



RETIREMENT: MEANINGS FOR NURSING PROFESSIONALS

APOSENTADORIA: SIGNIFICADOS PARA PROFISSIONAIS DE ENFERMAGEM

JUBILACIÓN: SIGNIFICADOS PARA PROFESIONALES DE ENFERMERÍA

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ABSTRACT

Objective: to analyze the meanings of retirement for nursing professionals. **Method:** Qualitative, exploratory, descriptive study. Sample consisted of 13 nursing professionals (nursing aides, auxiliaries and technicians) from a public state hospital. Data was collected through interviews performed from November 2012 to March 2013. The transcribed statements were subjected to a content analysis. The research project was approved by the Research Ethics Committee, Protocol 002/2012. **Results:** the analysis of the speeches resulted in the following categories: << Initial feelings toward the situation of retirement>>, << Opportunity to do what you enjoy doing >>, << Experiencing feelings of worthlessness >>, << Desire to return to the world of work>>, << Missing the friends >>, << Experiencing feelings of accomplishment >>, << Lack of preparation for retirement >>, << Quality of life for retirees >>. **Conclusion:** Retirement was permeated by positive and negative aspects. The latter were related to the inadequacy or lack of preparation for entering a new stage of life. **Descriptors:** Retirement; Workers; Quality of Life; Nursing.

RESUMO

Objetivo: analisar o significado da aposentadoria para profissionais de enfermagem. **Método:** estudo exploratório, descritivo, com abordagem qualitativa, realizado com 13 profissionais de enfermagem de um hospital estadual público (atendentes, auxiliares e técnicos). A produção de dados ocorreu de novembro de 2012 a março de 2013 por meio de entrevistas gravadas. As falas transcritas foram submetidas à Análise de Conteúdo. O projeto de pesquisa foi aprovado pelo Comitê de Ética em Pesquisa, Protocolo 002/2012. **Resultados:** as análises das falas resultaram nas categorias: << Sentimentos iniciais à situação de aposentadoria>>, << Oportunidade de fazer o que gosta >>, << Vivências de sentimentos de inutilidade >>, << Desejo de retorno ao mundo do trabalho >>, << Vivenciando a falta dos amigos >>, << Vivências de sentimentos de dever cumprido >>, << Falta de preparo para aposentadoria >>, << A qualidade de vida para os aposentados >>. **Conclusão:** a aposentadoria foi permeada por aspectos positivos e negativos, sendo estes últimos relacionados à inadequação ou falta de preparo para uma nova etapa da vida. **Descritores:** Aposentadoria; Trabalhadores; Qualidade de Vida; Enfermagem.

RESUMEN

Objetivo: analizar el significado de la jubilación para profesionales de enfermería. **Método:** estudio cualitativo, exploratorio, descriptivo. La muestra estuvo compuesta por 13 profesionales de enfermería (ayudantes, auxiliares y técnicos de enfermería) de un hospital público estatal. Los datos se colectaron mediante entrevistas grabadas entre noviembre 2012 y marzo 2013. Las declaraciones transcritas fueron sometidas a análisis de contenido. El proyecto de investigación fue aprobado por el Comité de Ética en Investigación, Protocolo 002/2012. **Resultados:** el análisis de los discursos resultó en las siguientes categorías: << Sentimientos iniciales a la situación de jubilación >>, << La oportunidad de hacer lo que a uno le gusta >>, << Experimentando sentimientos de inutilidad >>, << El deseo de volver al mundo del trabajo >>, << Echando de menos a los amigos >>, << Experimentando sentimientos de logro >>, << La falta de preparación para la jubilación>>, << La calidad de vida de los jubilados. >> **Conclusión:** La jubilación estuvo permeado por aspectos positivos y negativos. Los últimos están relacionados con la inadecuación o falta de preparación para una nueva etapa de la vida. **Descriptores:** Jubilación; Trabajadores; Calidad de Vida; Enfermería.

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INTRODUCTION

Work is important for the construction of the social being, since human beings produce and reproduce themselves through labor. It is through daily work that they become social beings and differentiate themselves from other species.¹ Thus, when individuals retire, they begin a new phase in their lives, which may cause various physical, psychological, social, and mental changes, among others. These changes can lead to the loss of personal identity as a social being. Moreover, this is also a period in which people face the issues of aging.² The role of being a worker (in the construction of personal identity), may collapse when a person exits the world of work. Thus, it is of fundamental importance that retirees reorganize their life projects and identities, because the centrality of work in contemporary society gives a perspective of social exclusion for those who are retired.³

Etymologically, retiring comes from the Latin (intransitive) verb *pausare*, which means to land, stop, cease, rest. It corresponds, in French, to the verb *retirer* or *retraiter* whose meaning is to withdraw, isolate, go away to a place of shelter. In English, the verb to *retire* is defined as: to go away or apart, to a place of privacy or seclusion. In Portuguese, the word *retiree* is defined as: a person who has retired, who stopped working due to lack of health or because he/she has reached a specified age. *Retired* means "something that is no longer used, that has lost its usefulness or is housed in a room."⁴ According to these definitions, we infer that the term *retire* has a strong connotation of no longer being useful in life, i.e., a retiree is a person who no longer participates in activities considered important to society.

