

Centre for Research on Ageing, Health & Wellbeing

Symposium Session:

Work, Retirement and Health

Wednesday 30 October 2019

9:00am – 10:30am, followed by light refreshments

Bob Douglas Lecture Theatre, Building 62A (entrance on Eggleston Road)



Dr Tegan Cruwys



Dr Tinh Doan



Dr Christine LaBond



Prof Peter Butterworth

The four presentations that make up this session each consider the inter-relationship between health and workforce participation, but do so from using a diverse range of methodologies, different theoretical approaches, and in a variety of different practical contexts.

Symposium Agenda

09:00 am	Chair: Prof Peter Butterworth: Welcome and introduction
09:05 am	Dr Tegan Cruwys: Managing identity change to support health and longevity in retirement
09:25 am	Dr Tinh Doan: Poor health locked out – rising health and economic inequality in the mature aged population in Australia
09:45 am	Dr Christine LaBond: In the Driver's Seat: The Role of Organizational Culture in Supporting Older Workers' Health Needs
10:05 am	Prof Peter Butterworth: Mental ill-health and the transition to a Disability Pension receipt
10:25 am	Conclusion and morning tea



INTERNATIONAL ALLIANCE OF
RESEARCH UNIVERSITIES

Centre for Research on Ageing, Health & Wellbeing

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Contributors

Dr Tegan Cruwys

Dr Tegan Cruwys is a Senior Research Fellow and Clinical Psychologist at the Australian National University. Cruwys' research has dual goals of advancing our theoretical understanding of the social determinants of health, and translating this science improved outcomes for vulnerable and disadvantaged populations. Cruwys has published over 60 peer-reviewed journal articles and received over 2600 citations. She has also attracted \$2.4 million in competitive research funding, including a Emerging Leadership Fellowship from the National Health and Medical Research Council.

Abstract - Managing identity change to support health and longevity in retirement

Retirement can be a source of significant challenge. There is evidence of significant psychological distress in up to 25% of retirees leaving the workforce. In this talk I will present evidence that understanding and managing social identity change is key to good wellbeing and health in retirement. I will present data from a series of longitudinal studies that have investigated key group processes central to these retirement transitions. These data highlight the importance of maintaining and increasing one's social group connections, and provide evidence that people who do not do this are more likely to experience reduced quality of life and even premature death. I will also introduce a novel intervention — Groups 4 Health: Retirement — that seeks to address this by supporting new retirees during this identity transition.

Dr Tinh Doan

Jimmy Doan has a background in Applied Economics. He received his PhD in Economics from the University of Waikato, New Zealand in 2011. His PhD thesis focuses on impact of microfinance on human capital formation for the poor in peri-urban areas.

His key research interests include economics of education, human capital, labour market, productivity, social welfare, population health, working and well-being, and other economic development issues. Currently Dr Doan works as part of an interdisciplinary team of academics and policy makers on the ARC Linkage grant "*Working longer, staying healthy, and keeping productive*". The project aims at investigating the complex longitudinal relationships between work participation, work conditions and hours, social and gendered disadvantage, income, savings and mature age

workers' productivity and health. He is also a co-investigator on a Discovery Grant "*Addressing the hour-glass ceiling: A new case for action on gender equality*". Dr Doan mainly leads and supports the collection and analysis of quantitative data.

Abstract - Poor health locked out – rising health and economic inequality in the mature aged population in Australia

Australians born in recent years can live about 33 years longer compared with those born at the Federation time. Longer life expectancy likely supports the policy of extended work life and extending the retirement age. This paper provided new evidence to support a policy debate on extending work life for the mature aged population. The paper showed that the participation policy has been successful. The participation increased by ten percent between 2001 and 2015. However, regardless of increasing longevity, the labour force's health deteriorated and health gap between who were working and who were not, and even within those who were not working has widened. The widening health gap is accompanied by rising economic inequality e.g. widening income, financial assets and superannuation gaps. Some mature aged people within the unemployed chose not to work even they were healthy thanks to their high income, assets and superannuation, while the rest of the unemployed were vulnerable in terms of both health and economic outcomes. They had low income, assets and superannuation, and poor health. Poor health was a barrier to employment and earnings for these people. Policy aiming at promoting employment participation should focus on this vulnerable people, the left-behind, in both helping improve health and support employment and income. Improving health is one of the keys to promote successfully employment participation for the mature aged population.

