Title: Growing Older in Social Work: Perspective on Systems of Support to Extend Working Lives – Findings from a UK Survey

Abstract

Social work, like many other human services professions, is ageing. This article reports and discusses the findings of a UK social work survey undertaken in 2018 (1397 responses). It investigated how organisational policies and individual factors were affecting individual social workers' decisions about working in later life. The survey measured: 1) Social workers' attitudes to ageing at work and self-reported planning around retirement; 2) Mental health and wellbeing, quality of working life, and home and work interface; 3) Intention to leave work and retirement planning. Statistical analysis enabled examination of how the interrelationship of these factors and relevant individual characteristics interact within the systemic work environment. Findings revealed that all participants had considered factors that might cause them to retire early. Framing the findings in an ecological conceptual model suggests that age-inclusive professional and organisational cultures, age-positive Human Resource Management, support from line managers, fair working conditions and the ability to manage health and wellbeing, might enable social workers to extend their working lives in line with government policy. These findings provide insights for social work workforce policy makers, and for employers to assist in their development of organizational and individual adjustments to sustain wellbeing in the social work profession.

Key Words: Social Worker Well-being, Quality of Working Life, Intention to Leave, Ageing in Social Work

Introduction

Demographic change is causing population ageing world-wide (Flynn *et al.*, 2014). For example, in the United Kingdom (UK), by 2046, people aged 65 and older will comprise 24.7 percent of the population, compared to 18 percent in 2016 (Office for National Statistics 2017). Population ageing raises critical questions for societies, employers, professions and individuals. Among these are questions about maintaining equilibrium between demand and supply of labour and skills, trends in retirement expectations and planning, and sustainability of social security and pension systems. In response to population ageing, the UK Government wants people to work longer (Round, 2017), it has abolished the national retirement age and is increasing the state pension age, particularly for women (Flynn and Schröder, 2018). Leime et al., (2019) compared governments' employment policy and argued that, basing 'extended working lives' decisions on OECD and EU rules, risks treating older workers as one homogenous group without consideration of life-stage, diversity and gender.

The implications of these contexts have not been widely explored for the social work profession (Moriarty and Manthorpe 2008). This is surprising as the number of social workers approaching their 50's or already into their 60's is rising in England; of those working in adult services in 2013 their average age was 47, with 32 percent being in the age band 40-49; 30 percent in the band 50-59, and 8 percent aged 60 and over (Skills for Care, 2014). Given concerns about high turnover (McFadden, 2018), it is important to look more broadly than recruitment to replace those who are due to retire, and to avoid placing more pressure on remaining staff. However, to date, research on staff retention, turnover and early retirement in the social work profession has mainly focused on reasons other than demographic change-related public policy (McFadden, et

al. 2019; Burns and Christie, 2016). Early exit has been explored as part of studies of workplace pressures overall, contributing to emotional exhaustion among child and family social workers but also those working with adults (McFadden, et al. 2018). Concerns relate to skill shortages and vacancy levels, particularly in child protection, but also encompass levels of sickness and absence, presenteeism (attending work when unwell) and resignations (Javalier, 2018). The Chartered Institute of Personnel Development's (CIPD) Absence Report for the wider public sector highlights an increase in absence associated with stress, with stress being the main cause of long-term absence and the second highest cause of short-term absence (CIPD, 2016). The link between workload and organisational factors as stressors is also cited as a *'main cause together with rapid organizational change'* (CIPD, 2016, p. 2). Furthermore, the Department of Work and Pensions (DWP, 2017) reports that employees from health-related professions and social work are leaving work early on health grounds, noting that 24 percent of female and 21 percent of male employees in these sectors retired early on health grounds.

