the final weeks of employment, including at induction or mid-way through their career. This suggests, as we discuss later, that the transitions to retirement model could be extended to incorporate improved information in the pre-retirement years. Importantly, it was also highlighted (n = 3) that

access to courses may prove difficult, and sometimes staff attendance at these courses was not facilitated:

> I know there is the retirement courses available, but the problem with us … is we can't get on the courses. Because if it's on when we're on duty, where other departments would be just let go on, we can't. (FM02)

It was suggested that a text messaging system for all staff, including retirees, be implemented. Importantly, a small number (n = 2) of interviewees suggested that retirees need to be better informed about funeral entitlements for ex-service personnel. Although many retirees are involved with the Retired Members Association and remain "in the loop" (AR02) with what is happening within the service, those who are not involved with this association may benefit from the implementation of a text messaging system. Such a system could operate on an automated basis whereby regular updates on developments within the service, as well as information and support contact details for retirees, could be circulated.

Second, a step-down facility or sliding scale, within the framework of a broader structured approach to retirement, was suggested by more than half of the sample (n = 7) to facilitate a smoother progression to retirement:

> How can you just switch off and walk away from all that at the end? (AR01)

> I just find that it's too much of a shock for them to just have to stop like that. It can't be good for them, you know. I think they do need some kind of an ease down. There should be some kind of a step down. (AM02)

Suggestions for more senior personnel to change their work role closer to retirement rather than remaining on the frontlines, were also proposed (n = 4). Some suggestions included moving to the patient transfer service (an inter-facility transfer service designed to increase the number of frontline vehicles available for emergencies) or transferring to a teaching or office-based position, or other less stressful and physically demanding roles. For example, one interviewee stated:

> I do honestly think that if we took a structured approach to retirement –so looking at people in their mid-fifties onwards, … and thinking about what jobs could they successfully and happily do beyond age 65, even if it was reduced hours … which would keep that expertise in house and avoid this sudden "big bang" at 65 where they're just cast out. (AM01)

The notion of a sliding scale is not new and has been identified elsewhere (Bouffartique & Bouteiller, 2006) as providing a "wind down" period or reduced hours during the final years of employment to help personnel

to adjust to retirement and to "avoid this sudden big bang" (AM01). The notion of a sliding scale of hours was viewed positively by many participants. However, it is important to consider the possibility of implementing such a system in light of the financial consequences (e.g., pension contributions).

It was suggested by a large proportion of participants (*n* = 5) that management should implement a formal system of recognition for employees in order to improve the transition to retirement as this was highlighted as a current gap in the service: "When your day comes up, you're just a number" (FM02). A lack of recognition from senior management was also highlighted (*n* = 3). The importance of acknowledging retirees, both pre- and post-retirement was raised by several participants:

> I think it would be nice to have some bit of acknowledgement there. (AM02)

> Maybe the person would go up and see the Chief Fire Officer when he is retiring so the Chief Fire Officer would actually shake their hand, a couple of words … That style of thing could improve I think. There's always room for improvement. (FM01)

> When I had made my decision to retire, I thought that there would have been more support and that I would have got more acknowledgement. (FM04)

Such acknowledgement could be provided in the form of formal contact from management in the lead-up to retirement, or through the provision of further support for retirees. Half of the ambulance service interviewees also alluded to several recent "long service" awards made to a number of retirees which were viewed very positively and highlighted as something that would be beneficial if implemented on a regular basis into the future.

The need to promote appropriate health and well-being prior to retirement was also suggested by a number of interviewees as "it's too late when you're 65 to try [to] start being healthy" (AM03). The importance of health for all personnel was also heavily emphasized (*n* = 6), and it was felt that staff should be encouraged to engage in a healthy diet and lifestyle throughout their career. Two interviewees specifically suggested the use of health screenings to ensure that staff are afforded the opportunity to retire in good health. This is clearly an important consideration and not least because it was indicated by half of the ambulance service interviewees that there are (perceived) high mortality rates among ambulance retirees. For example, one interviewee alluded specifically to a rapid deterioration in retirees' health during retirement while the large number of retirements due to ill health in the ambulance service in recent years was also noted: "They'd have retired and half of them have been sick relatively soon after retiring. Life expectancy within the paramedic

is not as high as other areas within the social structure" (AR02).