Retirement can be a stage of life as meaningful and enjoyable as the experiences lived at work. However, in order to be so, there should be the possibility of personal development. Self-esteem and identity should be preserved, and the idea that happiness only occurs when a person inserted in the world of work should be destroyed.⁵ In India, a study was conducted in order to analyze the effects of job status, social adjustment and life satisfaction on 96 employed retirees and 164 unemployed retirees (all male, between 55 and 85 years of age). No significant difference was found in personal adjustment between the two groups, but social adjustment rates were significantly higher in the group of employed retirees.⁶

Using data from the Survey of Health, Aging and Retirement in Europe (SHARE), which

provides information on 27 thousand people over the age of fifty in 11 European countries, we identified the importance of doing research with older people, because aging is a dynamic rather than a static process. This study also revealed that, due to this dynamism, it is vital to conduct constant research to better understand the psychosocial well-being of retirees.⁷ In view of these considerations, it is clear that retirement is a unique stage of life, in which human beings are faced with a series of critical, interconnected situations that interfere with their quality of life. Thus, the present study aims to identify the meaning of being retired for nursing professionals from a public hospital in northern Paraná.

Unveiling these meanings may contribute to the planning of actions aimed at preparing workers for understanding and coping with changes resulting from retirement. It may also contribute to the promotion of health and prevention of diseases.

OBJECTIVE

- To analyze the meaning of retirement for nursing professionals.

METHOD

This is a qualitative, exploratory, descriptive study. Sample consisted of 13 nursing professionals (nursing aides, auxiliaries and technicians) who had retired from a public state hospital in northern Paraná, Brazil.

The following inclusion criteria were adopted: individuals of both sexes, retired for at least two years from the public institution mentioned above. We excluded from the sample those persons who did not develop their professional activities in the analyzed hospital and those who had been retired for less than two years.

The definition of the number of subjects was not based upon numerical representativeness. Thus, we did not set a sample size. The interviews were conducted until a 'convergence of speeches' in relation to the studied phenomenon occurred.⁸

Data were collected through interviews performed at the subjects' homes from November 2012 to March 2013. These individual interviews took place after the subjects signed the Informed Consent Form. The list of retirees was provided by the Human Resources department of the public hospital and we intentionally chose subjects who met the inclusion criteria.

The researchers contacted potential subjects of the sample via telephone. Three subjects refused to participate in the study.

The interviews were conducted using a semistructured script which consisted of two parts: a) objective questions pertaining to the sociodemographic profile of respondents; b) guiding questions: What does it mean to you to be retired? When you were still working, did you used to plan or think about your retirement? Which factors do you believe are important for a retirement with quality of life?

Results were analyzed using content analysis method. The following steps were followed: reading; definition of register and meaning units; coding and classification; processing and interpretation of results. A 'floating' reading made it possible to identify register units, and organize them into topics. Categories were built up according to approximations and distancing to and from the meaning units.⁹ The interviewees were identified by the letter E followed by a number (E1, E2, E3, and so on).

The research project was approved by the Ethics Committee on Human Research of the State University of Londrina, under Opinion No. 002/2012.

RESULTS

Among the 13 women interviewed: one was 58 years old, six were between 60 and 69 years old, and six were over 70 years old; three were divorced, three were widowed, six were married, and one was single; six had been retired for less than five years, four had been retired for between six and ten years, two had been retired for 14 years and one had been retired for 18 years.

The analysis of the interviews led to the construction of eight categories, as described below together with the statements of the retirees.

