

## QUALITY OF LIFE IN THE CONCEPT OF NURSING TEACHERS RETIRED OF A PUBLIC UNIVERSITY<sup>1</sup>

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### ABSTRACT

The purpose of this study was to describe the conception of retirement with the quality of life for nursing teachers. This is a qualitative research developed with nine nursing professors retired from a public university in the Southern Region of Brazil. The data were collected from February to May 2013, through semi-structured interviews and the speeches were submitted to thematic content analysis. There were six thematic categories elaborated from the narratives: Health as the quality of life; Financial resources such as quality of life; Interpersonal relationships as the quality of life; Feeling of being useful as the quality of life, Taking care of quality life and Planning to have the quality of life. It was concluded that retirement with the quality of life had singular and subjective conceptions. People need to prepare for retirement since it is a new stage in life that needs to be experienced with maximum well-being.

**Keywords:** Quality of life. Retirement. Nursing. Teaching. Worker's health.

### INTRODUCTION

Issues related to the aging process have increasingly provoked the interest of society due to the fast aging population occurring in the world. This increased longevity of the population has increased public policy discussions so concerns are not limited to illness and disability, and should include the promotion of the well-being and quality of life of the individual at a later age. Although research on the quality of life in different social groups is increasing, it is still a little-known universe to the retired population<sup>(1)</sup>.

As in other age groups, quality of life in the elderly is interpreted in the subjective perception of each person on of physical, psychological, emotional, social and cultural aspects, influenced by time and experiences. Faced with this multidimensionality, there is no consensual

definition encompassing all the characteristics of this expression. However, the concept that most closely approximates the scope of quality of life is proposed by the World Health Organization, defining it as "the individual's perception of his position in life in the context of the culture and value system in which he lives and to their goals, expectations, standards and concerns"<sup>(2:1405)</sup>, concept adopted in this study.

Retirement marks the exit of the individual from the labor market, and in most cases, it is an event associated with the last life cycle: old age. Thus, when retiring, the person begins a new stage in his life. That is, there are several physicals, psychic, social and mental changes. These changes may lead to the loss of personal identity as a social being<sup>(3,4)</sup>.

In this context, it can be affirmed that retirement is a singular stage, in which, the human being is faced with a series of critical situations, interconnected with each other, and

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interfering with their quality of life<sup>(5)</sup>.

It is believed that investigating this issue is of unique relevance since it can contribute with managers of public and private institutions in the planning of actions seeking to prepare workers to understand the feelings experienced in this stage of life and, consequently, better able to cope with the changes brought about by retirement and aging. This research may also be the basis for the adoption of health promotion strategies for retirees.

With this understanding, the following research question emerged: What is the perception of nursing teachers about their quality of life after being retired? It was aimed to describe the conception of retirement with the quality of life for nursing teachers to answer this question.

## METHODOLOGY

This is an exploratory, descriptive study with a qualitative approach carried out with undergraduate nursing professors who retired after being employed at a public university in the Southern Region of Brazil.

The inclusion criteria were: to be retired for at least two years; worked for at least 15 years in the institution under study; Retired for the length of service. The exclusion criteria were: to be included in any paid work activity.

From the perspective of the selection of the research participants, the Pro-Rector of Human Resources of the University was asked to list the teachers who met the inclusion criteria established for this study, resulted in 15 possible participants. However, after telephone contact, three were excluded because they were engaged in paid work activities, so 12 teachers met the eligibility criteria for this research.

The interviewees were selected intentionality, and the theoretical saturation criterion was used for the determination of the number of participants<sup>(6)</sup>. That is, the interviews were performed until the convergence of the speeches, about the phenomenon studied, occurring with nine teachers.

A semi-structured script was developed to collect data with questions to characterize the participants (age, gender, marital status, time of retirement and teaching work) and two open

questions to guide the interview: In your conception, what does the quality of life mean? How do you evaluate your quality of life after retirement? The interviews were conducted individually in the participants' homes, at a date and time previously scheduled by telephone, from February to May 2013. The interviews were audio-taped and had an average duration of 30 minutes.

The interviews were transcribed in full for the data analysis and submitted to the analysis of content, in the thematic modality. The method followed three stages: pre-analysis, in which, through the floating reading and organization of the corpus, the readings of the teachers' speeches were deepened, considering the principles of completeness, representativeness, homogeneity and adequacy, providing an overview of what was verbalized by the participants and identified the particularities. In the exploration of the material, the discourses were codified for constructing the categories. Finally, the treatment, inference, and interpretation of the obtained results were performed, in which an interpretative synthesis of the elaborated categories was performed<sup>(7)</sup>.

