Health, Work, and Retirement Survey

Summary report for the 2006 data wave.

- Qualitative Interviews -

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2008

A research Collaboration between

The School of Psychology, Massey University
The Health Research Council of New Zealand
The New Zealand Institute for Research on Aging
The Centre for Māori Health Research and Development, School of Māori Studies, Te Putahi-a-Toi, Massey University
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Research Design and Participants

The research questions which motivated the qualitative interviews were consistent with the purposes of the HWR project as a whole. They asked:

(1) What factors influence the choices people make about workforce participation in mid and later life?
(2) What factors influence health and well being in older adults as they move from workforce participation to retirement?

The postal survey of mid-2006 covered community-dwelling adults aged 54 to 70 and asked if they were willing to be interviewed face-to-face in a qualitative follow-up. From respondents willing to be interviewed a sub-sample of 60 was selected, located, for reasons of easy access, in the southern part of the North Island, in the region from Palmerston North south to Wellington and including the Wairarapa. Within these geographical constraints, the main basis for selection was actual and desired workforce status. The interview participants were selected with quotas from six workforce participation groups, as illustrated in the table below¹. Three groups were “matched”, in that people had the level of workforce participation which they desired. Three were “mismatched” – people falling into these groups preferred a level of workforce participation other than what they currently had. Table 1 suggests typical circumstances of people falling into these groups. The aim was to interview 10 people in each of the six situations outlined, with a balance of male and female respondents and people from centres of different sizes.²

Table 1
Work Force Status of Interviewees

<table>
<thead>
<tr>
<th></th>
<th>Matched</th>
<th>Mismatch</th>
</tr>
</thead>
<tbody>
<tr>
<td>No work</td>
<td>Group 1</td>
<td>Group 4</td>
</tr>
<tr>
<td></td>
<td>Voluntary retirement</td>
<td>Unemployed / Forced retirement</td>
</tr>
<tr>
<td>Some work</td>
<td>Group 2</td>
<td>Group 5</td>
</tr>
<tr>
<td></td>
<td>Part-time, bridging, contract work, actual and preferred.</td>
<td>Under-employed wanting more work. Prefer retirement but need to continue in work</td>
</tr>
<tr>
<td>Full-time work</td>
<td>Group 3</td>
<td>Group 6</td>
</tr>
<tr>
<td></td>
<td>Full-time employment actual and preferred</td>
<td>Prefer part-time work or retirement but need to continue in work</td>
</tr>
</tbody>
</table>

The interviews examined the factors which influence choices and circumstances in relation to paid work and how these inter-relate with health and other factors. Hence they took a life course approach, examining aspects of the respondents’ lives over the decades (Table 2 shows the framework used in the interviews). Having established the outline of their lives in the specified spheres, more detail was sought and questions were asked about how they inter-related; retirement intentions and/or experiences, and thoughts about the future.

¹ Data for this categorisation was derived from Question 74 in the postal survey, which asked people to record their actual and their desired workforce status.
² Ethnicity was not used as a major basis for analysis in the interviews, given that a Māori study is an integral part of the design for the HWR study as a whole.
In order to maintain a high quality of research data, a very small team of three interviewers was used. The interviewers were experienced in in-depth qualitative approaches and generated a high degree of rapport with respondents. The interviews took place mid-October to mid-November 2006, after piloting in late September. The interviews were recorded (with the participants’ permission) and each interviewer prepared a 2-3 page summary/vignette of the interview from the audio tapes and their notes taken at the time.

**Characteristics of the Interviewees**

There were 108 prospective interviewees in the three ‘matched’ groups and 70 in the three ‘mismatched’ groups – almost equally men and women. The interviews were achieved as planned except for a shortfall in Group 6, which was the smallest group of available respondents. This was compensated for by increasing numbers in the other two mismatch groups to 11, maintaining an equal balance between matched and mismatched respondents (Table 3).

Table 3

**Interviewees by Workforce Groups**

<table>
<thead>
<tr>
<th>Matched</th>
<th>Available</th>
<th>Interviewed</th>
<th>Mismatch</th>
<th>Available</th>
<th>Interviewed</th>
</tr>
</thead>
<tbody>
<tr>
<td>No work</td>
<td>Group 1</td>
<td>31</td>
<td>10</td>
<td>Group 4</td>
<td>25</td>
</tr>
<tr>
<td>Some work</td>
<td>Group 2</td>
<td>22</td>
<td>10</td>
<td>Group 5</td>
<td>27</td>
</tr>
<tr>
<td>Full-time work</td>
<td>Group 3</td>
<td>55</td>
<td>10</td>
<td>Group 6</td>
<td>18</td>
</tr>
</tbody>
</table>

Group 4, who wanted to enter the workforce, were mainly retired people wanting part-time work. Group 5, wanting a change of work hours, were mainly full-time workers wanting to work part-time. Half of the people in Group 6 were currently working full-time and the other half part-time, and most wanted to be retired. The interviews discovered, however, that some people had changed their actual or desired status from what they had recorded in the
postal survey and in some cases the postal survey data did not accurately reflect the complexity of their situation.

In terms of basic education, around a quarter of the interviewees had no school qualifications, with similar proportions in each workforce group. Roughly one-third had university entrance/bursary achievements. This proportion tended to be higher among the matched full-time and part-time work groups (2 and 3) than among mismatched groups and Group 1 (retired).

The majority (65%) of the interviewees lived in the main urban areas (population 30,000 plus), mainly in Greater Wellington; 22% in secondary urban centres (10,000-29,999) and the rest in minor urban or rural areas. The proportions living in the main urban areas were higher for the matched groups than for the mismatched groups.

The average age of the interviewees was 62, similar for men and women. As could be predicted, the retired group (Group 1) were the oldest (average age 66) and those in full-time work (Group 3) were the youngest (average age 58). Group 4 (no work but wanting to be in the workforce) had the second highest average age – 64.5 years.

The interviewees comprised 28 men and 32 women, but the sub-groups were less balanced by sex. Nine out of ten interviewees in Group 3 (full-time work actual and desired) were men. Eight out of ten interviewees in Group 2 (part-time work actual and desired) were women. Women also predominated in Group 5. These differences reflect wider male/female patterns of workforce participation.

Seventy percent of the interviewees were currently partnered (89% male 53% female). This rose to 90% of Group 3, reflecting the fact that this group is predominantly male and younger than other groups. Group 6 had the lowest rate of being partnered – 50%. This group also had the highest proportion living alone and a higher female proportion, again reflecting general social trends for the age group.

Because of the over-sampling of Māori in the postal survey, this group figured significantly among potential interviewees and of the 60 people interviewed 24 (40%) identified as Māori. The proportion ranged from 50% of Group 3 and 55% of Group 4, to 13% of Group 6. Although experiences related to ethnicity emerged in the interviews, this characteristic was not prominently featured. Some interviewees not from the Māori sample clearly identified with aspects of Māori culture and some labelled as Māori gave no overt expression of this affiliation.

Over 80% of the interviewees owned their homes except for Group 6, with 73% home owners. Less than 40% have a mortgage except for Group 3, with 70% still paying off their homes. These are the youngest group and most likely still to have dependants at home.

Self-perceived health status patterns are similar between the groups. Overall, 80% or more considered their health good, very good or excellent. The highest proportion with health recorded as fair or poor are Group 4 (4/11 said their health was fair or poor).

For interviewees currently in paid work the most popular expected retirement age was 65; 15 out of 60 interviewees thought than they would retire beyond this age, including half of those currently in Group 3. A higher percentage of males said they expected to work beyond 65 – 53% - as against 31% of female interviewees.