• Category 1: Initial feelings toward the situation of retirement,

At first I felt out of place, because every day I had to get up early and go to work. It was a routine and then there was an emptiness. But time heals all wounds. In the beginning, when I asked to retire, I wanted to go back on my decision. When I received the first payment, I even regretted my decision because I was earning less. (E7)

When I retired, in the beginning, I really missed work, but now I'm used to it. (E8)

I felt a very deep sadness [...] I think that, if I had given it a little more thought, I would not have taken this decision to retire,

it is very good when you do what you enjoy. I'd like [...] to return to work. (E10)

• Category 2: Opportunity to do what you enjoy doing,

It is very nice to be retired, I do what I enjoy doing, like taking care of my home and children. When I worked, I was always running back and forth, now I really want to devote myself to my children, my husband and my home. (E6)

[...] I can do what I like since I've retired. (E8)

It's great because I can take care of my grandchildren. Whenever I want to be with my grandchildren, I do; and whenever I want to go sightseeing or traveling, I can do that also [...]. (E13)

• Category 3: Experiencing feelings of worthlessness,

We feel like a nobody. It seems that we are not worth anything anymore. When I was working, I had to get up and run all the time in order to be able to perform all my tasks. Now, I get up and stay like a fool at home, in the end I lie down again, sit down, leave the house [...]. (E2)

I liked what I used to do, really loved it and maybe if I had thought a bit more about it, I would not have taken that step, I would have continued working, I liked my job and I think I was more useful back then than today. (E10)

• Category 4: Desire to return to the world of work,

When I worked, it was the best thing in the world for me. If I were to go back to work today I would do it with great happiness. I regret having retired, if I could still go back now, I would. The best place I have ever worked in was the hospital. (E2)

If I could and had the energy that used to have, I would still be working, if I were 10 or 15 years younger, I would go back to work. (E10)

• Category 5: Missing the friends,

I miss my colleagues, I really do miss them. (E3)

I miss my colleagues. (E4)

I miss everything, the colleagues, the bosses, the patients [...]. (E10)

• Category 6: Experiencing feelings of accomplishment,

I can sleep in peace at night knowing that I did my job well, if I could do it all over again, I would do it in the same way. (E4)

It's great to be retired, I worked hard, now I'm enjoying the benefits of what I've done. It's a feeling of accomplishment. (E11)

I feel like I've done my share of work in these 30 years. (E12)

• Category 7: Lack of preparation for retirement,

When my retirement letter first arrived, I cried a lot, I felt I was not ready, it was as if I had fallen into a hole. I thought, now there's nothing I can do. I thought that I was prepared, but I was not. (E2)

In the first two months I felt good because I was resting. I had always worked at night. After three months I asked to go back and the lawyer said that it was no longer possible. (E13)

• Category 8: Quality of life for retirees,

I bought a house, it is not a big house, but it's mine. I don't have to pay rent, I have everything I need. To me, that is quality of life for being a retiree. (E4)

I think that having quality of life after retirement is to have a good relationship with the family, with friends, to do exercises. I enjoy helping in kindergartens, volunteering. (E5)

Quality of life is to be healthy and to age with health. Thank God I am healthy, I do exercises and go to church. (E8)

DISCUSSION

Immediately after the completion of retirement, it is common that a new routine will come to be and people will experience a period of disenchantment or even depression. The greater the fantasies, dreams and idealizations that people have in the pre-retirement phase, the greater the emptiness of disenchantment they will feel later. The failure of fantasies represents the collapse of a structure of choices, which can lead to depressive feelings. People must adjust themselves to the reality of retirement.¹⁰ Thus, it is essential that they re-orient themselves. They should look for new opportunities to engage with the world and forge new life projects. The goal is to find realistic ways to establish a structure and a routine to their lives as retirees, providing them with a minimum of satisfaction.¹⁰

As soon as retirees can establish criteria to deal routinely with the changes and choices associated with retirement, they will begin to experience a satisfactory routine. However, this does not happen from one moment to another, mainly because each human being is unique and has his/her own specificities and particularities. These individuals actually assume their roles as retirees, when the period of stability is achieved. They then understand what is expected from them in this position and start to recognize their capabilities and limitations.¹⁰

Similar results were found among retired American women. A study revealed that these

women spent most of their time in family-related activities: time with their husbands/partners, children and grandchildren, among others. Many were also interested in hobbies or in doing volunteer work. They emphasized that one should try to fill the time doing something useful for others.¹¹

With regard to the feelings of worthlessness verbalized by the interviewees in this study, it is a fact that, when people leave the productive world (the world of work), they may experience an identity crisis. Thus, feelings of worthlessness, emptiness and low self-esteem are triggered.¹²

The feelings of sadness and inadequacy to the new situation have arisen due to retirement in the nursing professionals who were subjects in this study. Because they did not believe that they would adapt to the new reality, some wanted to change their decision to retire and return to the previous work place, which was not possible. Likewise, retirement was more challenging than expected by many American women. Physical limitations and economic insecurity have contributed to the disappointment at retirement. This demonstrated that retirement is not always made up of choices taken by retirees, but is much more about facing challenges, limitations and unexpected circumstances.¹¹