The research was approved by the Research Ethics Committee of the State University of Londrina (UEL), under Opinion 002/2012, and it was conducted following national and international standards of research ethics involving human beings. All interviewees consented to their participation through the signing of the Informed Consent Term (TCLE) and to preserve their identities, the reports were identified with the letter T of the teacher, followed by the identification number of the interview.

## RESULTS AND DISCUSSION

Nine female teachers aged between 58 and 70 participated in the study. As for the marital status of the participants, one was a widow, six were married, and two were single. Regarding the time of retirement, it was identified that two were between two to four years, five between six and ten years and two with twelve years retired. It was verified that all of them exercised their activities in teaching in higher education for more than 20 years in the institution where the

research was carried out.

When analyzing the data from the interviews, six thematic categories emerged: Health as the quality of life; Financial resources such as quality of life; Interpersonal relationships as the quality of life; Feeling of being useful as the quality of life; Taking care of quality life and Planning to have the quality of life.

### **Health as quality of life**

The reports included in this category showed that the interviewees realize that it is essential to be healthy to have the quality of life in retirement, as shown in the statements:

It is very important for us to be well, to have physical, mental and social health. (T2)

I think that when we retire, the main thing to have the quality of life is to have health in all aspects. (T4)

We have to be healthy, without health there is no quality of life. I say that not only for physical health but also mental and social. (T8)

Retired teachers emphasized the importance of aspects related to health in the quality of life, and did not reduce health to physical well-being or absence of disease. According to an investigation carried out by elderly people in Maringá-PR, this understanding demonstrates that quality of life has been interpreted in its totality, not being reduced to the biological model<sup>(8)</sup>. This expanded and contemporary perspective on health may also be related to the occupation they performed, given that as teachers of a health graduate course, they taught students to understand health in a holistic rather than reductionist way.

It is emphasized that aging is usually accompanied by degenerative processes, a higher prevalence of diseases and clinical manifestations. Thus, health valuation in the experience of retirement with the quality of life is expected.

Also, with increasing life expectancy, declining birth rates and, consequently, population aging, treatments for life-threatening diseases are more effective. In this way, the concern with the psychological well-being of the individuals in advanced ages, mainly in developed countries, was extended. Positive

hedonic states and eudemonic well-being are relevant to health and quality of life as people age. In this sense, it is relevant that health systems and public policies focus not only on disease and disability but also on methods of support to improve positive psychological states<sup>(1)</sup>.

It is pointed out that it is necessary to face the aging of the Brazilian population in a structured way, with effective action by the society, professionals from different areas of knowledge and public managers. It is imperative to develop strategies that attenuate the effects of senescence, from a perspective of health promotion and prevention of diseases, which includes healthy habits of life and seeing the experience of an active aging, in an autonomous way and with the quality of life<sup>(9)</sup>.

### **Financial resources such as quality of life**

It was observed that having a good financial condition is considered a factor that favors the quality of life, as can be seen in the following statements:

The financial issue helps a lot in our quality of life; I consider it fundamental. (T1)

The financial is of paramount importance; I never imagined that after I retired, I would give so much importance to the financial. It is necessary to prepare for this; it is necessary to save, I got into depression because of the financial difficulty. (T4)

Before I was able to use part of my salary for trips through Brazil and abroad [...]. Currently my expenses with health insurance, medicines [...] increased a lot, and travel and tours decreased. I would have a better quality of life if I could travel more, traveling is so good! (T5)

The financial aspect is identified as one of the main components that influence the quality of life, enabling the acquisition of goods and consumption, providing access to health, leisure, adequate food, among others.

For many people, the arrival of retirement is linked to the decrease in income, becoming a concern that often triggers apprehension, anguish, suffering and fear. These feelings are linked to the fear not being able to maintain a standard of living, associated with the responsibility that many people have as providers of their families<sup>(4,10)</sup>. This situation has

motivated the active workers to postpone their retirement, as well as those who are retired to the return of their teaching activities.

Research carried out at a public university in Paraná with pre-retirement workers identified that teachers attributed, the emotional aspects of work, wages, and benefits as the main losses factors to retirement. Thus, these factors may be a source of dissatisfaction and concern for these individuals<sup>(11)</sup>.

In this sense, financial planning should be included in preparation for retirement, with guidelines on how to save and invest their earnings, bringing future income and providing a better quality of life<sup>(12)</sup>.

