Strategic approach for promoting retirement preparation

- Innovative use of active interest development & senior mentorship

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Individual level: Challenges of Retirement

- A major life event ➔ Readjustment needed
- A very first step to the ‘golden age’
- But maladjustment is common (Wang, 2007; Siegrist et al., 2004)
  - Substantial psychosocial distress
  - Anxiety & depression ↑
  - Life satisfaction ↓
- Role & activity theories explanation
  - Work ➔ non-work identity
  - Social network ↓
  - Life routine & structure disorganized
- Family relationship
  - Protective or risk factors?..........depends?
Society level: A public health concern!

- \( \sim 60,000 \) retirees every year in HK (Census & Statistic Dept., 2012) \( \Rightarrow \) service needs!!!
- Due to the resources constraints, current practice of corporates are
  - Information pamphlets, one-off seminars
  \( \Rightarrow \) Inadequate for real, sustained behavioral changes

Baby boomers’ effect \( \Rightarrow \)
Peak of retirement to come in \( \sim 2018!! \)

Census and Statistics Department, 2012
Interventions for retirement preparation

- Two contradictory requirements
  1. Sufficient dosage ➞ real behavioral changes
  2. Affordable to corporates (or the society as a whole)

- Existing interventions
  - Some evidence of efficacy
  - But simply being ‘effective’ is NOT good enough
  - Needs to be COST EFFECTIVE ➞ a UNIVERSAL service for all soon-to-retire people

A strategic approach

- Positive entry point: **Active interest development**
  - Active vs. passive interest
  - Role: active participants vs. passive receivers
  - Challenging, meaning, engagement
  - Evidence: a strong protective factor of retirement adjustment (Nimord, 2007)
  - But highly preferably be developed BEFORE retirement!

- Affordability & sustainability: **Senior mentorship scheme**
  - Successful retirees trained as mentors
  - Acceptability & dosage ↑

*This year’s mentees can be next year’s mentors ➞ Organic growth of the mentor pool*
AIMS
(Active Interest Mentorship Scheme)
• Funded by CADENZA Community Project, HKJC Charity Trust
• NGO collaborator: Employees Development Service, Hong Kong Christian Service
• Period: Feb 2011 – Jan 2013

Deliverables
• Program kit
  – Training kit & guidebook for mentors
  – Guidebook for mentees
  – Resources kit of local mentees
• Running the demonstration mentorship program
• Train-the-trainers: HRM & social service professionals
• Website on active interests & retirement preparation: http://www.aims.org.hk
• HK Active Interests Expo – organized twice
• Symposium on Active Interests Culture Development
• Spin off AIMS groups in over 11 local cooperates
• International interests
  – Singapore Council for 3rd Age; New York mental health service
Operation of the mentorship program

1. Recruitment & training of mentors (successfully retired people) ➔ become a coach & companion
2. Recruitment of mentees, the soon-to-retire people, ~6 months before retirement
3. Matching
   - 1 mentors to 1 to 3 mentees
   - Match (1) gender, & (2) occupational status (support or managerial/professional)
4. Regular supervision & support for mentors
   - Difficult cases, boundary & ethical issues
5. Mentees stay in program until ~6 months after retirement
6. Interested mentees may join the mentor pool ➔ REPEAT Step 1 ➔ sustainability & organic growth

Helping mentee to explore interests suitable to him/her

- We developed the 8-dimension framework of interests
- A person indicates his/her personal orientation on the 8 dimensions
- Our web-based software may provide suggestions matching his/her preferences
The 8 dimensions of active interest (Ng, 2013)

- Physical
- Intellectual
- Social
- Solitary
- Philanthropy
- Spiritual
- Stillness
- Creative/artistic

Research

- **Objective**
  - Examine the protective value of AIMS on the mental health of the mentees
- **Design**
  - 1-year longitudinal f/u
  - i.e. 0.5 year before retirement to 0.5 year after retirement
  - 4 waves of measure; Interval = 4 months
    - T1: -6 months; T2: -2 months;
    - T3: +2months; T4: +6months
Measures

• Rosenberg Self-esteem Scale (SES, Rosenberg, 1965)
• Satisfaction with Life Scale (SWLS, Diener et al., 1985)
• Hospital Anxiety & Depression Scale (HADS, Snaith, 2003)
• Physical Distress Scale (PD, Ng et al., 2005)
• Positive Affect Scale (PA, Ng et al., 2005)

Participants

• N (completed all 4 waves of measures) = 31
  – [N (agreed to participate in the study) = 40]
• Gender:
  – Male: 18 (58%)  Female: 13 (42%)
• Age:
  – 50-54: 7(22.6%)  55-59: 9(29%)
  – 60-65: 15(48.4%)
• Education:
  – Primary school: 1(3.2%)  Secondary school: 11(35.5%)
  – College/university: 12(38.7%)  Postgraduate: 7(22.6%)
Findings

- Changes in outcome measures

Table. Paired-samples T-Test of changes from baseline (n=31).

<table>
<thead>
<tr>
<th>Variables</th>
<th>Changes</th>
<th>P-Value (Paired with T1)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>T2-T1</td>
<td>T3-T1</td>
</tr>
<tr>
<td>Self-esteem</td>
<td>1.2</td>
<td>1.2</td>
</tr>
<tr>
<td>Life-satisfaction</td>
<td>0.6</td>
<td>-3.8</td>
</tr>
<tr>
<td>Depression</td>
<td>-0.3</td>
<td>0.2</td>
</tr>
<tr>
<td>Anxiety</td>
<td>-1.2</td>
<td>-0.5</td>
</tr>
<tr>
<td>Physical Distress</td>
<td>-8</td>
<td>-3.2</td>
</tr>
<tr>
<td>Positive Affect</td>
<td>4.9</td>
<td>4.6</td>
</tr>
</tbody>
</table>

Note: *p ≤ .05; **p ≤ .01

Figure. Variables’ percentage of changes with baseline T1 from T2 to T4

Note: Tn = (Tn-T1)/T1*100

Trajectory of outcome measures

Figure. Variables’ percentage of changes with baseline T1 from T2 to T4

Note: Tn = (Tn-T1)/T1*100
Discussion

• Except T3, changes in outcome measures at T2 & T4 were in the expected directions
  – Scores of positive outcomes (SES, SWLS, PA) increased or remained similar
  – Scores of negative measures (HADS-D, HADS-A, PD) decreased or remained similar

• Trajectory analysis
  1. Flat curve: SES & PA
  2. V shape: SWLS (positive measure)
  3. Inverted-V shape: HADS-D, HADS-A, PD (negative measures)

• Interpretations
  – T3 (~2 months after retirement): a particularly tough period!
  – SES & PA might be more inherent & internalized qualities
    ➔ stability thru T1 to T4

Conclusion

• Showed evidence supporting the protective value of AIMS on the mental health of mentees, i.e. the soon-to-retire people
Other observations

• Cost effectiveness
• Low dropout rate of mentors
• High % of mentees willing to become mentors
• Portability of AIMS: Spin-offs to
  – Corporate companies
  – NGOs
  – Even international interests!

Lastly, but no the least.....what do you observe?
Efficacy + Cost effectiveness + Portability + Acceptability

AIMS may be a practical, universal service for ALL soon-to-retire people

THANKS!

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