

✧ RESEARCH PAPER ✧

# *Working experiences of Iranian retired nurses: A content analysis study*

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## **Working experiences of Iranian retired nurses: A content analysis study**

Understanding the experiences of retired nurses can be useful in increasing self-confidence, motivation to work and work enthusiasm among nurses. The purpose of this study was to explore the work experiences of Iranian retired nurses. A qualitative design was conducted using a content analysis approach. Purposive sampling was used to choose the study participants. Semi-structured interviews were held to collect the perspectives of 20 retired nurses (10 female and 10 male). Two main themes emerged in the data analysis: ‘work problems and unpleasant experiences in a sense’ with subthemes ‘exhausting work’, ‘insufficient salary’, ‘inappropriate relation’ and ‘unsuitable social position’; and ‘job satisfaction and pleasant experiences in a sense’ with subthemes ‘divine satisfaction and religious belief’, ‘satisfaction of patients and their companions’ and ‘love of nursing profession and relaxation experience’. The findings indicate the challenges that nurses face after retirement. These experiences will help nurse managers to adopt appropriate measures to support nurses after retirement.

**Key words:** content analysis, qualitative research, retired nurses.

## **INTRODUCTION**

It is believed that nurses’ experiences can contribute to the improvement of the nursing profession as well as the

promotion of nurses’ competences.<sup>1</sup> It also might be used to help with the development of nursing theories.<sup>2</sup> Therefore, the exploration of nurses’ experiences is of the necessities of professional growth and the first step towards reaching nursing professionalization.<sup>3</sup> Nurses’ experiences during employment and retirement affect the function of nursing, such as providing high-quality care and comfort for patients.<sup>4</sup> Nurses’ work experiences can

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affect job satisfaction.<sup>5</sup> The evidence shows that job satisfaction and desired efficiency of nurses influence the success of organizations.<sup>6</sup>

Retirement is one of the most important life changes accepted by society and is one of the most important life-changing processes an individual goes through.<sup>7</sup> Retirement is defined as leaving an individual's profession or life's work and exemplifies one of the most important role transitions that a person might experience.<sup>8</sup> The exploration of retirement experiences in different societies and professions is of high importance. Gabrielle *et al.* emphasize the necessity of investigating the experiences of retired nurses from physical, mental and emotional aspects.<sup>9</sup> Retired nurses participated in providing their experiences honestly and without any expectation to be used in qualitative studies and this provided researchers with invaluable experiences. Few studies have been conducted on the work experiences of retired nurses using the qualitative methodology. Thus, this study explored the work experiences of Iranian retired nurses.

## METHOD

The present study was one part of the first author's doctoral dissertation investigating the exploration of coping processes among retired nurses. In this research, a qualitative design was conducted using a content analysis approach. Qualitative research provides a systematic approach for the description of individuals' experiences and actually makes these experiences meaningful.<sup>10</sup> Content analysis includes specialized methods in processing scientific data.<sup>11</sup>

### Participants

A purposive sampling technique was used to recruit 20 retired nurses (10 female and 10 male) as key informants having rich clinical experiences. The inclusion criteria were nurses aged between 50–60 years with the work experience of 23–30 years, and also 1–5 years had passed since the beginning of their retirement. The participants worked in different hospitals and nursing wards (medical, surgical, critical care units, dialysis, emergency, neonatal and maternal care, and mental units). They worked as clinical nurses, head nurses, supervisors, nursing managers. They were selected with a wide and rich experience for the researcher to understand the extensive clinical experience as possible. The samplings were based on the maximum variation approach in terms of different work positions, working in various hospitals and wards, age and

sex, cultural, economic and social varieties. This sampling strategy enabled the researchers to capture a vast range of views and experiences.<sup>11</sup>

### Ethical considerations

Approval to conduct the study was granted by the ethics committee of Tarbiat Modares University. All the participants were informed about the purpose of the study by the first author. It was explained that the participation was voluntary, and they were assured regarding the confidentiality and anonymity of data gathering.