Whilst there is increasing research interest in social worker wellbeing, organisational factors, working conditions, burnout, turnover, retention and the consequences of limited experience in teams (McFadden, 2018, Javalier, 2018), little is known about the implications of 'ageing' in the social work profession. We do not know the factors that contribute to age-specific health and wellbeing concerns among social workers, including the factors that contribute to individual decisions to retire early or stay in work. Indeed, there is a lack of literature on strategic organizational level considerations of changes to the work environment in response to age, despite what is known about population ageing. Furthermore, employer reactions to ageing social work profession demographics are less understood than in nursing and teaching (Ryan *et al.,*

2017) or adult social care services (Lipman, Manthorpe and Harris, 2018). The inter-relationships of age-related personal factors, the job itself, and employer or environmental contexts therefore remain under-investigated. This is surprising given the scale of concern about poor social work retention, lack of experience because of early exits from the profession, and limited capacity to support new social work professionals (Baginsky, 2013).

We focus on the United Kingdom (UK) to investigate how national policies related to population ageing, but also how organisational policies and individual factors, affect individuals' careers in later life in the social work profession. In doing so we respond to Moen's claim that "*Often investigators look for static 'antecedents' of retirement timing or snapshot 'consequences', not the dynamics of the retirement process as it develops over occupational and family careers and in particular historical, organizational, and social contexts*" (Moen, 2004, p. 283). We apply Moen's reflection to processes related to late career expectations, transitions and trajectories, including (early) retirement but also career changes within and out of the social work profession.

Ecological Systems Theory-informed Analysis

To make sense of systemic job-related experiences for social workers, and their responses to the survey discussed in this present paper, Bronfenbrenner's (1979) ecological systems theory was considered in the analysis. This enables the conceptualisation of systems and structures that impact on individuals from micro level analysis through to meso, macro and chronosystems. The ecological model is a potentially helpful way to increase understanding of the main concerns for social workers around their self-reported quality of working life, attitudes to ageing at work, intentions to leave, retirement planning and mental wellbeing across age bands. At micro and

meso levels, social workers are coping with the demands of their role in the context of job demands, service user problems and traumas, and variable team and manager levels of support, whilst managing a home/work life balance, personal relationships and/or caring demands.

Macro level systems impact on social work both through increasing demand and complexity and reductions in resources, but some are also increasingly impacted by socioeconomic conditions, personal poverty and ethical challenges (Pentaraki and Dionysopoulou, 2019). Furthermore, changes in employment policy and requirements to work longer, interact with social workers' own attitudes to ageing at work and their retirement plans. The individual social worker is at the nexus of constant social interaction with a range of systems as part of their work, and these systems are interactive and dynamic. Social workers are actors in the construction of these environments, but also the recipients in a symbiotic process of ongoing exchange. Another dimension to this conceptual frame is to consider how chronosystems impact. For example, younger workers may want maternity or paternity leave to improve work-life balance or work breaks, whilst older workers might want flexible working and well-being adjustments to juggle job-related pressures, grand-parenting or caring (O'Sullivan, 2015).

Research Question and Objectives

The rationale for this study was to explore which types of workplace accommodation might help social workers move towards a work pattern and trajectory which maximises health and wellbeing. The overall research question was 'What are the self-reported health and wellbeing concerns of social workers in the UK and how do these relate to desire to stay or leave work at

varying stages of their career?' The present paper narrows this over-arching question to focus on two specific areas as follows:

1.   Which factors influence social workers' perceptions of retirement and late-career trajectories, and wellbeing?

We predict that those factors are located at the micro, macro and meso level, including personal circumstances, work context and interface with employers. Micro level factors might include personal circumstances such as family support or career stage; macro relates to the systemic context in which organisations operate and the meso level addresses the interface between social workers, co-workers, managers and service users. Within this we also pose the question:

2.   What is the relationship between perceptions of retirement and wellbeing?

We investigate this first by comparing which factors predict either set of dependent variables and then investigating how wellbeing is patterned by different perceptions of retirement and late-career trajectory.