Many interviewees in this study stated that they missed their friends. This was also reported by public retirees who participated in another study. It was found that the loss of friendships cultivated during working years was an emotional distress related to retirement. Some respondents even mentioned that being away from the working social environment was the most important loss that retirement brought to them and that the hospital staff was like a family.¹⁰

Similar results from other studies corroborate these findings in the present study. They associate retirement with the possibility of joy, feeling of accomplishment or reward for the years dedicated to work.^{13,14}

Although the Elderly Statute (Law 10.741, as of October 1, 2003, Article 28)¹⁵ states that the preparation for retirement is an obligation that must to be stimulated by the public power, the fact is that it does not always happen in a proper way. It is emphasized that retirement should be preceded by information that will help people better understand this new phase of life. It must not necessarily be organized in the form of a program, but the institution must provide its employees with group or individual counseling

services for at least five years before the completion of this stage of life, and these services should become more intense with the proximity of retirement.¹⁶

The lack of planning can negatively influence the adaptation to the new circumstances. Retirees may feel anxiety and loneliness due to the disappointment and difficulty in experiencing satisfaction and fulfillment as a person after retiring from their professional occupations. Such feelings may arise even though the professionals were not fully satisfied in their jobs.²

A study conducted with elderly retirees showed that, when retirement is planned, the individual is less exposed to the frustrating experiences that this phase can cause. A planning that encompasses a multidimensional view of the individual is of paramount importance.¹⁷ An interesting paper discusses aspects of the Elderly Statute and the Brazilian legislation on retirement and preparation for retirement.¹⁸ It presents a proposal for the participation of nurses in programs that help prepare other professionals, such as social workers and psychologists, for retirement. Nurses would then worry about the quality of life of workers (their clients) who will become elderly and retirees in the future.¹⁸

Retirement with quality of life is the topic of a dissertation being conducted with nurses retired from a public university in Paraná.¹⁹ Since research on this topic is scarce, it is expected that the results of the latter might encourage nurses to contribute to people in the process of retiring, in order to achieve a happier and better final process of life.

In the present study, we identified subjective and individual aspects related to quality of life after retirement. We could confirm that quality of life has a broad and an individual meaning. Ideas and thoughts are focused on various aspects of life for retirees. Some examples are: maintaining an good relationship with family and friends; eating healthy; having time for leisure, recreation, religious practice, physical exercise, adequate sleep, among other factors.²⁰

A systematic review of qualitative studies assessed the topic of physical activity during the transition to retirement. The search was conducted in 19 electronic databases. From 3,239 citations (excluding duplicates) only five qualitative studies published after 2003 were included in the sample.²¹ These data corroborate the statement that there is little research in this area.

Findings of a systematic review²¹ suggest that people should participate in physical activities after retirement, because they are a source of wellness, increase life expectancy, change the daily routine and provide new opportunities for social interaction for women, as well as new challenges for men. This study also revealed that among individuals from less favored occupational groups, physical activity occurs less frequently due to lack of time, or the perception of low personal value for recreational activities.²¹

Although the present study achieved the proposed objectives, it has limitations due to the fact that our object of research (retirement) involves subjectivity, and is influenced by time, space and the individual characteristics of each respondent. Thus, it is necessary to consider the results in its singularity, since they depict the reality of only a small portion of nursing staff retirees (nursing aides, auxiliaries and technicians).

CONCLUSION

It can be said that being retired was considered to have negative aspects for nursing professionals, such as feelings of sadness and emptiness short after retirement; sadness for missing friends, the desire to return to work and feelings of worthlessness. These findings demonstrate that the individuals in the sample have not been properly prepared for this new stage of life. This was confirmed by the fact that subjects reported that they believed they were prepared for retirement but they actually were not.

The following aspects of retirement were considered to be positive: the feeling of accomplishment, the quality of life related to the acquisition of material goods, the opportunity to have better relationships with family and friends, free time to dedicate to physical exercises and collaborate with the community by participating in volunteer service.

We believe that this study contributed substantially as a starting point to get to know the reality of this professional group and to call the attention of policy makers to the need of providing public policies that promote an effective preparation for retirement. This should be able to reframe the negative conceptions about this stage of life, bringing forth the positive connotations of retirement. We believe that this should be a starting point for those who spent great part of their lives providing professional care services in public institutions.

Given the limited number of studies on this topic and aiming to expand the sample used in this paper, we suggest that further studies are conducted and that the undergraduate courses in the field of health sciences include topics of elderly people and retirement issues into their curricula. In this context, a new field of action opens up for occupational nurses. They may work together with a multidisciplinary team to prepare professionals for retirement and enhance quality of life after retirement.

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