Work, Identity and Health;
Who am I? How do I know who I am? Does it matter?

Tom Fryers

Introduction.

I first became interested in this subject last year through a very unpleasant emotional experience. I was doing very little professional work, and beginning to think of myself as virtually retired, spending most of my time in the garden. A neighbour treated me with utter contempt; I was made to feel a worthless 'nothing', perhaps because I was dressed in old clothes for the garden. Perhaps he thought me as merely 'retired', no longer having any status or personal identity of any value. This may sound trivial, but for me, it was not; it made me re-think my life's immediate future. In short, it made me abandon thoughts of retiring fully, led me to undertake a new EU research project, and made me realise how important it was for me, to be a 'something', whether that 'something' was a doctor, an academic or whatever. And to retire seemed to be to abandon that identity, and to replace it with nothing.

Since then, talking to others about retirement, I have found many resonances in their concerns as they approach retirement, but also many differences in their experience and how they try to resolve the issues. In generalising issues related to work and identity, I necessarily skim over many of these differences. I should also point out that my reading, research, professional experience and personal opinion are inevitably biased towards the situation in the UK. Many things I say will not apply to all European countries, and some may apply only to a few. Nevertheless they may stimulate useful discussion.

A. Work,

1. The work ethic.

In Western European societies we live in largely work-oriented cultures. Work is usually necessary to earn a living, and there are strong moral pressures to work within historically Christian communities. Luther saw daily work as a vocation which we are bound to undertake under God, thus sharing in his work on earth and showing, through work, his love and justice. Calvinists expressed the idea that hard and successful work is a sign of salvation (Forrester, 1983). Wesley said we should "make our daily employment a sacrifice to God; to buy and sell, to eat and drink, to His glory." (1746) These attitudes became very powerful, especially in protestant communities, leading to the 'protestant work ethic', which both Max Weber and RH Tawney considered to underpin the rise of modern capitalism. Marx analysed the way in which work reflects social structures and argued that the way it is organised shapes both society and individual lives, but, whatever the context, the importance of work was emphasised. (Forrester, 1983)

Paul Tournier in 'Learning to Grow Old' (1971) says; "In the West, almost everyone agrees in proclaiming in words, in theory, the supreme value of the human person. We quote the sayings of the ancients 'Man is the measure of all things'. It is man, we say, who gives work its dignity, and not work which gives man his value. But in reality things are quite different. The general social atmosphere in which we are immersed from childhood, and which influences us without even our thinking clearly about it, teaches us the superior importance of work. Work, as a duty, is seen to be full of dignity, even if it is tedious or inhuman."

2. Work in society.

The eminent sociologist Peter Worsley (1987) wrote: "Work is central to our culture. When someone asks "What do you do?" they really mean "What work do you do?". When a woman is asked "Do you work?", what is meant is "Are you doing a paid job?" Yet many people without a paid job work at other kinds of productive activities." So the comments above referred largely to paid work, and applied almost entirely to men; the issues concerning women's work have changed greatly and are very varied and complex; they will be addressed later. There are some other cultures which do not value work as highly as in Europe and America. Lee (1979) quotes Kalahari Bushmen saying "Why should we work, when God has provided so many mongongo nuts?" Unfortunately, mongongo nuts don't grow in the north of England!

It has been generally held in our societies that people should work hard and conscientiously at whatever job they have, both to earn money for their families, and to serve the community. However, it was also a common assumption that material improvement, accumulation of wealth, increased social status and influence, that is, worldly success, was a sign of God's blessing on you and your work. This ancient belief or attitude, which thoroughly informs the Old Testament, persists to this day, in spite of the evidence against it, in parts of European and American cultures, and may be closely associated with high levels of individualisation, wide disparities in wealth, and a tendency to cultural arrogance, all of which other interpreters would see as patently anti-Christian.

Preparation for a society in which work-values predominate has become the principle ground of education. The voices of those who argue for classical education, or education for life, or education for increased leisure, or even education for the 'global village', are lost in the clamour of those who say that education should be for 'the world of work'. Because it does not do this very well in a constantly changing 'world of work', governments constantly change the system, and teachers are unclear what is expected of them. Children are expected to find their identity in work, but are not well prepared to do so. And their more fundamental needs - 'education for life' perhaps, will not have been met.

Work is perceived, therefore, as not only providing an income, but giving social legitimacy to our lives. It may be the principle source of our personal identity, and we probably need a clear identity, a clear sense of being a person, to have self-esteem. A well-defined profession or trade gives us an identity - as a doctor, a teacher, an engineer, a motor mechanic, a secretary, an electrician, and so on. A particular job, independent of profession or trade, may give us an identity - as a consultant, a manager, a director, a foreman, a work-team leader. Or we may derive a sense of identity simply from being a worker, a participant and contributor; people who cannot work, or cannot find work may envy just this identity.

B. Attitudes to work.

1. The value of work.

Our societies have changed very substantially in recent decades - in our life-times - and continue to change, not least in attitudes towards work. We hear very varied and ambivalent attitudes. Some will describe work as an unpleasant chore, to be done as little as possible, only because you need money, and to be given up as soon as possible. Some will complain about aspects of their particular job, but see work in general as a good thing without which life would lose a lot of its meaning. Others may see work - at least, their work - as the main source of life satisfaction, deeply rewarding, important for the community, and hard to relinquish.