Methodology

This study utilised a cross-sectional design that was predominantly quantitative, enabling anonymous responses to an online survey, run at low cost that was easily distributed to many potential participants across the UK (Sarantakos, 2005). The survey was designed to meet the objectives of the study and was informed by a literature review. It contained validated and

reliable standardised scales as well as allowing free-text qualitative responses to gain fuller understanding of social worker perspectives.

Sampling and Participants

The survey was administered to a purposive sample of those who agreed to participate following receipt of an email from Community Care © or by snowball sampling via word of mouth or an email from Northern Ireland Social Care Council (NISCC) or employers. Registered social workers including social work managers who subscribed to Community Care (http://www.communitycare.co.uk/) for daily or weekly email alerts for 'social work news' were invited to participate. Inclusion criteria were: Social workers on any salary band who were currently (at the time of the survey) employed or self-employed (temporary agency workers or other arrangement), within any area of social work in the UK, for example, child protection, mental health, older people, criminal justice, learning disability, physical disability, youth justice, criminal justice, education welfare, court welfare or those who work in voluntary or not-for-profit or charity sector in social work roles; recently retired social workers (i.e. who left their social work job in the last year). Social care workers and others in professions allied to medicine (such as generic case managers that are not social workers), were excluded from the sample, as were student social workers and non-registered individuals who had previously been registered as social workers.

Total participants numbered 1397, spanning England (51%), Wales (2%), Scotland (2%) and Northern Ireland (45%). Most respondents were female (81.7%), 18.3% were male and one individual did not identify as female or male (0.07%). In relation to disability, almost all (97%)

did not report a disability. Most were married (58%) or living with a partner (13%); fewer were single due to preference, divorce or separation (29%). In relation to caring responsibilities, half (47%) were carers (41% were not); with 32 percent caring for children and 20 percent caring for parents. The remainder were caring for a sibling or a friend. Most of the sample (87%) worked in the statutory sector, local authority, NHS or Health and Social Care Trust; a few (6%) worked in the voluntary sector; 2.3 percent worked in the private sector, 3.7 percent were self-employed, and less than one percent worked in the community sector. Participants spanned a range of practice areas, with 31 percent in child protection and children's disability services; 13 percent with older people; 4 percent in physical disability; 12 percent in mental health; 2 percent in residential child care; 5 percent in adult learning disability; 3 percent in youth justice and 31 percent in 'other'. Over half (52%) of the sample were front-line social workers and a quarter (25%) were team leaders or senior managers. The remainder did not identify with these categories but were independent social workers or worked in voluntary or community sectors. Most (87%) participants had a permanent contract, while 4 percent were temporary, and 6 percent worked for an agency as temporary locums. The remaining 3 percent worked independently. This was a very professionally experienced sample with 72 percent having been 11 years or more years in social work practice and 14 percent having less than five years.

Access and Recruitment Procedures

Following contact from the Community Care email Subscription Team, submitted responses were managed by the Principal Investigator (PM), using a Qualtrics © link to the survey. There was an explanation of the nature and focus of the study, including why Community Care was facilitating the survey and how the responses would be reported and used. Participants were

advised of anonymity and of their ability to withdraw from the study at any time by not completing the survey. Participants were asked to confirm that they had read the Participant Information material before completing the questionnaire by ticking a box. Completion of the survey indicated consent.

Ethical Considerations

The study received approval by the Ulster University's Research Ethics Filter Committee of in January 2018. Assurances of anonymity meant it would not be possible to respond to any indications of distress, but signposting advice was provided to participants, if a need for support was indicated. It was acknowledged that the findings would produce a UK-wide evidence baseline dataset that employers could use to make evidence informed, organisational level policy adjustments to support the needs of the workforce. All permissions for use of scales were received from original authors, and consent and confidentiality were addressed in Participant Information materials.