'I just keep going and hope for the best'

Retirement "looms as a social fact for many workers in industrialized countries" (Kosloski, Ginsburg, & Backman, 1984, p. 331), and for this reason, we also explored participants' thoughts on their own retirement. Only those interviewees still working within the service (*n* = 13) were asked about this. For most (7 of the 13), financial security was highlighted as an important aspect when considering retirement and was clearly a significant source of anxiety for all personnel:

> The last while I've been thinking on it financially. I need to set myself up for retirement, which probably hasn't occurred to me before or maybe that's just because I'm at that age now; I'm in my late 40s. (AM04)

All five fire service interviewees indicated that they had considered their own retirement to a greater or lesser extent, although one suggested that it is important not to focus on retirement prior to retiring as often staff can "retire before they retire" (FR01) when this occurs. Likewise, one ambulance participant commented:

> I just keep going and hope for the best. I've never actually looked that far ahead. I'm very poor actually on pension entitlements and all of that stuff. I've never checked any of that out because I have a few years to go yet. (AM05)

Two others referred to what they considered to be very positive aspects of retirement in terms of having much more free time to pursue other things, feeling "that my time will be my own" and "not having to go to a calendar and saying 'no, I'm rostered on duty, I can't do that'" (FM04). Notably, the freedom in retirement, from having to follow a roster, is a unique aspect of occupations characterized by shift work, although, arguably, these may be more relevant to emergency service personnel due to their typically high levels of commitment to the job (Keef & Harcourt, 2001). Thus, it would appear that retirement is something which some participants, in many ways, were looking forward to, although by contrast, others expressed an attachment and positivity to their working life/occupational role which might make retirement a less positive experience for them. Thus, some mixed views in relation to retirement were in evidence: "Half of you is looking forward to retirement and the other half isn't" (AR01) while another stated, "I thought about it and then I didn't think about it because I enjoy what I do" (AM06).

The potential impact of leaving a job which has been the centre of an employee's life for a significant period

of time was also mentioned, as was the loss of social contact on retirement:

> I'd be reluctant to leave the service. I have to say I will because I joined it as a fairly young man and it's been a significant part of life. (AM01)

> Sometimes I think, God, you know, wouldn't it be great now, and times I think, God, work on as long as you can because there is a social aspect to work as well. And how would I say it? I like work. Sometimes you give out about it, but there is a huge social aspect to it. (AM04)

The importance of good health in retirement was also highlighted by interviewees. For example, one interviewee outlined that they were looking forward to their retirement, but this is contingent on good health: "I'm beginning to realize how important your health is to you, and I suppose that comes to us all." (AM02)

One fire service interviewee, aged 61, had stayed in the service beyond official retirement age (55 years), despite financial loss, mainly because he was not looking forward to retirement as he had few interests outside his job. This highlights the importance for those approaching retirement of cultivating other interests that perhaps they can pursue into retirement. There are a number of benefits of leisure pursuits and hobbies for older adults, including successful aging, increased engagement with life, and improved transition to retirement (Lu, 2011). The importance of activities and interests in relation to retirement and preferred retirement age has also been highlighted in the literature (Nicolaisen, Thorsen, & Eriksen, 2012). In the current context, it might be possible to encourage activities and interests (and their potential benefits) through routine staff training and up-skilling.

Discussion

We undertook this study to explore a number of issues relating to retirement within high-risk occupations, namely emergency services. Importantly, a number of key themes emerged which apply not only to high-risk occupations and employees, but also to other occupational subgroups. Some of the findings are consistent with previous research in the area, while others advance our understanding of key issues. Overall, the study findings fit well within Stone and Deschênes's (2003) model of "transitions to retirement", but they also suggest that this model could be extended to incorporate several factors that might help to improve the transition to retirement "process", such as health promotion and awareness, a sliding scale of hours in pre-retirement years, and more focused knowledge acquisition and planning (as discussed further on). In sum, the key findings which support this model include (a) the importance of monitoring health across the career, (b) the potentially beneficial role of retirement preparation and planning,

and (c) the suggestion to implement a structured approach to retirement. Linkages to other models and theories of retirement are also discussed further on.

Unsurprisingly, retirement as a major life change was emphasized throughout the findings. This is consistent with recent research which, for example, shows that the transition to retirement involves a certain level of stress and anxiety, although it is important to bear in mind that the impact of retirement varies across and within individuals over time (Wang, Henkens, & van Solinge, 2011). Financial issues were also repeatedly mentioned by participants in the current study. This is in line with McGarry (2004), who argued that the decision to retire affects an individual's economic well-being for the remainder of their life. However, these issues assume an even greater significance in the context of the severe economic constraints in Ireland (and several other European countries) in recent years.

The physically demanding nature of ambulance and fire service work was also repeatedly emphasized throughout the interviews, as was the elevated risk of developing physical health problems from emergency services work. Likewise, recent research suggests that workers in more physically and psychologically demanding jobs (e.g., health care), are more likely to choose to retire earlier (Wang & Shultz, 2010). Little research has explored the transition to retirement in these groups, and this has also received little or no attention in current theories on retirement. Shift work was identified as an aspect of the job which becomes more difficult with aging, and while nightshift work has been found to be unpopular among more mature staff members generally (Loretto & White, 2006), it is a regular fact of life for emergency service workers (as well as other shift workers) and, therefore, merits greater consideration in this context.