### Data collection

Semi-structured interviews were the main method for data collection. The nurses selected a place such as their houses or city parks to conduct the interviews. Semi-structured interviews allowed the participant to express their experiences freely and with the least influence by the researcher. They were asked to describe their work experiences and social interactions in their workplaces and explain factors affecting them. The main foci of the interviews were as follows:

- How was your retirement process?
- Will you please tell me your experiences on retirement?

Probing questions were asked in order to follow the participants' thoughts and to bring clarification to their responses during the interviews. During the interviews, the participants were encouraged to give examples and to explain the reasons for their answers. The first author conducting the interviews consistently attempted to bracket prior knowledge. In other words, attitudes, beliefs and her own preconceptions that might be influencing the research process were abandoned. Memo writing helped the researcher to understand the experiences of the participants. Thoughts and feelings were documented in personal memos and were used as references during the analysis process. The duration of each interview was between 40 and 120 min on average. The interviews were audiotaped and transcribed verbatim immediately after each interview, then preliminary analysis was done and continuous discussions performed in the research group.

### Data analysis

All of the interviews were recorded, transcribed verbatim, and analysed at the end of each interview.

The following steps were taken to analyse the data:

- Transcribing the interviews verbatim and reading several times to obtain the sense of the whole. In the first step, the first researcher noted the ideas received from the interview through reading the data repeatedly in order to be familiar with the content.
- Dividing the text into meaning units and labelling them with codes.
- Abstracting the condensed meaning units and labelling them with codes. Meaning units were extracted from the participants' responses in the form of initial codes or open codes, and after being assured that all of the codes related to the nurses' work experiences were extracted, the codes were read repeatedly so that they were classified according to the similarity of their meaning. In this step, the researchers focused on the analysis in a higher level than the codes based on placing the initial codes in themes.
- Sorting codes into subcategories and categories, based on comparisons regarding their similarities and differences. The codes, which showed a single issue according to their similarity, were classified into one class, and classes and subclasses were compared.
- Formulating themes as the expression of the latent content of the text. From the analysis and interpretation of the data, themes were extracted. Then, the initial texts with the final classes were read and compared repeatedly again in order to be sure of their correctness.<sup>12,13</sup> Once the themes were identified and data saturation was achieved, the interviews were discontinued.<sup>14</sup>

### Rigor

Prolonged engagement of the researcher with the participants helped encouraged the participants' trusts. The prolonged engagement of the researcher with retired nurses increased their confidence and helped collect relevant and sufficient data to achieve the aim of the study. Sampling with maximum variation improved the credibility of the gathered data. It enhanced the conformability and credibility of the data. Peer checking was conducted by the research team through reviewing the analysis' report such as codes and categories. In case of any disagreement, the team continued to discuss and clarify findings. Transferability of the study was provided through providing direct quotations and examples and rich description of the data. In addition, a summary of the interviews with the primary codes were returned to the participants as member checking, and it was confirmed that the

participants were presenting their perspectives. The researchers ensured the depth of the content and its authenticity through identifying novel data.

## FINDINGS

Two main themes emerged in the data analysis: 'work problems and unpleasant experiences in a sense' with subthemes 'exhausting work', 'insufficient salary', 'inappropriate relation' and 'unsuitable social position'; and 'job satisfaction and pleasant experiences in a sense' with subthemes 'divine satisfaction and religious belief', 'satisfaction of patients and their companions' and 'love of nursing profession and relaxation experience' (Fig. 1).

### Work problems and unpleasant experiences in a sense

All of the retired nurses, during their working period, experienced unpleasant work experiences. Working shifts, insufficient salaries, shortage of nursing staff, stressful work conditions, high expectation of patients and patients' companions as well as the society of nurses, lack of support by authorities, improper behaviour of physicians and some colleagues were of the factors mentioned by retired nurses.