In a study of retirement behavior in some countries, it has been shown that in the United States the standard age and financial income are determining factors in this process. Thus, individuals show a tendency to maintain their income in retirement, since they have been planned to achieve this goal<sup>(13)</sup>.

### **Interpersonal relationships as quality of life**

Interpersonal relationships were also highlighted as an important component for the development of quality of life in retirement, as highlighted in the following statements:

A very important thing is the friendships, not only to have friends but to see them always, to make meetings, to talk, to tell the news, to have fun. (T4)

Cultivating friendships is a way to have the quality of life after our retirement. [...] it is essential, too, to maintain friendships with our former co-workers. (T6)

Friendship is essential for quality of life. I am always with my ex-friends at work and with others. (D8)

Although some authors indicate that family relationships are the major promoters of the quality of life among the elderly<sup>(14)</sup>, in this study, the interviewees highlighted the bonds of friendship as important elements for having a retirement with the quality of life. It has been shown that maintaining friendly ties decreases risk for dependency and softens the feeling of loneliness<sup>(8)</sup>.

In an investigation carried out with public employees of a Brazilian federal university,

among the category of teachers, it was revealed that these professionals transmit their work colleagues bond and attachment similar to the established for the family relationships, the reason of their daily living time<sup>(15)</sup>.

The appreciation of the interpersonal relationship among the interviewees may also be linked to the profession, since nursing is a relational profession, in which the use of light technologies predominates, and this also applies to teaching, since the nursing teacher during his professional practice interacts not only with their co-workers but also with students, multi-professional staff, patients and family members, even creating affective bonds. In this way, after retirement, there can be a desire for a more intense social life, with the maintenance of the same interpersonal ties and the formation of new relationships.

### **Feeling of being useful as quality of life**

Another way of perceiving the quality of life retirement is the fact that the interviewees are perceived as useful.

The quality of life is to be able to give care to a person who is in need, to take care of others. [...] I feel useful, and my life gets a lot better. (T6)

I volunteer in an NGO, I think it is very important, and I feel very good. (T7)

Regarding the feeling of being useful as a preponderant factor for the quality of life, it is a fact that the human being needs to be engaged in activities that make him feel this way. Also, it should be considered that these retirees belonged to the teaching class, whose work rate is marked by productivity and multiple activities linked to teaching, research, and extension. Thus, such activities may be occupying the place that previously belonged to the work, and because of their solidarity, they can still be a source of satisfaction and recognition.

In an investigation conducted with retired women in the United States, the results were similar to those of this study, since identifying the interest in volunteer work, hobbies or activities that were useful to others as a form of self-gratification<sup>(16)</sup>.

Results of research carried out in the municipality of Sete Lagoas; Minas Gerais corroborates with this assertion, where it was

verified that voluntary work and participation in social groups are significant determinants of active aging and promote quality of life<sup>(9)</sup>.

### **Taking care of quality life**

The quality of life was also related to the possibility of being able to take care of themselves, that is, to be able to maintain their independence as denoted by the following statements:

I have time to do everything I like; I love to go to the movies, to go to the theater, to good shows, to watch television, to play on the computer and without depending on anyone. (T4)

The fact that we have more time with retirement so that we can take care of ourselves more, it is a factor that increases our quality of life mainly for me who do not need help, I am independent. (TD6)

Being able to take care of myself is essential for me to have the quality of life [...] is a feeling of pure autonomy. (T8)

In this category, caring was intimately related to the various possibilities of dealing with themselves. The relevance of autonomy in the performance of their care and leisure as one of the ways to develop a quality-of-life retirement was deduced from the statements.

Involvement in leisure activities, according to the interest of the retirees provides moments of pleasure, satisfaction, relaxation and improving self-esteem. The idea of leisure associated with independence was also demonstrated in another study carried out with the elderly in Porto Alegre<sup>(17)</sup>.

Autonomy is related to the preservation of dignity and living well and, in this sense, realizing strategies that promote self-care, health education and the incentive to practice physical activity are essential in maintaining independence and, consequently, quality of life<sup>(8)</sup>.

### **Planning to have quality of life**

The retired teachers of the study evidenced the need for preparation for this phase, including with multi-professional support, as revealed by the following speeches:

Having prior psychological counseling [...] meetings to prepare employees before retirement is critical because the final moments are very

stressful and conflicting. (T2)

First, we must plant a good seed so that we can reap its rewards in the future. The person should plan and organize so that when he retires, he can maintain the same standard of living, the same quality that he had until then. (T3)

What makes all the difference is thinking about your retirement, how will that moment be, what is expected of it. It is important to plan it in person, professionally and with your family. (T9)

Studies have shown the importance of carrying out planning through programs that prepare for the arrival of retirement, as this is one of the most impacting phases of human life. The permanent implantation of these programs at the institutional level enables a better coping of this process, providing an aging with the quality of life<sup>(18,19)</sup>.