Factors Influencing Retirement Decisions

The HWR postal questionnaire asked respondents to indicate how important, on a five-point scale - various reasons for retirement were, or could be, for them. This was asked whether or not the respondent was currently retired or not (or partially retired). The results show that the most important influences (according to the proportion of respondents considering them moderately or very important) are personal, or ‘pull’ factors, such as health and wanting to do other things, not related to work or working conditions.
Compared to the postal sample as a whole, the interviewees were equally likely to give health, their own or another’s as a major influence on retirement decisions (Figure 1). Wanting to do other things came third and was more important for the interviewees. Interviewees were less likely to say that they their partner’s retirement was a factor, or employer’s attitude to older workers. They were more likely to say that they wanted to do other things or that they didn’t like the work.

In all the six workforce status groups, health rated first as a factor influencing retirement decisions, although this was slightly more important among the mismatched groups. The health of other family members and “spouse about to retire” were significant influences for retired people (Group 1). Wanting to do other things was especially important for Group 6, who wanted to be out of the workforce. Not being able to find work was important for Group 4, who wanted to be in. As for postal respondents as a whole, few interviewees considered work-related influences as important, although a quarter of Group 1 said that employers’ attitudes towards older people had been a significant factor.

**Attitudes to Work and Retirement**

Other questions in the postal survey explored attitudes towards work and retirement. Groups 1 and 4, who are the mostly likely to be retired already, were also the most likely to say they can afford to retire. Group 3, in full-time work, were the most likely to agree that they work because they cannot afford to retire. Overall, 40% of the interviewees said that they were tired of work, but even so, three-quarters said that they would continue some paid work after retirement\(^3\). The latter did differ among the workforce groups. Only 40% of Group 1 said they

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\(^3\) This is drawn from answers to Question 55 - Some people want to stop paid work entirely when they retire, while others would like to continue doing some paid work – what about you?
would like to continue with some paid work, as against 80% or more of other groups, apart from Group 6 (56% wished to continue).

The Interview Data

The postal questionnaire contained structured, pre-coded questions for self-completion. Quantitative material of this type necessarily obscures the more subtle interactions between variables and also factors and attitudes which have not been pre-specified. For example, among the factors which may influence decisions about retirement, caring responsibilities were not listed. This is not a criticism, but rather inherent in the structured approach and illustrates why the qualitative stage was added to the research project.

As stated earlier, the life course approach taken in the interviews is based on several hypotheses. Firstly, the factors which influence choices about workforce participation and retirement clearly interact. Circumstances at work are influenced by and in their turn influence family life. Health factors clearly do the same in relation to both family life and work. Secondly, life experiences act cumulatively to influence such choices and decisions. The quantitative data (albeit part of a longitudinal design) provide a ‘snapshot’ of current circumstances, attitudes and aspirations, which are clearly influenced by earlier life events. A third proposition is that “retirement” is a fluid and ill-defined concept, in terms of how it is seen by people in mid-life.

The following sections examine the six interview groups in turn, exploring and illustrating these propositions. The material is drawn from the vignettes prepared by the interviewers as extended summaries of each case, and includes verbatim quotes. The interviewees are referred to by their identification numbers and care has been taken not to include any information which might breach confidentiality. Questions are posed for each group in relation to their actual and preferred workforce status. Subsequently the influence of a range of cross-cutting factors is explored.

Matched Group Vignettes.

Group 1 – Out of the Workforce – Actual and Preferred Workforce Status

All 10 members of Group 1 – 5 men and 5 women - see themselves retired or partly retired and are in their late sixties; 7 out of 10 are legally married. As is typical for their age group, the majority are mortgage-free home owners. Although the group is fairly homogenous in terms of current age – 65-69 – their age at “retirement” varies considerably, from 57 to 66, with 6 out of 10 having retired before the age of 60. This suggests that 65 – the age of eligibility for New Zealand Superannuation (NZS) - is not always a dominant influence. They are varied with respect to their occupations and socio-economic categories, with working backgrounds ranging through clerical and sales work, police, banking, photography and scientific research.

What factors influenced retirement decisions for this group?

The reasons for retirement and factors which influenced their decision to retire are also mixed. Health was an important factor for half of the group members, but this came about in different ways:

For Hemi, health problems led to his withdrawal from work, but at an age close to retirement. He retired from clerical work at 63 because of a heart condition and recently developed asthma and thyroid problems.
A female interviewee (Carol) retired at the age of 57 as the result of a car accident which resulted in serious spinal injuries. Another woman (Sandra) retired at 59, because of the effects of a type of muscular dystrophy, but also to give attention to her daughter who suffers from the same condition.

The health of other people figured in the decisions of two other interviewees:

James retired at 66 because his wife had an accident and needed his support; Barbara retired at 63, because of her husband’s health (he died not long after this).

Other members of Group 1 had experienced a variety of work related circumstances which led them to leave. This may have been a voluntary departure:

Awhina, a woman now aged 65, left her job at age 59 because of stress, overwork and Occupational Overuse Syndrome. She felt that the stress had led her to suffer from bronchitis.

Other people were dissatisfied with their work for various reasons:

Charles trained as a geologist and moved into managerial positions. He wanted to leave managerial responsibilities and return to science, so he wound down the former and then retired at age 63, to continue work as a consultant.

Eruera had been a long-service police officer. He referred to “changes in the philosophy of policing” with which he did not agree. “Politicians were telling us what to do”. He felt that the police force had become divorced from communities and the public. He therefore left the force at age 55.

For Robert retirement was involuntary. He left work at 59 after a long and stable career in banking as a result of redundancy following restructuring. He was, however, close to the bank’s “retirement age” of 60.

In the final case, retirement was influence not only by work but also by family factors:

Gloria left work at age 58, partly because she didn’t like her boss, but also to care for her grandchildren.

These situations fit with the overall HWR conclusions that health is an important factor influencing decisions about workforce participation in mid life. This is, however, balanced by considerations arising from work and for some people there may be more than one factor at play.

**What has “retirement’ meant in terms of other activities, paid or unpaid?**

Group 1 is categorised as being out of the workforce and content with this situation. The interviews, however, that a variety of activities have been undertaken since “retirement”. Voluntary work has been important for several, both men and women:

Hemi does not expect to have paid work again but will continue in voluntary work for his church, depending on his health. He is also acting as a carer for a female cousin who lives with him.

Eruera has no plans to go back to work and will continue in the voluntary community and youth work that he does at the moment.
Barbara, who did counselling work in a paid capacity, would like to continue this on a voluntary basis.

It is mainly women who mention that their main retirement activities revolve around their families:

Awhina did an aged care course after she left work but has not used it. Now her life is “tied up with my family, children, grandchildren and great grandchildren”.

Sandra does not expect to have any more involvement in either paid or unpaid work. She wants to be free to spend time with and to travel with her daughter.

Gloria does not anticipate any further involvement in paid work. She would like to be involved in unpaid/caring work but doesn’t see herself as having time as she is still involved with her grand-children.

There are clearly a variety of activities which substitute for paid work. Some relate to activities which interviewees have been involved in throughout their lives, which they have taken up recently. Only one member of Group 1 expressed any dissatisfaction with his life in retirement. Robert, now aged 67, had been made redundant from his career-long position in a bank eight years ago. He now feels that he retired too early. “I’ve got to find something to do. I’m active. Need more to do.”

**Group 2 – Working Part-Time – Actual and Preferred Workforce Status**

Group 2 is younger on average than Group 1, ranging in age from 58 to 66, average age 63; 8 out of 10 are women. The group is similar to Group 1 in that the majority are married, mortgage-free home owners. None of this group considers themselves fully retired, but 6 out of 10 say they are partly retired.