The subthemes related to unpleasant work experiences are as follows:

#### *Exhausting work*

The retired nurses believed that nursing work conditions were hard. Tolerance of work situations, patient's conditions, accepting professional and social roles all



Figure 1. Working experiences of retired nurses.

brought several difficulties for the retired nurses during their nursing career. Participant 7 said:

*In this job, stress is very high. When you deal with a very ill patient, it is very stressful whether he/she recovers or not.*

Given that nurses were in the front line of providing services to patients and the patients had the most contact with the nurses, the nurses were considered to be responsible for non-suitable services. In this respect, participant 14 said:

*A person, who enters the hospital, considers the nurses to be responsible for all problems occurred in the hospital even in the laboratory and radiology ward, or reception office.*

#### *Insufficient salary*

All of the participants complained against economic problems. Low salaries forced nurses to work in other shifts. It caused job exhaustion, increased job mistakes, and decreased job satisfaction of nurses. Participant 1 said:

*A sufficient salary should be paid to the nurse so that he/she do not have extra work in order to make living.*

#### *Inappropriate relation*

Lack of empathy and acceptance among employees of the health-care team were of the issues stated by some of the participants. Nurses expected to work in a friendly environment full of mutual understanding by their colleagues, senior colleagues and physicians. When they observed discrimination, injustice and insincerity, they became disappointed, depressed and unmotivated. Participant 2 said:

*Some of my colleagues were seemingly friends, but they talked unfavorably about others.*

In the work environment, depending on their positions and responsibilities, nurses expected a suitable support from their seniors. They were unhappy with injustices and believed that relations substituted rules and criteria, and the authorities did not take necessary actions to support them. Participant 14 about inappropriate relationship of a supervisor said:

*A young and inexperienced person became our supervisor. This person had a relationship with the nursing office. She has not a proper relationship and interaction with nurses.*

Lack of coordination between the health-care team members, delayed treatment, responsibility for providing nursing cares, shortage of human resources (assistants, nurse's aides in hospitals) and failure to take care of patients by some physicians were some causes of conflicts between nurses and physicians. Participant 6 said:

*I myself saw that the physician had an improper relationship with the nurse. While there were no nurse's assistances to transfer the patient to the radiology ward, the physician cried why the radiography had not done yet.*

#### *Unsuitable social position*

Disrespect, cursing and assaulting of those who accompanied him/her, and of the people of the society, all sent negative feedbacks to them, and wasted their energy. Nurses expected mutual respect by the society. People's understanding should be improved. Participant 13 said:

*The only thing nurses want is that they are respected and appreciated.*

Participant 8 also said:

*When the physician comes late, all problems are attributed to the nurse in charge, and he/she is insulted.*

### **Job satisfaction and pleasant experiences in a sense**

Some of the retired nurses had pleasant work experiences. They believed that such experiences made their work life meaningful. Religious perspectives and thoughts had an important role in providing humanitarian services in the way that made God, patients, patients' companions, the society and finally themselves happy.

Subthemes related to pleasant work experiences of nurses are as follows:

*Divine satisfaction and religious belief, satisfaction of patients and their companions.*

The nurses who loved their patients believed that nurses should help the patients with kindness and love. They stated that they felt the presence of the Almighty in their practice. Participant 12 said:

*I worked in the pediatric ward as a very sensitive and critical ward. The conscience of the nurse supervised him/her working. I said my God I worked for your sake only.*

*Love to nursing profession and relaxation experience*  
They declared that they liked nursing, were interested in their work very much and became relaxed whenever they took care of their patients. They believed that having good relationship with colleagues was so important. A nurse lived with his/her good remembrances of his/her colleagues. Participant 11 said:

*Nursing is an art and if it is with love and interest, it will be with consent.*

Participant 2 also said:

*I liked my colleagues, and I did not want they were unhappy with me. We liked to take care of patients.*

Nurses were of the persons who had close relationship with patients suffering from incurable diseases. As such, they experienced severe mental stresses during their work. Retirement was to become free of these stresses. Participant 13 stated that:

*In spite of interest in nursing, I always had a life full of conflict and concern, but now that I am retired, I am relieved and calm.*

## DISCUSSION

The findings of the study showed that exhausting work, insufficient salary, inappropriate relationship and unsuitable social position were of the nurses' unpleasant work experiences. Work fatigue and long working hours caused stress in nurses. Nursing is a stressful job, and it has been recognized at the top of the most stressful health sector jobs.<sup>15</sup> The nursing profession is typically stressful, and stress and tension affect the quality of life and nurses' health.<sup>16</sup>