A key theme related to concerns about the appropriate age at which to retire and the suitability of the retirement age cut-offs within each service. Likewise, previous research has suggested that age is an irrelevant criterion for retirement (Settersten, 1998). For example, Gamble et al. (1991) found that 54 per cent of ambulance officers over age 40 and a surprising 24 per cent of those under age 40 had difficulty with a simple work-related task (walking at 6 km/h). Hence, functional capacity, rather than age, should be the main criterion for retaining ambulance personnel. This is quite a complex issue because older workers may feel pressured to retire in accordance with workplace and societal norms applied to retirement age rather than their physical capacity (Settersten & Hagestad, 1996). Anecdotal evidence suggests that some older workers are being absorbed into office-based positions but that the vast majority remains on the frontline in their later

years in the job due to the limited number of office-based positions available. It may, therefore, be beneficial for emergency service organizations to adopt a more flexible attitude towards their retirement criteria on the basis of physical capabilities rather than age per se and, accordingly, to implement perhaps some kind of screening procedure that will facilitate a more open and informed approach to retirement. This more flexible approach to retirement and cessation of employment is consistent with Stone and Deschênes's (2003) model of transitions to retirement.

The issue of retirement age was linked in our study not only to the importance of health screening, but also to the need to promote a healthier lifestyle (and health awareness). Recent research on retirement and health suggests that an individual's health significantly affects their decision to retire (Schirle, 2010; Wang & Shultz, 2010), perhaps even more so than financial factors (McGarry, 2004). Crucially, poor mental as well as physical health has also been shown to predict workforce departure and early retirement (Olesen, Butterworth, & Rodgers, 2012; Rice, Lang, Henley, & Melzer, 2011). Thus, the small pool of international studies in this field emphasizes the importance of health in both retirement planning and the lead-up to retirement. According to Pond, Stephens, and Alpass (2010), health plays a major role in an individual's decision to retire in a number of key ways. For example, individuals may decide to retire while healthy to fulfill other life goals. More generally, ill health may decrease an individual's psychological well-being, change their attitude towards life goals, and affect major life-changing decisions (Bhatti, Salek, & Finlay, 2013). Thus, the importance of health in retirement remains a key consideration for organizations throughout employees' careers. Significantly, the importance of health throughout the career builds upon the transitions to retirement model (Stone & Deschênes, 2003) in terms of identifying potentially relevant factors such as health literacy.

A structured approach to retirement was recommended by participants in the current study in order to improve the transition to retirement. Importantly, the notion of a sliding scale of hours was viewed positively by many participants. Notably, however, gradual retirement is not commonplace in Ireland, and considerations around pension eligibility and entitlements often mitigate against winding down; this issue requires further exploration. The importance of pre-retirement preparation and planning was also highlighted, particularly in relation to the provision of effective preparation and support for employees. International research demonstrates that formal retirement planning, such as pre-retirement courses, seminars, and information, leads to increased levels of adjustment in retirement across a range of occupational settings (Wang & Shultz, 2010). Furthermore, those who undertake the most effective retirement planning (i.e., including in-depth dialogue with the self and others) are generally the most successful retirees (Rich et al., 2000); this finding is important in highlighting the "added" value of retirement preparation and planning among emergency service (and other) personnel. It is also critical that the employer ensures that employees develop a positive attitude towards retirement through training and education and especially in view of evidence to suggest that unfavorable attitudes towards retirement are associated with an absence of retirement planning and subsequent maladjustment (Kim & Moen, 2001). Such pre-retirement preparation could be integrated with existing in-service training (e.g., refresher training for manual handling) to improve the organization's capacity for implementation in this respect.

The importance of support for retirees was emphasized throughout this study, and the benefits of a retirement association to allow personnel to network with fellow retirees was also highlighted. In view of the importance of retirement as a major life change, the provision of support for retirees is of particular importance in facilitating successful adjustment to retirement, as well as enhancing overall quality of life. Indeed, continuity theory assumes that most retirees wish their retired lives to be as similar as possible to their previous working lives (Parker, 1982). Thus, aging adults tend to utilize strategies associated with their past experiences of themselves and their social world in an attempt to maintain existing internal and external structures (Atchley, 1989). Participation in a retired members association is consistent with the central premise of this theory, in that this would allow retirees to maintain a strong sense of self and purpose when faced with the challenges of aging and retirement (Atchley, 1999). Some previous research has shown that older adults who participate in activities consistent with their possible selves (i.e., which represent the individual's ideas of what they might become or would like to become) experience increased positive affect and reduced risk of mortality (Hoppmann, Gerstorf, Smith, & Klumb, 2007).