**Why is part-time work the preferred option for this group?**

Many of the women in Group 2 had been engaged in part-time work for a long period, combining this with caring and voluntary work, in the traditional female life course:

Susan had undertaken a variety of roles in the child protection area while and after she brought up her children and cared for her mother-in-law, working for voluntary organisations and government agencies. She considered herself retired at 64, but still has some contract work.

Nancy did a mixture of full-time and part-time teaching (including relieving) all through her adult life. She brought up two children and had a lot of involvement in voluntary work. She ran youth clubs and became a voluntary industrial chaplain as well as giving budget advice and being a personal advocate. To make room for this, at the time of the interview she was working part-time with adult learners at a tertiary institution.

Beverly's life was complicated by family issues and responsibilities and also by physical and mental illness. She completed teaching training over a period but had had a variety of jobs. Her second husband was elderly and she supported him in his kamatua role. In her 50s she helped a lot at a religious centre, and became its part-time co-ordinator.
Two women, both in their mid-sixties and older than the three above, were working part-time as paid caregivers for older people, but had come to this later in life.

Betty said that “jobs just fell into my lap.” She was invited to run a general store in a small town and when she moved to her present location a friend asked to substitute for her while she went on holiday. This led to a new phase of work, providing care for older people.

Ngaire, a Māori woman, had not been able to finish her nursing training because of pregnancy and her working life had been affected by injury and family commitments. She brought up five children and cared for two grandchildren as well as working as a caretaker and security officer. At the age of 60 she took up caregiving in old people’s houses and achieved a certificate as the result of a training course.

The patterns are somewhat different for men working part-time. The two male members of Group 2 had shifted to part-time work related to their career jobs, prompted, in the case of Michael, by physical health issues.

Michael had had a career as a builder with a variety of large and small firms. He sustained an eye injury in his thirties and thought it would be safer to change tack so he bought his own hardware store. This progressed well but then business dropped back because of competition with chain stores. When he was about 60 he had a stroke and now works only weekends in his business and sometimes one day a week.

Thomas has been in education all his working life, rising to become a school principal and then in administrative roles with the Department of Education. He retired at age 59, but continues to do part-time contract work in the same areas.

Sharon, the youngest of Group 2, at 58, retired from a senior teaching position at age 49 after a family issue and has two part-time jobs. She works at an after-school tuition centre and as a paid coordinator in a CAB, but still considers herself a part-time worker.

What are their views on retirement?

Group 2 members have a variety of views about retirement. Nancy, now 63 and widowed, would like to work at least until she is 66, for financial reasons. These are also influential for Sharon, who, with her husband, is assisting one of their children financially. However, maybe she will retire when her husband does (she is now 58). Michael, now 65, is ready to retire now, but this will depend on when and how successfully he can sell his business. External factors are also important for Betty, who feels she cannot abandon the old people she cares for:

“It depends on the old folks – I will not give them up – and my own health. Last year I had five clients but two died and I will stay with the others until they pass on.”

Health problems had led Joan to leave her teaching job about the time of the interview but she expected to work until age 65, for financial reasons, but dependent on health. Personal health was a major factor for the other care-giver - Ngaire. She hopes never to retire – “the thought of it horrifies me”, even though she may further reduce her hours of work. Others considered themselves “in transition to retirement” without any definitive plans, and Beverly felt that making a decision about retirement is not relevant to her – she would continue her work at the religious centre indefinitely, whether paid or not. Virginia, a woman aged 66, who
has been working part-time as a nurse on night duty for 23 years, summed up a range of factors in her retirement decision and her uncertainty about the transition:

“I have no idea when I will retire. When I feel like it. I’m putting it off. When I feel I’m not doing my job properly… too tired… if my husband got sick… I don’t know. I would like to keep going as long as I am able.”

She is anxious about the “money aspect” of retiring and mentioned the different views of her husband and herself. But she would like to spend more time with her grandchildren, become involved in voluntary work, and still “looks after” her mother who is in a home.

“I’m probably a bit of a wait and see person. A lot of my peers have had a lot of difficulties with their husbands’ leaving work. I don’t think any amount of preparation… it depends on the people.”

Health, finance, personal and work circumstances all clearly interact in decision-making on retirement, as is the case for people in all the groups. There are, however, distinct gender issues in choices to work part-time, which arise from expectations that women will undertake unpaid caring responsibilities. These begin with child-rearing and then continue with respect to ageing parents, grand-children and sick relatives, so that the influence of these expectations prevails through the life course. The examples show that interviewees may give priority to unpaid caring over paid work.

**Group 3 – Working Full-Time – Actual and Preferred Workforce Status**

Group 3 are the youngest group overall with 8 out of 10 under 60 and an average age of 58.4. In contrast to Group 2, 8 out of 10 members are male. Nine out of 10 are legally married and none live alone. Eight out of 10 have partners also working full or part-time. Their households are likely to contain people other than their partners, often adult or young adult children. Nine are home owners, but in contrast to Group 1, 7 are still paying off mortgages.

This group therefore represent people at a younger stage in the life cycle than Group 1 and their work histories mainly follow what could be seen as male patterns, in contrast to the more stereotypical female careers of Group 2. No one in Group 3 considered themselves retired; half expected to retire after 65, with four suggesting 70 as their expected retirement age.

**What employment experiences underlie their current position vis-à-vis retirement?**

Reflecting the dominance of males, Group 3 patterns of working life usually involved full-time work, although several members had experienced work changes associated with travel, job transfers, or redundancy. Sometimes redundancy brought a financial windfall – as for Arthur, who was made redundant from an accounting position in 2005 but then found a less stressful position. Others experienced less favourable outcomes. George had been made redundant twice, due to internal re-structuring of the companies he worked for and it took. These men found that it was not easy to find other work, and felt that their age had been against them.

George was made redundant at age 39 and did several short-term jobs before getting another permanent position. When he lost his job again at age 50 it took 7 months to find another and during this period he was unemployed. Subsequently he found a clerical position on a significantly reduced salary with limited career
development and less responsibility. He does not like this job at all and has tried
to get other work.

Joseph was unable to find full-time work for 18 months after redundancy at age
52. He took up gardening and handyman work, which he enjoyed but which did
not bring in enough money. He reckons that during this period he applied for in
excess of 120 jobs and only managed to get 3 interviews – he was told by a
couple of employment agencies that he was too old.

These experiences have had an impact on the men’s ability to establish a sound
financial basis for retirement. Other men had more settled careers which put them in a more
favourable financial position:

Willie spent most of his working life as a teacher in secondary schools and
Kenneth has been with the same company as a technician for 42 years. Both
have been in occupational superannuation schemes for many years.

Others had been self-employed for all or part of their careers, usually based on a trade
apprenticeship. This produced mixed results:

Jack trained as a plumber. After working for over 20 years with the same firm he
realised that he was doing all the work. He felt he was “buying his own job.” So,
on a very small amount of capital he started his own firm which has been very
successful and will be passed down to his son.

Henry’s father found him an apprenticeship with the local barber, even though he
had wanted to be a chef or a gardener. He left the day he finished his
apprenticeship when he was 20 and did a variety of jobs for several years. Later
he brought the suburban barber’s shop business where he had served his
apprenticeship and has been there for the last 30 years. The business cannot be
seen as an asset for his retirement. He does not own the property and the
business cannot compete with competitors in the main shopping centres.

These experiences, in terms of stability of employment and access or otherwise to
occupational superannuation schemes, contribute to the group members’ levels of financial
security in mid-life and hence their approach to retirement.

What factors influence their decisions about retirement?

Concerns about finance and health were uppermost in the minds of Group 3. In terms
of health, most people qualified their plans for the future:

“depends on my health and ability to do the work”. Joseph was unusual in being
confident about this aspect – “I expect to still be fit and healthy and to retire at
70.”