Data and Variables

The survey measured social worker attitudes to ageing at work and self-reported planning around retirement, mental health and wellbeing, quality of working life and home and work interface and intention to leave work. The questionnaire had five sections with a total of 67 items. We added a qualitative open-ended question at the survey's end, which enabled participants to add any additional information or comments. The survey was divided into five sections:

1. Demographics: UK country, age, gender, ethnicity, disability, marital/partner status, caring responsibilities, area of work, job tenure and role, time of professional qualification, hours of work, additional hours (over contracted hours), days of absence in last year, mid-late career changes after 50 years and work grade. (12 items)

2. Work Related Quality of Working Life Scale (WRQoL– 24 items)

3. Short Warwick-Edinburgh Well-being Scale (SWEWS 7 items)

4. British Social Attitudes Survey – Attitudes to Working in Later Life (BSAS - 9 items)

5. Intention to Leave scale (Roodt, 2004) (ITL – 15 items)

Standardised Scales Description Validity and Reliability

In addition to the demographic section, the remaining questions were derived from often used scales with good levels of validity and reliability. Cronbach's alpha with a value of over 0.70 is indicative of acceptable internal reliability. The 24 item WRQoL Scale is a psychometrically reliable measure with overall scale reliability reported as 0.96. (Van Laar *et al.,* 2007). The WRQoL measures both work and non-work-related factors that contribute to the well-being, engagement and stress of employees and includes questions on Job and Career Satisfaction, General Well-Being, Home-Work Interface, Stress at Work, Control at Work and Working Conditions. The Short Warwick-Edinburgh Mental Well-Being Scale (SWEMWBS) is reported as having a Cronbach's alpha of 0.84 (Ng Fat *et al.,* 2017). The SWEMWBS measures psychological functioning rather than feelings and is considered a good measure of mental well-being for the general population. Since 1983, the British Social Attitudes Survey has explored Britain's attitudes to work and welfare, and the Intention to Leave 6 item Scale (TIS-6; Roodt, 2004) is a valid and reliable measure of a workforce's intention to leave their current

employment. Bothma and Roodt (2013) established that the TIS-6 could not only measure turnover intentions reliably ($\alpha = 0.80$) but also distinguish between leavers and stayers (actual turnover), which confirms the scale's criterion-predictive validity.

Focal variables

Attitudes to Working in Later Life, Intention to Leave,

Retirement Intention was defined as a six-category outcome: Intending to retire before pension age; Intending to retire at pension age; Intending to retire after pension age; Not intending to retire; Answering 'Don't know' to the question on retirement intentions; Planning to change career before retirement. Participants were asked about their attitudes to employee supports aimed at older workers and about their reasons to consider retirement. Participants could select to identify any option that applied to them. Intention to leave was measured by a Likert standardized scale that explored questions about *thinking* about leaving and *planning* to leave. Sickness absence was measured by asking about duration of sick leave in the last year. Options varied across a range of possible responses, from under 10 days to more than 6 months.

Explanatory factors

Micro/chronosystemic level individual characteristics includes age and gender; disability, mental health, marital/partner status, caring responsibilities, area of work, job tenure and role, professional qualification, hours of work, additional hours (over contracted hours), days of absence in last year, mid-late career changes after 50 years and current work grade. *Macro level* describes the wider context in which work takes place, including the geographical area worked in and employment sector (i.e. statutory, private sector, charity). *Meso level* is the organisational context, this level describes the employee's job role and their interface with their job tasks: social workers' organisational status; work pattern (excess hours); contract type; area of social work (e.g. child protection, mental health).

Data Analysis Strategy

We conducted an exploratory analysis of levels of health, wellbeing and intentions to leave work reported by the sample, as well as attitudes towards retirement. Systems theory (Bronfenbrenner, 1979) was applied as a framework for analysing the connections between these sets of factors and their relationship to contextual issues at the micro, meso, macro and chronosystemic (age related) levels. The survey results were analysed using SPSS 24 and Stata 15.