Dr Christine LaBond

Christine is a Research Fellow in the Society, Culture and Health group at NCEPH. She is contributing to the qualitative component of the *Working Well, Working Wisely* ARC Linkage Project with Lyndall Strazdins and Cathy Banwell.

Christine has a background in medical and organizational anthropology. She received her PhD in Anthropology from Michigan State University in 2015. For her dissertation, she completed a qualitative study exploring the cultural dimensions of employer sponsored health insurance in the United States, and federal health insurance policy. She conducted fieldwork with Michigan autoworkers, investigating ideas of deservedness and responsibility for health insurance, and the cultural significance of work in the US Midwest, as well as content analysis of the Affordable Care Act.

Her research interests include health care policy, access to health care, health disparities, the social determinants of health, and the social and symbolic values of work in western societies.

Prior to joining NCEPH, Christine held a research appointment at Michigan State University, where she studied anthropological approaches to formal organizations, business, and industry, including the organizational cultures of General Motors and IBM, and the adoption of electronic health records by health care providers in the United States. Christine is originally from Ottawa, Canada, and moved to Australia in 2011.

Abstract - In the Driver's Seat: The Role of Organizational Culture in Supporting Older Workers' Health Need

Research shows that financial need and health vulnerabilities each significantly impact employment among older Australians. While financial pressure is the most commonly reported reason for returning

to the workforce after retirement, poor health puts downward pressure on employment among older Australians, creating a push-pull effect on labor participation. How might older Australians – and their employers – negotiate the tension created by these competing factors? How can employers accommodate the health needs of financially vulnerable older Australians as they approach, or work past, retirement age? We interviewed 19 bus drivers aged 50-71 to investigate the competing factors impacting employee health and employment participation, and the ways in which these were mediated by the company's organisational culture and structure. Using an inductive methodological approach, we analysed the interviews for dominant themes in participants' responses. This paper explores the financial and health pressures experienced by these workers, and illustrates key features of their workplace which allow participants to continue their bus driving work in light of these needs. Specifically, we identify ways in which the company's organizational culture and structure promote the management of health conditions, and ultimately, allow for continued labour participation amongst this group of financially vulnerable older Australians.

Prof Peter Butterworth

Peter Butterworth is a Professor at the *Centre for Research on Ageing, Health and Wellbeing* in the *Research School of Population Health*. His academic background and research experience is in (psychiatric) epidemiology, psychology and biostatistics. His broad research interests include the social causes and social consequences of common mental disorders across the life course. Prof Butterworth seeks to undertake policy-relevant research and has a strong track record of partnership with policymakers from a range of Commonwealth government departments.

Abstract - Mental ill-health and the transition to a Disability Pension receipt

In Australia, like many other countries in the OECD, mental illness has become the most common primary medical category for those receiving a Disability Pension (DP). The increasing prevalence of mental illness within the DP population has raised concerns about the sustainability of the welfare system. However, our understanding is hampered by a lack of research examining the profile of mental illness amongst DP recipients over time. This study draws upon longitudinal data from the nationally representative Household Income and Labour Dynamics in Australia (HILDA) Survey, following 8,474 working-age adults initially not in receipt of DP for up to 11 years (average of 7.7 observations). Overall, 349 respondents commenced receiving DP during the study period and random-effect multiphase growth models were used to evaluate trajectories of mental health preceding and following pension receipt. While the statistical modelling showed evidence of a significant linear trend, reflecting a worsening of mental health over time as individuals moved closer to their point of transition onto DP, there was a further detriment to mental health that coincided directly with the timing of pension receipt. While the transition onto a disability pension coincides with the peak of mental ill-health, further research is needed to identify profiles of mental health amongst different sub-populations.