In some cases, health concerns were job related:

Larry describes his health as ‘pretty good’, although he is finding that “plumbing
gets harder on body” and he developed varicose veins in his 50s. He expects to
stop work at 65 “unless the body packs up then maybe I will have to stop
sooner.”

Looking back, Jack thinks that decades of hard work led to the ill health he is
experiencing now. Since age 60 he has had prostate and hip problems and a
scan found asbestosis in his lungs. He wants to keep working while he has his
health.
Carolyn’s health concerns are related to developing arthritis and her family’s susceptibility to cancer. She has the earliest expected retirement age in Group 3 – 60 years.

Financial considerations also affect plans for retirement. Some have ongoing commitments. Willie expects to retire “past 65” as he is still putting his children through university. Kenneth plans to retire on his 65th birthday, “provided I am debt free” and Henry feels anxious that he may not be able to afford medical insurance once he leaves his job.

Other influences on retirement decisions concern attitudes to work. Willie will work as long as he feels he is doing a good job – probably beyond 65. Wayne says that the main centre of his life has been his career and he has no thought of retiring, as he really enjoys the stimulation of his work as an IT manager. He will probably work until he is 70. Carolyn wonders how she will cope without the stimulation of work which is something she enjoys.

**What are Group 3’s plans for retirement?**

Several Group 3 members are considering a gradual retirement:

Arthur expects to cut down his hours to part-time (35-40 hours) at age 60 and 20 hours by 65. He likes to think he will stop paid work at 65. The two plumbers in the group also expect to “ease off” work as they get older. This is especially the case for Jack, whose eldest son took over the management of the business 10 years ago under his encouragement. He is also mentoring a grandson in the firm. Jack wants to keep working while he has his health, although he is reducing his hours, especially in cold weather. This is not easy given his commitment to the business and he likes to maintain a supervisory role.

Although they are contemplating retirement from their career jobs, some group members are considering some paid activity afterwards, often for financial reasons:

Wayne and his wife (who is older than him and already retired) have set up a distribution and a marketing enterprise which they can operate from their home and which brings in significant income.

Carolyn and her husband have thought about setting up a catering business and he will take on consultancy. Their financial security will, in her view, depend on how these businesses go.

Others are looking forward to hobbies, family interaction, community involvement or just having free time and “doing the things I enjoy.” Travel is often part of the mix:

Wayne would like to help other people with IT, possibly senior citizens. He would also like to continue to travel widely and to take up painting, which he has not had time to do, although he has the equipment.

Jack expects to continue participation in local body work, possibly play more golf and use his boat rather more, which has been neglected because of his health.

Larry is looking forward to “freedom of time and that sort of thing”. His hobbies include jogging, mountain biking, walking, fixing motor bikes and motorbike touring. He plans to get more involved with family and would like to travel. He hopes his health “stays good”.

Several people described extensive agendas for retirement, reflecting their active lives and perhaps their comparative youthfulness.
Carolyn would like to learn a language – possibly Italian - and study psychology or sociology, as family dynamics fascinate her. She would like to continue to travel, to visit her daughters overseas and to see wild animals in Africa. She would also like to expand her fitness regime and participate in triathlons.

Willie is looking forward to writing a couple of books for teenagers, tramping and travelling to Europe and Samoa. He also wants to play badminton, walk, bungee jump and use a parachute.

Overall attitudes towards retirement are mixed among this group. Some have worries about money – “I don’t want to get to the point where I’m dependent on other people… don’t feel the state is particularly benign (Willie)” - but others can look forward to good pensions from occupational superannuation and/or additional income from investments and property. Their plans include “trading down’ to cheaper housing and moving off-shore. They can be less sure about their health prospects and these remain a concern for most.

Mismatched Groups

Group 4 – Not in the Workforce, Prefer to Have Paid Work

Although members of this group share a preference for paid work, they varied in how they described their current workforce status. Six said they were retired, 3 part retired and 2 not retired at all. Their average age was 64.5, with 7 out of 11 aged 65 or older. The group was balanced by gender and 7 out of 11 were either married or partnered. This group had a lower rate of home ownership than the previously-examined groups - 8 out of 11. All Group 4 members wanted more paid work – 8 wanted part-time work and 3 full-time work.

How did Group 4 members come to be out of the workforce when they want paid work?

The majority of this group considered themselves retired or part retired even though some workforce participation, usually part-time work, was their preference. Health factors had a great deal to do with their situation. In some cases this related to injury:

Frank has had a long-term interest in display and had his own business selling curtains. He retired when he was 58 after having dislocated a shoulder while installing a blind. At that time he didn’t look for any other work.

Joe had had a varied career as a labourer and factory worker. When he was 56 and working for a maintenance contractor, he hurt his back and went on ACC. He is now “medically retired”.

In other cases a medical condition led to leaving the workforce:

Edward suffered a major heart attack and stroke at the age of 51. This brought about a major life change as it had a significant impact on his mental ability. He returned to office work part-time but a year later he had another attack and needed major surgery. Even working part-time it was increasingly apparent that there had been neurological damage - things he had known related to his work were lost. Edward said it was very frustrating and he tried to re-learn things but it took nearly a year for him to admit that he was no longer able to work. He retired in his mid-fifties.

4 One Group 4 member – Jean – had some part-time work and described herself as semi-retired. Her situation is not included in the following description as not fitting the overall group profile.
Bonnie, now 59, has had a lifetime of ill-health, which seriously affected her employment prospects. As well as cancer in her thirties, she suffered paralysis and brain injury, for unknown reasons, and ended up on life support and then confined to a wheelchair. Since then she has been experiencing a slow recovery, but she is not totally well, prone to serious migraines and memory problems and often unable to work.

Personal circumstances played a part for other members of Group 4:

When her husband retired at 60, Martha moved away from a main city to the area where her son lives and where it is less crowded and stressful. "We were thinking about our health. I am very glad we moved."

The other group members were all over the age of 65 and had retired from their career jobs, or businesses, often with health factors playing a part.

**What is hampering them from achieving their desired work status?**

Between the time that they completed the postal questionnaire and were interviewed, some of Group 4 had changed their minds about wanting to be in the paid workforce, sometimes because they had become involved in voluntary work, which absorbs their interest and energy.

Martha, now aged 70, recently became active in voluntary alcohol and drug counselling and has studied for a bachelor of counselling qualification. She finds great satisfaction in this. Her only aspirations for paid work now would be if she could sell her weaving, but she really considers this a "work of love" unless people wish to give her money.

Edward has looked after his intellectually disabled son since he was in his thirties. After his own health led him to retire from full-time work he thought he would like to continue part-time, but instead has became heavily involved in various voluntary work, some of this through the organisation responsible for his son's sheltered accommodation.

Jerry had a long-term career as a professional accountant until he was made redundant at age 56 and subsequently managed a sports club. While he could have remained in this work he actively decided to retire, at age 67, to spend more time with family and to play with his grandchildren, even though it would mean a drop in income. He now takes on fixed term work if he can, but he does not really have the time to commit to permanent part-time work. He continues his long term involvement in sporting clubs, is a voluntary driver for an "old people's home", supports a special needs secondary school child and is involved in his local Rotary Club.

Other group members are seeking paid part-time work of various sorts, sometimes related to their previous employment and sometimes in relation to a new endeavour:

Frank would like to work part-time producing items he has designed and made. He has built a workshop on his property and could build on contacts from his past experience. He is also interested in teaching art and building up his computer skills to help him sell on the internet.

Health problems, already outlined, limit the prospect of paid work for some people:

Dennis would like some involvement in paid work but has never really thought about voluntary work. Any work would need to be something he could manage,
such as light engineering, but his wife is concerned about his health. Realistically, he doesn’t think he will achieve it – “as time goes on I think about it less and less.”