Moreover, these programs support the individual during the complex transition to retirement, which goes through different stages: pre-contemplation, contemplation, preparation, action and maintenance or even relapse<sup>(19)</sup>.

It was identified in research that having health, relationships with friends, financial autonomy, unpaid occupation, autonomy, leisure and planning the retirement in advance are factors of protection in the adaptation to retirement<sup>(20)</sup>. In this study, they were evaluated by the interviewees as factors promoting quality of life.

Although the objectives of this study were reached, there were limitations due to the quality of life and the experience of retirement being objects of investigation that involve subjectivity and influenced by the time of retirement and the individual characteristics of each interviewee. Thus, it is necessary to consider the results in their singularity, since it only portrays the reality of a portion of nursing teachers retired by a public university.

Despite these limitations, the findings of this research can contribute to the planning of actions of Retirement Preparation Programs for teachers, as they reveal the feelings and situations that can be experienced in this stage of life and, consequently, have an impact on their well-being and quality of life.

### **FINAL CONSIDERATIONS**

At the end of the study, it can be affirmed that the quality of life for retired teachers has singular, subjective characteristics and it is related to having health, financial resources, good relationships, experiencing feelings of being useful, independence to take care of themselves and planning, that is, preparing for retirement.

It was evidenced the need to provide public

policies that promote an effective preparation for a retirement with the quality of life, as well as the professionals so during their long years of work they plan and prepare for the retirement and the aging process. Thus, they can adopt strategies to promote the quality of life and prevention of diseases, maximizing physical, mental and social well-being.

## QUALIDADE DE VIDA NA CONCEPÇÃO DE DOCENTES DE ENFERMAGEM APOSENTADAS POR UMA UNIVERSIDADE PÚBLICA

### RESUMO

O objetivo deste estudo foi descrever a concepção de aposentadoria com qualidade de vida para docentes de enfermagem. Trata-se de uma pesquisa qualitativa, desenvolvida com nove docentes de enfermagem aposentadas de uma universidade pública da Região Sul do Brasil. Os dados foram coletados nos meses de fevereiro a maio de 2013 por meio de entrevistas semiestruturadas e as falas foram submetidas à análise de conteúdo temática. Das narrativas, foram elaboradas seis categorias temáticas: saúde como qualidade de vida; recursos financeiros como qualidade de vida; relacionamentos interpessoais como qualidade de vida; sentimento de sentir-se útil como qualidade de vida, cuidar-se como qualidade de vida e planejamento para ter qualidade de vida. Concluiu-se que a aposentadoria com qualidade de vida teve concepções singulares e de ordem subjetiva. É preciso que as pessoas se preparem para a aposentadoria, visto que é uma nova etapa da vida que precisa ser vivenciada com máximo de bem-estar.

**Palavras-chave:** Qualidade de vida. Aposentadoria. Enfermagem. Docente. Saúde do trabalhador.

## CALIDAD DE VIDA EN LA CONCEPCIÓN DE DOCENTES DE ENFERMERÍA JUBILADAS POR UNA UNIVERSIDAD PÚBLICA

### RESUMEN

El objetivo de este estudio fue describir la concepción de jubilación con calidad de vida para docentes de enfermería. Se trata de una investigación cualitativa desarrollada con nueve docentes de enfermería jubiladas de una universidad pública de la Región Sur de Brasil. Los datos fueron recolectados en los meses de febrero a mayo de 2013, por medio de entrevistas semiestructuradas y las hablas fueron sometidas al análisis de contenido temático. De los relatos, fueron elaboradas seis categorías temáticas: salud como calidad de vida; recursos financieros como calidad de vida; relaciones interpersonales como calidad de vida; sentimiento de sentirse útil como calidad de vida, cuidarse como calidad de vida y planificación para tener calidad de vida. Se concluye que la jubilación con calidad de vida tuvo concepciones singulares y de orden subjetivo. Es necesario que las personas se preparen para la jubilación, visto que es una nueva etapa de la vida que necesita ser vivida con máximo de bienestar.

**Palabras clave:** Calidad de vida. Jubilación. Enfermería. Enseñanza. Salud ocupacional.

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