Importantly, in the current study, none of those currently employed within their service were aware of any formal supports provided by their organization despite a general acknowledgement of the importance of such supports. These findings suggest that greater efforts should be made to promote, advertise, and advocate these supports among all personnel prior to retirement. Notably, in Ireland, there is a limited number of organizations which provide support to personnel after retirement. As in other studies, such as that by Danish and Usman (2010), reward and recognition have a substantial impact on employee motivation, and some recognition of those who are about to retire was also identified in the current study, particularly in view of

the long service provided by many retirees throughout their careers and the nature of the kind of work that they do (or did). This finding has not been reported in previous research on retirement and has important implications in terms of the role of emergency service managers in responding appropriately and sensitively to employee expectations prior to retirement.

Our current study is unique in exploring perceptions and procedures around retirement in a sample of emergency service personnel, but the findings are also applicable to other high-risk occupations, such as police officers and emergency room nurses. The study is timely and topical in view of the increasing recognition of the important role of emergency service personnel and the potential impact of trauma exposure on their overall quality of life and well-being (e.g., Gallagher & McGilloway, 2007, 2009; Mitani et al., 2006). The sample was relatively small, but sufficiently diverse to represent the perspectives of each organization and a mix of personnel therein while also yielding useful and important insights which would not have emerged from, for example, a larger postal survey. Likewise, Cleary et al. (2014) argued that an experienced interviewer with a well-defined research topic and a small number of purposively selected homogeneous interviewees can produce highly relevant information. The findings also have good conceptual generalisability across high-risk occupations, and have strong links to relevant theories and models around retirement and the transition to retirement, while also highlighting ways in which some of those theories might be further developed or adapted for specific groups. The Consolidated criteria for Reporting Qualitative research (COREQ) were also closely followed throughout – for example, use of participant quotations to illustrate themes and findings, with participant identifiers. Furthermore, the key themes identified, were common across the majority of interviewees, demonstrating good convergence and information saturation.

One limitation of this study is its focus solely on a sample of primarily still-employed individuals. However, the other two stages of the research incorporated the experiences and views of retirees themselves, albeit not focused on policies and procedures; these findings have been reported elsewhere (Bracken-Scally et al., 2014) or are in submission. The results reported from this first stage of the study raise a number of interesting questions for future research relating to the experiences of retiring emergency service personnel. For example, quantitative research could be undertaken to identify the proportion of personnel who choose to retire when compared to the experience of a forced retirement due to physical or mental health issues, or to examine the proportion of personnel who enter retirement with a diagnosis of post-traumatic stress disorder.

Importantly, with the findings presented here, we have identified a number of key issues that apply to workers more generally, as well as emergency service and high-risk personnel. The findings should help to raise awareness among employers of the importance of providing appropriate, timely, and effective retirement support and planning. Indeed, the importance of support for retirees is a key finding. A second key finding is the need to implement a process of transition to retirement much earlier in working life, and during which, appropriate preparation by both employers and employees (and colleagues) may be made with respect to areas such as (a) health promotion and awareness; (b) "in-job" recognition of employee contribution; (c) provision of information on retirement and aging; (d) cultivating interests outside the job; (e) adopting, and being encouraged to adopt, a positive attitude towards retirement; and (f) meeting the demands of the job over the life course. All of these are in line with, and add to, the "transition to retirement" model as conceptualised by Stone and Deschênes (2003), which describes retirement as more than simply a change in labor market activity to incorporate activities undertaken, steps made, or decisions taken. These findings also support the argument by Rich et al. (2000) that the ideal time to begin retirement planning is during midlife or earlier, to allow ample time to consider appropriate options. This transition could also include the use of self-reliance, optimism, and a focus on the future as mechanisms for internal coping and adaptation (Ng & Law, 2013).

The key themes we identified during the study largely support traditional models and theories of retirement and aging, such as continuity and activity theory. However, the study findings also highlight the challenge for any single theory of retirement or aging to encapsulate adequately the experiences of all retirees, particularly those retiring from high-risk occupations. Indeed, the findings reported here are in line with what might be considered several somewhat contradictory theories of aging (e.g., disengagement versus continuity theory). This would suggest, therefore, that there may be merit in developing a separate sub-theory relating to the transition to retirement which allows for greater flexibility in accounting for the multiple stages in this process, although a need for further research in this area is indicated. Importantly, the study findings emphasize the high level of physical and emotional stress involved in emergency service work; a strong identification with the service; and a lack of clarity about rules and entitlements, requiring better information provision and retirement preparation. These provide useful information for both the emergency services and other organizations in Ireland and elsewhere that should help to inform the further development of retirement policies and procedures and health promotion strategies, as well as to

facilitate a smooth transition to retirement. Further research might examine perceptions around retirement in a number of other occupational sub-groups as well as considering the nature and extent of change required within emergency services to improve health promotion across the career, to promote greater resiliency, and to improve the transition to retirement in the pre-retirement years.

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