Bonnie also had serious health setbacks but remains optimistic and is making progress towards her rehabilitation. In her late 40s she completed university qualifications through distance learning. She feels she has experienced discrimination in trying to get work and sometimes feels frustrated. She assists on advisory groups but is only paid for meeting times and her main income is Invalids’ Benefit. She is still hoping, jokingly, for “a million dollar contract” to work on policy in her area and hopes to complete a higher degree.

Others are not sure what they want to do in terms of work:

Marilyn was an assistant school principal when she retired at 67, influenced by her deteriorating hearing. She would like part time work. “I don’t want to lose skills and knowledge. It is important that the mind be kept active.” However she has no clear plans apart from improving her computer skills. She is hoping she will be approached. “If I really want work I can go and get it… I expect to be greeted with open arms.”

Health factors, including injury, clearly play a significant part in explaining firstly why members of Group 4 are mismatched in terms of workforce status and also why they are not able to achieve their aspirations. Health is, however, not the only factor as the “pull” of other activities – voluntary work and family – influence particularly the older members of the group.

**Group 5 – Have Work, Prefer Other Hours**

Group 5 is composed mainly of people under age 65, with an average age of 60.7. None of the interviewees in this group said that they were retired. Their most common situation was working full-time but preferring to work part-time, rather that the reverse, i.e. underemployment. Eight out of the 11 Group 5 members are women, with a mix of marital statuses, mainly partnered. The majority are home owners, mainly mortgage free.

**Why do they want to work part-time and why cannot this be achieved? How does this link with retirement plans?**

In many cases, Group 6 members were clearly in transition to retirement, sometimes only a short period of time away. For some, this appeared to be an achievable scenario, as they had a degree of control over their work situations. A 55–year-old technician is fairly confident of his future:

After being made redundant from a research institution, Stephen found full-time employment in web site design. He does not expect to retire and can see himself in paid work for as long as he is physically able. Job satisfaction and creativity are important to him and he would rather wind down than retire totally. He would like to be more flexible in his work and cut down from his current 10 to 11 hour days in order to have time for other activities. He could resign and be a consultant but his “head is not in that space at the moment”. Stephen hopes to achieve the level of involvement he wants by the time he is 65 when “I’ll be as retired as I want to be.”
Another older man also has some autonomy in his work situation, given his skills, but there are also financial concerns:

Gerald is well qualified in a technical area and had a long term career in a government organisation. When he was made redundant in his late 50s his superannuation was paid out. So, while he has moved back through temporary contracts into a full-time job, finances play a part in his retirement intentions. Now aged 64, he expects to retire around age 70, but intends to make this gradual by reducing his hours.

A third man, again with technical skills, found that some negotiation was needed to achieve his aspirations:

After university, Daniel worked full-time for many years in a major communications institution. Soon after he replied to the postal questionnaire he moved into part-time work (4 days a week), but with a time limit of a year. He sees this as a transition to retirement as it would be difficult to suddenly stop working. He expects to retire when he is 64 and has no financial concerns as he expects a substantial inheritance. His main anxieties are about social isolation, as he never married, and ill-health.

Situations related to work sometimes meant that retirement plans were either upset or could not be achieved:

Judy expected to retire from her current full-time position in 2007 when she and her husband had planned an overseas trip. But the company went through a major restructuring and her job was contestable. She left a year earlier than expected. She would like to work part time because enjoys the company at work, and thinks that “two days would be good”. However, “when I finish I’ll finish…. I’m 64 and I don’t think anybody will want me.”

Donna had several jobs as a financial officer, the last one for 35 years. She never married and lives alone. She would have liked to move from full-time to part-time work, but this didn’t seem possible and so she opted for full retirement in 2007. She decided she needed “time to do other things before I die” and was looking forward firstly to a real holiday after many years of hard work and difficulty in getting time off because of understaffing and the demands of the job.

For others, there are financial barriers. People may feel they cannot manage on the reduced income from part-time work. This was the case for a 61-year old widow:

Phyllis works full-time as a health advisor (she is a trained nurse) and expects to retire at age 68. She would prefer to work part-time but does not think this is an option, mainly for financial reasons, and it would also be difficult to negotiate with her employer. Her husband died six years ago and she is undertaking extensive maintenance work on her home. She feels anxious about her income in retirement.

Maria and her husband have suffered several financial setbacks which influence the extent to which they can realise their retirement aspirations:

In the late 1990s, they sold their house to buy a shop – where husband and wife worked full-time. However this did not prosper; they lost their capital and their house. When they moved to their present location both were unemployed, but now they have found full-time work. Maria works in quality control and dispatch in a factory. She would prefer to work part-time, in order to have time for other things and to keep up with housework and gardening. However, whether she can achieve this depends on how much they can save, if factory work continues to be
available, and her husband’s health. Maria would like to retire at 65, or at least work part-time from then.

Only two people in Group 4 said that they would like more hours of paid work, but in both cases this did not amount to seeking a full-time job:

Joyce had used her skills in a variety of work despite not having formal qualifications. She said she was “good at systems”. Recently she has been a field officer for a voluntary organisation, working nominally 7 hours a week but putting in far more unpaid hours. Her husband’s death from a work-related illness clearly affected her retirement plans. “I don’t know when I will retire, probably when I can’t do proper work up to my standard”. Her health will be a factor in her decision. Meanwhile she is looking for about 30 hours of work per week.

Ann took a job as a machinist in a clothing factory at age 18 and began working at home when her children were young. She works for a range of clothing manufacturers. Ann has no idea when she will retire and just wants to keep on working until she cannot do so because of her health. She and her husband are trying to save for their retirement, but still find that their children are a financial cost. Working at home has benefits – she can reduce her workload or not accept any work if she is ill or otherwise occupied.

Concerns about the adequacy of retirement income were clearly a factor leading Group 5 members to continue to work full-time, even though this was not their preference, and also to seek part-time work after retirement. In addition, several found that their employers or work situation did not easily allow reduced hours. This was less likely to be the case for people with professional or technical skills.

**Group 6 - Full-Time Work, Prefer Part-Time Work or Retirement**

Comparatively few postal questionnaire respondents fitted the profile for Group 6 and only 8 out of the planned quota of 10 could be interviewed. None of this group described themselves as retired, although 3 were partly retired. This is the second youngest group, with 6 out of 8 under 65 and an average age of 60.4. The group is balanced by gender, and also by whether they are partnered or not – this being the group least likely to be partnered. All were home owners, but there is a balance between those who are mortgage free and those who are not. At the time of the interview 4 members of the group were working full-time and 4 part-time. All wanted to be completely out of the workforce, and usually this meant retired.

**What is preventing them from leaving the workforce/retiring?**

For some Group 6 members leaving the workforce is an imperative which they cannot achieve at present and for some an aspiration for the future. Finance is clearly an important factor for many as was the case for Group 5. Two men in their late fifties were working towards financial targets:

At age 56, Lawrence says he is ready to retire. He expects to do this in 3 years time but he and his wife have an income target to achieve first. His decision will be driven by having enough finance to maintain “a nice lifestyle”. The couple have talked about having a business together after retirement, but really he is looking forward to having “time to do the leisurely things we like doing, like fishing, golf, holidays.”

Walter is currently a full-time sales manager. He and his wife are working hard in preparation for retirement and consciously engaging in financial planning. They have a 3 to 5 year horizon. Realistically, Walter expects to retire at 62, depending
on financial circumstances. “I would retire tomorrow if I had the money.” He is looking forward to enjoying life and relaxing after a lot of hard work, travelling and spending time with grand-children.