Inferential analysis focused on identifying independent predictors of retirement intentions, as well as measured levels of Mental Wellbeing and Workplace Quality of Life (QOL). First, a series of multinomial logistic regression models were specified with Retirement Intention category expressed as a function of the explanatory variables outlined in the previous section. Micro, meso and macro variables were entered together as blocks in separate regressions, with a

final fourth model including all explanatory levels. An equivalent structure of Ordinary Least Squares (OLS) models was applied to the interval outcomes derived from the Intention to Leave, Mental Wellbeing and Workplace Quality of Life Scales. An additional multinomial logistic model structure was applied to examine likelihood of an individual taking sickness absence of different durations.

Models of health and quality of life had an additional block of predictors. These were first entered as solo predictors to show bivariate associations; then as a block of related factors (e.g. all reasons indicated for retirement); then as a larger block of attitudinal and perception-related factors; and finally, as a fully adjusted model accounting for influences on wellbeing at other ecological levels.

In order to compare the influence of key factor groupings across models, these analyses focused on participants with valid response values for each of the above outcome variables (N=1139). Predictor-level missingness was not used to exclude further participants and dummy variables were included in regression models to represent missing values on predictor values.

Open-text responses were analysed using thematic analysis (Braun and Clarke, 2006) and coded using NVivo 11. Where identified themes intersect with survey foci, findings from open-text responses are presented alongside quantitative data. Additional themes are presented at the end of the results section.

Because of the exploratory nature of this analysis, we focus our description of results at the factor block level and on the specific factors where there is evidence of statistically significant associations with key outcome variables. Table 1 – Correlation matrix - presents a full list of variables between outcomes of interest.

Results

Outcome Variables

Retirement Expectations and Planned Changes

A third of participants (32%) said it was likely or extremely likely that they would leave the profession before retirement age. A third of participants planned to retire at their anticipated pension age (401; 33%). A further 372 were planning to retire after pension age (31%).

The majority (68%) expected to retire in their 60s but some (12%) expected to retire in their 50s. Those employed in Mental Health services were most likely to want to retire earlier, with 17 percent stating that they would retire in their 50s or earlier. The majority of the other client group categories intended to retire in their 60's or before. A small minority planned to work until their 70s. The average age of expected retirement in the sample was 63. A significant minority (167; 14%) said they planned a late career change before retiring.

Working Conditions and Sick leave

Hours worked per week varied from 17 percent working part-time, 35 percent working 38 hours per week and 48 percent reporting working excess hours ranging from 5 hours to 11 or more per week. Participants were asked how many 'sick days' they had in the previous year. No sickness absence was reported by 41 percent and 38 percent reported less than ten days. Eleven to 20 days

were reported by 8 percent, and 8 percent reported 21-60 days. Longer term absence was in a minority with 3 percent taking more than 60 days but less than six months, and 2.2 percent having six months and over sickness absence.

Knowledge of Pensions and Expected Age of Retirement

Around half of all participants thought their knowledge of pensions was patchy, particularly those in Northern Ireland. Unsurprisingly, knowledge of pension matters tended to increase with age.

Mental Wellbeing and Workplace QOL, Intention to Leave and Sickness Absence

Correlations between outcomes are in the expected directions. Mental Wellbeing and Workplace QOL scores were positively linked. Each of these is associated with lower Intention to Leave, though the stronger correlation is between Workplace QOL and Intention to Leave. Those with higher Mental Wellbeing were more likely to say they do not intend to retire and are less likely to want to change career. Higher Intention to Leave scores were associated with lower likelihood of wanting to retire later and strongly associated with intention to change career. The strengths of these associations suggest that intention to leave is less likely to manifest in retirement planning than in planning to change jobs. Sick leave was more likely among those with lower Mental Wellbeing, lower Workplace Quality of Life, and among those with higher Intention to Leave scores. Those who had taken over six months of sick leave were more likely to intend to change career, though the association between these specific intention categories and sick leave was comparatively weak.

INSERT TABLE 1 HERE

INSERT TABLE 2 HERE

Table 2 shows the fully adjusted models account for between 13% and 23% of variance in the outcomes of interest. In each case, the fully adjusted model yields higher R^2 than any individual block, indicating that each block of factors represents a distinct source of variance and influence on these outcomes.