This study indicated that nurse managers did not appreciate the nurses' work efforts. According to Kane-Urrabazo<sup>17</sup>, the leadership style of managers is one of the factors affecting increased efficiency and finally productivity of organizations. The appropriate behavioural pattern of managers boosts the employees' morale and motivations and increases their job satisfactions.<sup>17</sup> Barron *et al.* believes that all job features such as autonomy,

support, the feeling of being appreciated by the organization should be considered so that employees are motivated and able to gain the organizational goals.<sup>18</sup> Tengilimoglu & Kisa reported that one part of the work issues was caused by organizational problems such as shortage of human resources and lack of financial resources.<sup>19</sup>

The results of this study suggested that a lack of support by authorities and an inappropriate work relationship between managers and nurses were experienced by nurses. Burnard *et al.* mentioned that only 45% of nurses were happy with the ways and quality of relationships with managers.<sup>20</sup>

It was also found that communication between doctors and nurses were not appropriate. Communications were written by many physicians to nurses without being aware that nurses are professional aides equipped with the art of taking care of patients.<sup>3</sup> Results of Almost's study (2006) have shown that in the health-care system, dependence of the nurses' work on each other and on other members of the treatment team, including the physicians, medical laboratories, the managers, and so on, is one of the causes of job conflicts in nurses.<sup>21</sup>

In the public's eyes, the nurse was considered to be a physician's aide, the society did not appreciate nurses' services. Nurses sometimes felt oppressed and stressed out by patients' misbehaviours and were insulted by patients and their companions. Different studies have shown that oppression of nurses in different countries and cultures varies.<sup>22</sup> It is believed that the presence of nurses in stressful situations exposes them to more oppression and behavioural violence.<sup>23</sup>

Results of the present study in relation to divine satisfaction and religious belief, satisfaction of patients and of their companions, showed that some of the nurses were satisfied with providing care to patients. The nurses were satisfied with the thought that what they worked for was for God's sake. Spirituality is an essential element of holistic nursing. Nurses need to examine their own spiritual needs in order to be able to help others.<sup>24</sup> To be a nurse, from the viewpoint of some of the nurses, means meeting patients' needs.<sup>25</sup>

Regarding love of work and proper relationship with colleagues, it was declared that nurses had their best remembrances and relationships with their colleagues. It has been suggested that proper work relationship among colleagues is one of most important characteristics of job satisfaction.<sup>15</sup>

Retirement was associated with the elimination of work stresses, leading to experiencing peace. Nuttman-Shwartz stated that retired nurses highlighted increased welfare and decreased worry after retirement.<sup>26</sup> Nurses who have worked for about 30 years find an opportunity to be preoccupied with other activities, with tranquility and peace of mind that they always wished for, under the retirement act.<sup>27</sup>

## CONCLUSIONS

The findings indicate the challenges that nurses face after retirement. These experiences will help nurse managers to adopt appropriate measures to support nurses after the retirement.

The researchers believed that the findings were demonstrated to be valid within the Iranian retired nurses' context. Therefore, it is required that researchers in other cultures and contexts compare their findings with our study's findings to improve applicability with their own settings.

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## AUTHORS CONTRIBUTION

Monir Nobahar: Study conception, data collection/analysis; drafting of manuscript; critical revisions for important intellectual content.

Fazlollah Ahmadi: Study conception/design; data analysis; drafting of manuscript; critical revisions for important intellectual content; supervision.

Fatemah Alhani: Data analysis; critical revisions for important intellectual content.

Masood Fallahi Khoshknab: Data analysis; administrative/technical/material support.