Another man talked about money as a limiting factor, but he is already 66:

Terry is working full-time in a specialised area of the printing trade, although, if he could maintain his lifestyle, he would prefer to be retired. He expects to work until he is 70 and possible part-time after that. “Retirement depends on finances – enough income – and health – both mine and my wife’s.” They are both saving hard and have a financial plan. In about two years, just before retirement, they plan to sell their house and buy one which is new, maintenance-free and with a small garden.

Clearly health is an important factor, but something which it is difficult to plan for or foresee. Money usually figures somewhere in the mix, but other factors are involved in retirement aspirations, such as how much people enjoy their current work. Being eligible for New Zealand Superannuation (NZS) is part of the equation for a 64 year old widow:

Janet never wanted to have a career. She worked part-time around caring for her family and her sick mother. Her life was radically changed at age 59 when her husband died. She went onto Widows Benefit and was told that she had to work. By this time she couldn’t work full-time because she had developed arthritis and also felt that her age was against her. However, she found a part-time job as a receptionist. When she filled out the postal questionnaire Janet said she would prefer to be retired. She now thinks she is happy to keep her “small” job going and can see that she is better off financially if she does. Janet is not sure when she will retire although she turns 65 next year and will receive NZS, which is at a higher rate than Widows Benefit. She says that she won’t need to work then but she enjoys her current job and will continue while this is the case and her health holds out.

Another woman, also widowed, is concerned about social isolation:

Marama lost her husband in an accident and was living on a benefit until someone suggested she applied for a semi-professional job. Marama was reluctant at first because, at 39, she felt she was too old. She was surprised to be accepted, but now enjoys the work and has made good progress. At the time of the postal survey Marama stated that she would rather be retired than working. She might retire at 65 (she is now 57), but then she may also “just keep going”. It will depend on how much money she has and how she feels about missing the social contact. She knows she will miss the work and be restless at home, but some days she wonders “why am I here?” Retirement seems attractive in terms of having more time for golf, gardening and being with her dog. Her concerns are that she might get sick and “die alone” and that she will miss people and the “rush of the day”.

Some interviewees expressed ambivalence about the need to work and for the extra money. They weighed up having a little extra to improve living standards against the freedom which retirement brings, even if they have to manage on less money:

Douglas is 60 and works part-time but would prefer to be retired. At the age of 49 he left a senior hospital job because it was stressful, with numerous changes of management. He had been seeking a better balance for several years, realising that “life is precious”. Douglas and his wife bought a run-down rural property which they have developed with specialised crops. However, he felt he still needed an income and has picked up a variety of part-time work -“but I only work to get money”. He could decide not to work and they could still manage
financially. He will continue to pick up work as he can until he reaches NZS age and then be much more selective about what he does.

One woman in (Janice) did not aspire to retirement, but rather to be a “homemaker”. In actuality this meant giving up uncertain and demanding (but flexible) part-time work and putting her efforts into renovating a family home as a “B and B” and supporting her son’s career aspirations, both financially and as a mother. The issue is that she needs to work now, out of necessity. She would need capital to start the business, but at the same time she feels she is lacking the energy which would be required. Janice is now 57, but “never expects to retire”.

Contending influences are clearly evident in the experiences of Group 6. Retirement is an attractive prospect for many, but freedom “to do other things” must be balanced by the need for an adequate income once people have left the paid workforce. Part-time work, where it is available and if health and family circumstances allow, is a way of seeking a balance.

**Cross Cutting Themes**

In considering the factors related to workforce choices among the matched and mismatched groups and how retirement is approached and conceptualised, several cross-cutting themes emerge. Some are personal to the individuals involved, such as gender and health. Some relate beyond the personal to the social, including socio-economic status, access to education and employment, and family situation. More widely, external events and environmental influences play their part.

**External Factors**

Respondents to the HWR survey represent a cohort of people between the ages of 54 and 70 in 2006. As such they have shared experiences. Most, but not all, were born and raised in New Zealand. The oldest were born in 1936, had their childhood in the period including World War 2, and were young adults during the prosperous period of the 1950s and 1960s. The youngest were born in 1951 and were therefore part of the baby boomer cohort. Their early years were also lived in a period of prosperity when the welfare state was in full flower. Families were larger than at present and well supported by social policies in the areas of housing, health and education. Early marriage and child-bearing was the norm.

Labour market conditions have clearly been an important external influence on the lives of the HWR respondents. During the 1950s and 1960s unemployment was almost non-existent. Jobs were easy to find and to shift between. The labour market and wage-setting were highly regulated. At a later stage, the HWR cohort were adults of working age during the economic restructuring of the mid to late 1980s and 1990s which, in many cases, along with adverse economic conditions, affected their employment prospects. Many of the men, in particular were subject to redundancy and unemployment.

**Employment and Education/Training Options**

At the time when the older members of the HWR cohort left school (usually at 15 or 16), jobs were plentiful and there was little emphasis on the acquisition of formal educational qualifications. Training was largely apprenticeship-based, especially for boys, and commonly was in-house or on the job. Skills shortages encouraged employer-supported education and training.
Gender is an important factor in experiences of initial and subsequent education and training. For girls, there was even less emphasis on educational achievement. Marriage was almost universal and women did not need any other career. Marriage was expected to be lifelong and therefore “protected” women financially. Wages were based on a male wage-earner model intended to support a wife and children.

University education was comparatively rare at this time, especially for females. In several cases tertiary education and training (including nursing and teacher training) was cut short by marriage (which may have been precipitated by pregnancy). Some women completed qualifications or undertook some other courses later. Tertiary training was often combined with work, through evening and part-time courses.

Those who went into tertiary training directly from school were likely to be from more educated and affluent families and stayed on at school longer – until age 17 or 18. In some cases access to training was not available immediately after the end of compulsory schooling. For example, women going into nursing often spent a period in other work. Several people from rural areas worked on the family farm for a while in their mid-teens.

For the HWR respondents now in their sixties and thinking about retirement, there were two main trajectories on leaving school, a) movement directly into the labour force, probably with on the job training, and b) continuation on to tertiary education or a full apprenticeship. These tended to produce different employment histories. Those who completed a tertiary qualification early in their career frequently went on to have a fairly stable and consistent career – a pattern especially typical of males. For example:

Following his initial training, Thomas moved through a variety of teaching jobs to become a senior teaching college lecturer. He then moved into administrative positions in the Department of Education. He retired at 59 and has continued to do contract work which he will keep up for a while. He is now 63.

Long term career stability often provides the ability to make choices later and to respond to factors “pulling” people into retirement (as was the case for Jerry, cited above). Those who left school without qualifications tended to have more fragmented work histories.

Hemi left school at 16 and worked on the family farm before military training and a period in the army. Although he had no further formal education or training, he learned about communications and accounts in the army and later did a variety of clerical work. He was later made redundant and took up work first with a hospital and then with a voluntary agency. He left work at age 63, because of his health and lived on a transitional benefit until he became eligible for NZS (he is now 68).

Later changes in employment history could be related to external factors, especially redundancy, or to mental and physical health issues, as shown in examples earlier in this chapter. Redundancy might lead to a move into related work, into a complete change of career, or out of the workforce altogether. In the case of Robert, involuntary work exit on restructuring led to premature retirement:

“I wouldn’t have retired at that time but for restructuring... I didn’t have an option... it was forced action. It was good at the time because I got a lot of money but as it is running out now I wouldn’t mind another job. I retired too early.”

Voluntary work exit could arise from frustration from changes at work:

During his time in the police force, Eruera worked in a number of different jobs. He left at age 55 through dissatisfaction and frustration. He referred to “changes
in the philosophy of policing that upset a few guys”, himself included. He did not agree with the way that service politics were coming into policing. After a spell when he “went bush” he found other work and was invited to do unpaid work, which helped him return to the workforce.