With respect to the Intention to Leave scale, meso-level factors account for more variance than micro or macro factors. However, when we look at specific plans around retirement, individual-level demographic factors have the stronger predictive quality.

Meso-level factors account for the greatest amount of variance in the Workplace Quality of Life. R^2 scores for retirement perception blocks suggest that these factors have a comparable stand-alone correlation with wellbeing indicators as any of the other blocks. Individual items accounting for this association are discussed in the ensuing section.

Micro-level Predictor Variables

Age

The age of an individual social worker could be seen to have some modest effects on their retirement planning and wellbeing. Those aged between 36-45 were more likely to want to retire after their anticipated pension age than others (OR 2.43, CI 1.02, 5.81) or to state that they did not know when they would retire (OR 2.4, CI 1.24, 4.66). Intention to leave was lowest among older social workers. Expectation of working past pension age (N=119) was more likely among people aged 55-65, while participants over 66 were also more like to state they were not planning to retire.

The age groups with higher Workplace Quality of Life (WQOL) were the oldest group, whose WQOL scores were almost half a standard deviation higher than the reference group of 46-55 years (0.44, SE 0.21) and the 36-45 age group. This difference is robust, withstanding the inclusion of other factors, including organisational status.

Gender

Response patterns were similar overall between female and male social workers. Men were slightly less likely to have been on sick leave of a period of 21-40 days.

Marital Status

Wellbeing scores were similar overall for social workers of different marital status, with the only advantage accruing to those in cohabiting relationships who had slightly higher overall mental wellbeing (0.24, SE 0.09). The preference to retire before anticipated pension age was less likely among people who had never married with single participants being more likely to state that they did not know when they would retire, adjusting for age and all other factors.

Disability

People who reported having a disability had higher scores on the Intention to Leave scale, as well as lower Mental Wellbeing, Workplace Quality of Life and higher sickness absence.

Length of Professional Experience

Overall Intention to Leave scores were lower among all groups with over 10 years' experience, adjusting for age. The preference to retire before anticipated pension age was less and among people with less than one year of experience (OR 0.23*, CI 0.05, 0.99). However, these same groups were less likely to report that they did not plan to retire.

Caring responsibilities

Caring responsibilities were not found to be significantly associated with career perceptions or wellbeing among this sample.

Macro-level Predictor Variables

Service Location: the 'Northern Ireland Effect'

Social workers in Northern Ireland (NI) were less likely than their counterparts in Great Britain to prefer late retirement or to be planning a change of career. Adjusting only for other macro-level factors, NI participants had lower overall scores on the Intention to Leave scale (-0.15, SE 0.03), though this effect was not robust to adjustment for factors at other levels. This could suggest underlying differences either in the individual profile of social workers in different regions, or in the meso-level interface between individuals and their organisational roles. NI social workers also had higher Wellbeing and Workplace Quality of Life and lower reported short-term sickness absence, adjusting for all factors.

Service Context

The type of employment structure in which an individual works was shown to be a significant

predictor of wellbeing and retirement perception. Compared with those working within statutory

bodies but few overall, private sector social workers had lower Mental Wellbeing scores, while

self-employed social workers reported higher wellbeing. Workplace Quality of Life was higher

among those in the voluntary sector.

A preference to retire after pension age was more likely among private sector social workers,

while agency social workers were more likely to state they did not know when they would retire,

but also had higher ITL scores. Community sector social workers also had higher Intention to

Leave scores.

Service User or Client Group

Participants who stated they did not know when they would retire (N = 127) were more likely to

be working in children's disability services, while this group was also more likely to state that

they planned to change careers. People working with adults with intellectual or learning

disabilities or reporting 'other' as their service user group had lower ITL scores.