## REFERENCES

- Hallin K, Danielson E. Registered nurses' experiences of daily work, a balance between strain and stimulation: A qualitative study. *International Journal of Nursing Studies* 2007; **44**: 1221–1230.
- Meleis A. *Theoretical Nursing Development and Progress*. 4ed. Philadelphia: JB Lippincott Co, 2007.
- Nikbakht Nasrabadi A, Emami A. Perceptions of nursing practice in Iran. *Nursing Outlook* 2006; **54**: 320–327.
- Tampson C, Cullum N, McCaughan D, Sheldon T, Raynor P. Nurse's information use and clinical decision making the real world potential for evidence base decision in nursing. *Evidence-Based Nursing* 2004; **7**: 68–72.
- Mirzabeigi G, Salemi S, Sanjari M, Shirazi F, Heidari SH, Maleki S. Job satisfaction among Iranian nurses. *Hayat* 2009; **15**: 49–59.
- Dehghan Nayeri N, Nazari AA, Salsali M, Ahmadi F, Adib Hajbaghery M. Iranian staff nurses' views of their productivity and management factors improving and impeding it: A qualitative study. *Nursing and Health Sciences* 2006; **8**: 51–56.
- Kelly NR, Swisher L. The transitional process of retirement for nurses. *Journal of Professional Nursing* 1998; **14**: 53–61.
- Hornstein GA, Wapner S. Modes of experiencing and adapting to retirement. *International Journal of Aging and Human Development* 1985; **21**: 291–315.
- Gabrielle S, Jackson D, Mannix J. Older women nurses: Health, ageing concerns and self-care strategies. *Journal of Advanced Nursing* 2008; **61**: 316–325.
- Myring P. Qualitative content analysis. *Forum Qualitative Social Research* 2000; **1**: 1–10.
- Hsieh HF, Shannon SE. Three approaches to qualitative content analysis. *Qualitative Health Research* 2005; **15**: 1277–1288.
- Sandelowski M. Whatever happened to qualitative description? *Research in Nursing & Health* 2003; **3**: 114–123.
- Granheim UH, Lundman B. Qualitative content analysis in nursing research: Concepts, procedures and measures to achieve trustworthiness. *Nurse Education Today* 2004; **24**: 105–112.
- Streubert H, Carpenter D. *Qualitative Research in Nursing, Advancing the Humanistic Imperative*. Philadelphia: Williams and Wilkins Co, 2007.
- Abualrub RF. Nursing shortage in Jordan: What is the solution? *Journal of Professional Nursing* 2007; **23**: 117–120.
- Bianchi ER. Stress and coping among cardiovascular nurses: A survey in Brazil. *Issues in Mental Health Nursing* 2004; **25**: 737–745.
- Kane-Urrabazo C. Management's role in shaping organizational culture. *Journal of Nursing Management* 2006; **14**: 188–194.
- Barron D, West E, Reeves R. Tied to the job: Affective and relational components of nurse retention. *Journal of Health Services Research & Policy* 2007; **12** (Suppl.): 46–51.
- Tengilimoglu D, Kisa A. Conflict management in public university hospitals in Turkey: A pilot study. *The Health Care Manager* 2005; **24**: 55–60.
- Burnard P, Morrison P, Phillips C. Job satisfaction amongst nurses in an interim secure forensic unit in Wales. *The Australian and New Zealand Journal of Mental Health Nursing* 1999; **8**: 9–18.
- Almost J. Conflict within nursing work environments: Concept analysis. *Journal of Advanced Nursing* 2006; **53**: 444–453.

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- 22 Erkol H, Gökdoğan MR, Erkol Z, Boz B. Aggression and violence towards health care providers—A problem in Turkey? *Journal of Forensic and Legal Medicine* 2007; **14**: 423–428.
  - 23 Kwok RP, Law YK, Li KE *et al.* Prevalence of workplace violence against nurses in Hong Kong. *Hong Kong Medical Journal* 2006; **12**: 6–9.
  - 24 Jackson J. The challenge of providing spiritual care. *Professional Nurse (London, England)* 2004; **20**: 24–26.
  - 25 Burhans LM, Alligood MR. Quality nursing care in the words of nurses. *Journal of Advanced Nursing* 2010; **66**: 1689–1697.
  - 26 Nuttman-Shwartz O. Like a high wave: Adjustment to retirement. *The Gerontologist* 2004; **44**: 229–236.
  - 27 Wilson DM, Palha P. A systematic review of published research articles on health promotion at retirement. *Journal of Nursing Scholarship* 2007; **39**: 330–337.