A frequent aspiration, especially for men, is a shift into self-employed, often using expertise previously applied as an employee. Some men did this after experiencing redundancy in the restructuring period. Self-employment might lead to a successful business allowing flexibility as people seek to “wind down” in anticipation of retirement. But in other cases self employment was not a success. This may have been because of personal inadequacies – good tradesman but not a good business man – but also through external factors. Among the interviewees were examples where couples bought retail businesses and postal agencies which failed because of economic downturns and privatisation.

Gender is clearly an influence on employment aspirations and opportunities. For women interviewees, marriage and child-bearing frequently interrupted their careers. Later changes in work situation could relate to marital events – separation and divorce, widowhood, retirement of spouse. The earlier examples show that these were much less influential in the work lives of men. The employment history of Sandra is fairly typical:

Sandra came from a farming family and decided very early that she wanted to be a nurse. However she never practiced as she married at 21 and soon had three daughters. She cared full-time for her children as well as helping in their kindergarten. Her later jobs “just came her way” without her seeking them. She was asked to work at a hotel and later offered a secretarial position, but this came to an end after 2 years when the owner’s wife wanted the job. Both jobs were just for pocket money as she didn’t really see them as a career – her husband was earning well. Sandra gave up work at age 59, partly to do with health and also because she enjoys home life and wants to be free to spend time with her daughter.

The themes of consistency and change in work histories highlight differences based on gender. Among the interviewees, males are more likely to have had stable careers than females, but this is a generalisation, as the examples show. Other factors are important in influencing the course of work life, including health, experiences at work and family events. The consistency/change dichotomy may also be related to whether the individual has educational qualifications, especially those acquired early in life, or not. This is frequently associated with the socio-economic status of their family of origin. But here also there are exceptions, as have been illustrated, showing the diversity in personal experiences and complexity in the various factors which influence their decision-making in mid and later life.

**Family History**

As already mentioned, marriage was almost universal in the 1950s and 1960s. It usually took place early, especially for women, and was often quickly followed, if not precipitated by child-bearing. Families were larger than is now the case – this being the baby boom period. Not all, however, followed this norm. Second and subsequent marriages and sometime second families are common among the interviewees, both men and women. Marital breakdown is also common (with results related to employment and housing, especially for women). These gender-based patterns transcend groupings based on education and working experience. All levels of society have been susceptible to marital disruption. In some cases this could lead to financial setbacks and loss of home ownership. The case of Ngaire illustrates this.
Ngaire looked after her mother and had very little schooling from the age of 11. Her mother died when she was 15 and she was told to look after her dad. She got a job as a nurse aide but didn’t finish her training. She left when she became pregnant, married at 18 and had 5 children in 6 years. When her youngest was 4 she worked in various factories for 3 to 4 months at a time “to earn money to buy things”.

She separated from her husband at age 32. This resulted in a mortgagee sale and she has rented ever since. Now aged 66, she has 13 grandchildren and 4 great grandchildren. Her son’s wife left him with 2 babies as he was an alcoholic. She went on a benefit and looked after one of the babies full-time from age 4 to 16.

The experience of taking time out from paid work for child-rearing was almost universal for the women interviewees. There were very few examples of being able to maintain a career, or full-time work of any kind through this period of life. Some managed part-time or casual work (as in the case of Ngaire) and early childhood education sometimes offered paid or unpaid opportunities. For example, becoming a Play-centre supervisor helped employment prospects for some women. Men’s careers were unlikely to have been constrained by family commitments. Women also were much more likely to follow their husbands in their work than vice versa. Some women interviewed worked with their husbands in business.

More women than men live alone in mid life, as a result of widowhood and marital breakdown, as men are more likely to re-partner. Death of a spouse and divorce, however, trigger major change in the lives of both men and women. Marital history clearly has repercussions in terms of income and asset accumulation.

Caring responsibilities within the family fell mainly to the women interviewees, consistent with sex-role stereotyping and expectations prevalent at the time. In addition to the care of dependent children, these responsibilities might involve disabled children (even in adulthood) and there were examples of women taking up eldercare on an either paid or unpaid basis. These responsibilities plainly impinged on women’s choices in other areas, especially paid work, and affected their ability to accumulate assets to support them in later life, especially if they do not have partners.

**Internal Factors**

**Health**

Through the discussion of work status, options and opportunities, health factors loom large, and sometimes led to retirement before the age of 65. This includes the health of the individual concerned, but also health of a partner – especially health of husbands for wives. Health issues may involve long-term or short-term illness or disability, and injuries, minor or major. Mental health problems can be long-lasting and have serious effects on prospects for paid work. Health setbacks sustained early in life could cause problems later, or be exacerbated by other events. There were many examples of injuries influencing the lives of the interviewees:

In her thirties, Jean had a fall and severely damaged her ankle, which meant several operations and she was on ACC for a couple of years. When she was 55, the injury was still causing problems and she tried to get her job reduced to part-time. Her employer refused so she decided that she was unable to continue and applied for ACC. She considers she is now (at age 57) semi-retired, but continues to do some part-time work.

Carol had a car accident in 1984. She “walked away without a scratch” or so she thought. But in the next year she experienced severe pain in her arm and
shoulder – she called this delayed whiplash – which made “one hell of a mess of my neck and spine”. She had many problems with ACC and a specialist told her all she had was arthritis. Still in considerable pain, she went to many specialists and alternative health care practitioners with no success. Later, when she was 57, she suffered another accident and the pain from the old injury returned with great severity. An MRI scan showed that she had damaged the nerves in her spine beyond repair. Carol went back to ACC and finally got “on it” and so for almost 10 years she has not worked in paid employment.

Late onset chronic illness included heart problems, blood pressure, stroke, cancer and arthritis. Some conditions affected mainly one sex – arthritis and osteoporosis, hysterectomies for women; prostate problems and heart problems for men. For manual workers – “bad backs” – could produce health problems. For professionals and manual workers alike, stress related to work is another health hazard:

Charles worked as a science manager at different institutes and locations. During the 1990s, he felt constantly run down with headaches. He attributed it to the stress of being a manager at a time of restructuring and redundancy. “This was the worst period in terms of health in my whole life” and also coincided with issues outside work (a second marriage and becoming a step-parent). He gave up some of his management role and formally retired at age 63.

Access to jobs can be curtailed by health limitations and this may lead to early retirement:

Dennis had had a number of manual and semi-skilled jobs and also had run his own businesses. Until age 40 his health had been ‘quite good’. Then he had open heart surgery and he can’t do anything too exerting now. He retired on to the sickness benefit at age 63 on instructions from his GP.

Edward suffered a major heart attack and stroke at the age of 51. His health had been good up until then, but this meant a major life change. He returned to work part-time but the year following the first attack he had another and had to have major surgery. Even working part-time it was increasingly apparent that he had suffered major neurological damage. He was eventually medically retired in his mid-fifties.

In addition to their direct impact on the ability to undertake paid work, health problems causing extensive periods off work can produce financial difficulties. These may have long-term impacts in terms of the ability to accumulate assets for later life.

**Asset Accumulation**

The major form of asset accumulation among the interviewees, as in the New Zealand population as a whole, is home ownership. Most of the interviewees bought homes soon after marriage – in their mid to late twenties. Some men, however, who married later, had bought homes previously. Not owning a home in mid life is often associated with financial difficulties and this could affect prospects for retirement. A strong aspiration among the interviewees was to pay off their mortgages before retirement. Those still paying mortgages at retirement will be disadvantaged in terms of income adequacy if they are reliant on NZS. Keeping their houses well maintained is another aspiration for retirement and one which will contribute to a good quality of later life. A considerable proportion of the interviewees stated that they have investment properties and that these figure in their financial planning for the future.
Achieving home ownership is not necessarily a one-off achievement. Several examples of how people may lose home ownership through divorce, death of a husband, business failure or other setbacks were recorded in the interview data.