Meso-level Predictor Variables

Organisational Status

Organisational position revealed significant differences between basic grade social workers and

those in management and leadership positions. Senior managers were less likely to say they were

planning to change career or did not know when they would retire. Basic grade social workers had higher ITL and lower wellbeing scores than any other group. Open-text responses pointed to experiences of ageism among social workers and suggested these were linked to a lack of support from management. One mentioned that "Working environment was unsupportive and I felt subjected to ageism from management".

Contract Type

Compared to social workers on permanent contracts, those contracted through agencies had lower Workplace QOL and higher ITL scores. They were also more likely to plan to retire after pension age or to have no retirement plans.

Working Hours

Their pattern of work was a predictor of both social worker wellbeing and perceptions and career trajectory. Those working most hours had highest scores on ITL and lowest on Workplace QOL and were most likely to say they planned to change careers.

Open-text items suggested that working conditions had worsened over time and the "Job [had hence become] too stressful" or "too fast paced to do longer". In particular, growing older was thought to even further limit one's ability to cope with these working conditions: "The work I do will, I am certain be impossible to manage past 65"; "The Job has impacted on my health and wellbeing and I have developed stress related illnesses". While personal health is an individual-level determinant of retirement intention and timing, health problems were often job-related and therefore meso-level triggers. Therefore, even though macro, meso and micro-level factors shape

individuals' work and retirement expectations, it appears as if meso-organisational level determinants permeate both the macro- and the micro-level.

Reasons for Considering Retirement

Stress, quality of life concerns and pressures at work were among the main reasons social workers cited as reasons why they would consider retirement. As a block of variables, the reasons selected for wishing to retire were strongly correlated to wellbeing indicators. The most popular reason cited for retirement was 'because I want to' (N = 457). This response was associated with higher workplace quality of life and being less likely to have reported sickness absence for fewer than 10 and more than 40 days. People who indicated this said they would retire to avail themselves of a personal pension (N = 315) and had higher workplace QOL scores. Those who said they would retire because they could afford to also had higher wellbeing together with higher workplace QOL. A fifth (20%) said this was because they found the work very stressful while 28 percent said they thought the job was negatively impacting on their health and wellbeing. Smaller percentages (6% and 8%) said they would leave to gain a variety of experiences and for a change. Unsurprisingly, the retirement reason most strongly associated with wellbeing was retiring because of ill-health (N=100): this was associated with lower wellbeing, lower workplace QOL and with higher sickness absence of any duration.

Lower wellbeing scores were also found for participants who indicated they would retire because they thought their employer would not wish them to work past a certain age (N=94). This theme of expectations was raised through open-text response also, when social workers described their experiences of ageism: "People expect you to retire to make room for younger workers".

Attitudes to Employer Supports for Longer Working

Participants thought the key action an employer could take was provide options for flexible working, working part-time or moving to a less demanding role. Such reasons were given by almost half of all participants. The most popular employee support was the option to work flexible hours.

At the macro level, we found that state pension age and pension entitlements were important (N=634). Participants who indicated this preference had lower scores on workplace QOL scores. Preference for part-time work options (N=631) was associated with higher wellbeing scores, though also with lower workplace QOL and with greater likelihood of sickness absence up to 20 days.

Support for the option of taking a 'less demanding role' was associated with lower mental wellbeing and workplace QOL. Those participants were also less likely to have had sickness absence of up to 10 days. Supporters of the ability to 'take a break of one month or more' (N=561) were more likely to have been absent for over 60 days. Those who indicated support for the option of retraining for a new role (N=311) had lower wellbeing and workplace QOL scores and were more likely to have had sickness absence of up to 20 days. Almost one in ten participants said nothing their employer could do would prompt them to work longer. Participants who had higher average wellbeing were less likely to have been off sick up to 20 days. There was a bivariate association between support for updating skills through training and lower workplace QOL, though this was not significant in multivariable models. Similarly, support for having longer holidays was associated with greater likelihood of short-term sickness absence, though only when entered as a solo predictor.

Discussion

In line with our predictions, the findings suggest that retirement intentions are influenced by a complex set of factors at the micro, meso and macro level of analysis. Bronfenbrenner's (1979) ecological systems theory proved useful in analysing these factors as it helped to disentangle these complexities that partly complement one another and partly act as conflicting forces. In relation to determinants of expected retirement timing, older respondents were anticipating a later retirement transition timing than younger workers as financial considerations related to maintaining one's standard of living post retirement became apparent to them. While many participants were not aware of their pension entitlements, this changed for older age groups whose intended retirement age thereby increased, possibly to account for anticipated gaps in retirement income (Flynn and Schröder, 2018). This trend is in line with UK government policy that aims to extend individuals' working lives, but, in doing so, uses more of a 'stick than carrot' approach (Hofäcker *et al.,* 2016). However, at the same time our findings indicate that individuals perceive conflicting forces that interact with the government's agenda to extend working lives.

For example, at the meso-organisational level, individuals perceive both structural ageism and a lack of support by line managers and organisations. These perceptions are engrained to such an extent that individuals do not think that their organisations could do anything to convince them to stay beyond their anticipated retirement timing, showing a possible deep-rooted rift between employees and employers. It has been shown elsewhere (Geisler *et al.,* 2019) that lack of resources, including lack of support by line managers, influences job satisfaction, work

engagement and organisational commitment and might lead to increased turnover intention amongst social workers, which is in line with our findings. Perceived organisational change, increasing job demands and long working hours (almost half of participants reported working significant overtime), as well as age discrimination and lack of support, lead to increased stress and ill health, as also reported here. Those who reported ill health and burnout were therefore more likely to anticipate retirement before pension age, a trend that can also be observed among General Practitioners (family doctors) (Khan, *et al.,* 2018), other human service workers (Borritz *et al.*, 2006) as well as the general population (Henkens and Leenders, 2010). While all our sample mentioned factors that would cause them to retire early, it can be assumed that, if addressed in whole or in part, these factors might also enable them to extend their working lives. An age-inclusive professional and organisational culture, age-positive Human Resource Management, support from line managers, fair working conditions and the ability to manage health and wellbeing, might therefore enable individuals to extend their working lives. A central contribution of this study is to link perceptions of retirement to measures of wellbeing. Though some of those variables are endogenous, such as retiring because of ill-health or support for taking on less demanding roles, associations, as a whole, underscore the importance of how participants perceived their role and career with regard to their general wellbeing. These are critical areas for employers and policy makers to be aware of in order to ensure a sustainable workforce.

Limitations

Interpreting sickness absence as a proxy for wellbeing did not prove to be straightforward. For some associations, such as with disability, sickness absence is patterned in the expected

direction. However, the finding that people working high levels of excess hours took less sickness absence runs contrary to their reported wellbeing and suggests that in this case low uptake of sickness absence may be a function of high service demands.

Since not all individuals had used the opportunity to elaborate, our analysis of this qualitative data is neither representative across the entire population of social workers nor for all those who participated in the survey. Furthermore, due to the variation of sample size between countries, and the variable numbers in the sample size across practice areas, generalizability of the findings cannot be claimed. Nevertheless, the answers provide an indication of themes and topics that individuals are concerned about and that are likely to shape their career and retirement decisions and transitions.

Conclusion

In conclusion, employing Bronfenbrenner's (1979) ecological systems theory enabled us to respond to Moen (2004 p. 283), who suggested investigating the "*dynamics of the retirement process as it develops over occupational and family careers and in particular historical, organizational, and social contexts*". In doing so, we found that many social workers face conflicting dynamics that simultaneously force them to extend their working lives due to financial pressures and compel them to retire early on grounds of ill health. The findings we report are a starting point for social work employers, policy makers and regulators to consider ageing as a critical matter for the social work profession. Our analysis may also contribute by providing systems level insights to key stakeholders, and in doing so, support workforce strategic policy direction for this under-examined but critical subject.

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