Although self-employment was often aspired to, the acquisition of businesses did not always lead to financial success. Flourishing enterprises constitute assets which can be mobilised in retirement, but where life savings were invested in an unsuccessful businesses this can affect plans for later life. Men are more likely to have occupational pension entitlements than women. Some male interviewees have had redundancy pay which may have been used constructively, to pay off mortgages, but in these cases no occupational superannuation will be available later. Few women interviewees have occupational pensions, given their more fragmented employment histories.

**Conclusions**

**Factors Influencing Decisions on Workforce Participation and Retirement**

The analysis of the qualitative interviews confirms the importance of factors identified in the postal questionnaire findings. Health was ranked first as an influence in all six interview groups and the above discussion provides many examples of health influences in the past, present and future life courses of the interviewees. Poor health clearly limits workforce participation for members of Group 4 and others, and contributed to withdrawal from work by members of Group 1. Plans for retirement or continuation of paid work are often expressed in terms of health status – “if my health keeps up”, “depending on my health”. Health can therefore be seen as a qualifier to workforce and retirement aspirations. It is a factor which is difficult to foresee and to plan for, but whose influence is pervasive in people’s thinking.

It is necessary, however, to “unbundle” health factors, as shown in the interviews, between long term and short term issues, mental and physical health, and also injury, which can also have long term and short term consequences. Workforce participation for some interviewees had been limited by health problems throughout their lives. This was often the case for mental ill-health and disability. Such problems could be a negative influence on the ability to establish a sound financial basis for retirement. In other cases, health problems – typically heart disease, strokes and arthritis – developed later in life and could precipitate early retirement. Accidental injury could happen at any life stage, but also had serious consequences for the well being of several interviewees.

Many of these points also apply to the health of family members, especially spouses, which influenced workforce and retirement decisions in particular, for several interviewees. This applied especially to women, whose own retirement decisions were influenced by their husbands’. Although caring responsibilities were not explicitly listed as an influence in the postal questionnaire, the “pull” of such duties were felt by some women with respect to spouses, elderly parents and adult children with special needs.

Pull factors, expressed in the postal questionnaire as “wanting to do other things” draw many people into retirement and the interviewees were more likely to rate this factor highly than the postal survey respondents as a whole. In this respect, however, another qualifying, or even limiting influence intervenes. The postal questionnaire choice “don’t need to work, have enough money” does not capture the full influence of income in decisions about work and retirement. If health is a qualifier, then income can be a facilitator or barrier in decision-making for all interview groups. Concerns about income clearly influence Group 5 decisions on moving from full to part-time work. For Group 6 inadequate finance is a barrier to
retirement and many members of Group 3 are anxious about money and expect to delay retirement.

Work experiences and current working conditions can act as either pull or push factors in workforce decisions not only regarding retirement, but throughout life. Those who enjoyed their current work were more likely to wish to remain; those who disliked the job, their bosses or working conditions in general often expressed a desire to leave, but were often limited by financial considerations.

**Interaction of Influences**

As already hinted at, the factors influencing workforce decisions and retirement rarely acted in isolation, and the stories of the interviewees illustrate complex interactions. Long-term ill-health or an acute episode could precipitate early retirement which was also desired because of dissatisfaction with work. The latter could provide the “push” which, linked with the desire to spend time with family, especially grand-children, led to retirement. Many people described contending influences and “trade-offs” in their lives. Work provides income for a better standard of living, but retirement gives time and freedom for activities of choice – even if it means managing on a lower income. This was why many interviewees had opted for part-time work after leaving a career job. Working part-time could give a balance between income-earning and free time.

Overarching such debates about the pros and cons of work life and family life are provisos related to health and financial circumstances. These ultimately are the two limiting factors which either facilitate or act as barriers to the achievement of preferred workforce status.

**Cumulative Effect of Life Course Experiences**

Any examination of decisions surrounding workforce participation and retirement cannot ignore the influence of life course factors and events, as the interview stories reveal. Socio-economic status may not be totally determined by family of origin, but early educational, employment and cultural experiences are clearly related to it.

Overlaid on family background are more general social and economic norms and expectations prevalent at the particular period. The discussion of cross-cutting factors examines how sex role stereotypes influenced the life courses of women, especially with respect to family roles and career aspirations. Policy settings within the welfare state ethos of the 1950s and 1960s helped many to attain home ownership, supported traditional family forms and the male breadwinner concept.

The financial situation of people in mid life and their level of asset accumulation results from lifelong experiences, both social and economic, including career stability or instability, access to occupational superannuation and/or the ability to save and acquire assets. It derives to some extent from personal abilities and aspirations, but also from opportunities for education and training and from labour force conditions. The cohort from which the interviewees are drawn found it easy to find work when they were entering the workforce, and to move between jobs if they were dissatisfied. Many had opportunities for on-the-job training and did not then feel the need for formal qualifications. Later they often experienced redundancy and unemployment in mid-life, resulting from general economic and political conditions. This could lead to job-related stress and dissatisfaction, especially where it was difficult to become re-established in the workforce. The rise of economic rationalism and deregulation also influenced the success or otherwise of business ventures for those who took the path of self employment.
In adulthood, interviewees experienced both stability and instability in family life as well as employment. Here again there were external and personal influences. Most conformed to the norms of early marriage and child-bearing in the 1950s and 1960s, but many experienced marital break-up later. These experiences also acted cumulatively to influence their personal and financial situations in mid life as they approached retirement. Marriage break-up could lead to loss of home ownership and other assets. Gender differences were clear in these areas, with women more commonly experiencing sole parenthood and the problems of balancing childcare and paid work. This underlies choices for part-time expressed by women in Group 2. Women were also more likely to have experienced widowhood and its consequences in their 50s and 60s. Personal abilities and aspirations also influenced the success with which interviewees managed their money and planned for the future.

**Views of Retirement**

The interview material shows that few people saw retirement as a discrete event – as a “cliff edge” movement from full-time work to total exit from the workforce. For some it meant leaving a long-term career job, but this did not preclude continuing, or aspiring to continue, in part-time or contract work. For others, voluntary work provided a substitute but could be equally time-consuming and sometimes equally, if not more, rewarding.

Retirement is therefore a fluid and somewhat ill-defined concept, as indeed is “work” itself. Many people experience retirement as a period of transition, often facilitated by part-time, contract or voluntary work. The preference for “phased” retirement was clear among the group who are still in the workforce. For Group 5 a reduction in working hours was seen as transitional. This links with the point made earlier – that people see the advantages of continuing to work for income – but plainly this was also for stimulation and social contact. This is not to say that phased retirement is always achievable. Examples quoted above show that, where flexible hours were not possible, people opted for full retirement, especially when they were subject to the pull factors of home and family.

Fluidity also applies also to the timing of “retirement”. Several members of Group 1 had retired well before age 65, which, as the age of eligibility for NZS, is often seen as ‘retirement age’. Many in Group 3 expected to work well after age 65 and Group 4 members sought to re-enter the workforce after what could be seen as retirement.

The choices and decisions which people make about workforce participation and retirement in mid life are significant to the individuals concerned in terms of their well being in later life. But they also have wider implications. The New Zealand workforce is ageing along with the population as a whole, and labour shortages are predicted to emerge, especially as the large “baby boom” cohort enters their sixties. Thus individual decisions will have policy implications in terms of labour supply and also in terms of economic contribution in a context where public sector support is required for a much increased dependent elderly group. It is likely that policies will seek to influence decisions about retirement and prolong workforce participation. The findings reported in this chapter show that the success of such policies may depend on a clear understanding of the influences on individual decisions, on how these influences interact and on the life course factors, both personal and contextual, which underlie them.