Most of us will have shared all these attitudes, often at the same time about different aspects of our work, or at different periods in our careers, the emphasis varying. Whatever the complaints of doctors, nurses, teachers and other professions, (and some complaints are justified) we are privileged to have such professions, providing jobs with intrinsic intellectual, emotional, personal, even spiritual interests and satisfactions, with social respect, whether or not the pay is good.

For some people it is hard to find anything satisfying in the job they do, but work has other things to offer, without which people can feel lost, useless, un-valued, of no clear identity. Whatever the nature of the job, it can give a sense of belonging, of being a contributor, an important part, however small, of an organisation with a bigger purpose, a valued part of society. (eg the care-taker/cleaner). It can provide a structure for the day, week and year without which life just drifts by, a commitment to yourself and others, a purpose for getting up in the morning and going to do something (eg the farmer with fell sheep). It can provide the satisfaction of doing something well, whatever it is, of pride in your work, of being a 'craftsman', of seeing a good result, a good end-product (eg our plumber who makes all pipes straight). It can provide friends, a social group to belong to, companionship, shared lives in joys and sorrows, support when suffering or in need (eg my father in the Work's sports club).

Any or all of these can play a major role in fostering self-esteem, an essential ingredient of good mental health, and closely tied up with our sense of being a person, of having a personal identity, of having value. Not everyone finds this in work, and there are other sources of a sense of self-worth, other ways in which we can find a personal identity. But for many individuals, and for society as a whole, work is a very important source of self-esteem and personal identity, so we need to consider the situation of those who do not work. However, first, we will briefly look at the issue of those who work to excess.

2. Workers to excess.

There are several types of excessive worker, in all of whom there may be substantial stresses related both to work and to being unable to work. There are those who work for themselves, self-employed or running their own business, and who work very long hours to make the business a success, to earn more money, or because they see the business as dependent on them and they cannot let go. They may be identified almost wholly by their work and may have very

little other life. Sickness or retirement may be a huge blow, for they have no other investment for their lives and they risk becoming nothing. PG Wodehouse gives examples of retired business men, very successful, very wealthy, desperately taking up golf (for example) with the same obsessive approach that characterised their business life.

There are those who are employed but are so interested in, and committed to their job that they cannot keep away from their work. Some academics are like this, identifying entirely with their work. In an extreme case there may be similar consequences to the first group; it may create stresses in both the academic and his family, and may make sickness or retirement appear catastrophic. But there are possibilities to perpetuate their identity within retirement by writing or lecturing.

Both these groups elect to work excessively, but the third group does not really choose to do so. They work very long hours, far more than they are officially paid for, because it is expected of them by the culture of the firm or wider society, and because they share a common perception that they will not get promotion, get a better job elsewhere, or keep their job at a time of recession, unless they show themselves to be 150% committed to work, and that there is nothing much else of importance in their lives!

This attitude seems to have been expanding in the UK, and perhaps elsewhere in Europe. I am told by my youngest son in Washington that it is extremely common, even characteristic of a great deal of work in the USA (OECD, 2001). In this situation, it seems that people are forced by societal pressures to identify as a 'worker', not necessarily any particular trade or profession, equating long hours with importance and success. Perhaps for people in this situation, as long as their financial situation is satisfactory, retirement (and possibly sickness, which may be very high in these groups, as long as it is covered financially) may be a great relief, and they may very happily relinquish their worker identity.

C. People not in paid work.

1. Those who will not work.

There are, of course, many in our societies who do not work, in the sense of having a paid job. Society exhibits very ambivalent attitudes towards the few who are wealthy enough for them not to work - they are both envied and resented. And of course, some fill their lives with 'good works', are important contributors to society, and are highly respected. But those without wealth who are perceived as unwilling to work are denigrated; they are called loungers, loafers, 'work-shy' and many other names. There are, no doubt, adults who are fit and well who are simply lazy, and will not work if they can get away with it, though I believe these are few. However, it is not always easy to distinguish these from those who have genuine reasons for not working - physical ill-health, mental ill-health or serious social stresses - or who cannot find work that they can do.

2. Those who are unemployed.

Those who cannot find work, the unemployed seeking work, are put under increasing pressure. Many, for example in the North-East of England, have had to leave their families to find work

in the South-East, because there is no work in their area, they cannot afford to move house, and, in any case, the work has little security. These men (mostly) are working, but the stresses on them and their families are huge. It is not surprising if marriages break down and families split up. But for many men, unemployment is a worse option, with its low income, low status, loss of purpose, loss of dignity, loss of identity.

The relationship of unemployment with illness is well established, though physical illness is likely to be more commonly cause than effect. It is likely to be a mixed picture with respect to depression and anxiety, the 'common mental disorders'. Having recently reviewed all the large-scale population studies in the world since 1980, we are now sure that there is a substantial excess of the common mental disorders associated with unemployment, as well as poor educational background and low material resources (Fryers, 2003). Many GPs will be well aware of these things in their daily practice, but it may help to get them addressed to have them clearly demonstrated by scientific work, especially when commissioned by government!

3. Sickness absence from work.

The confusion of refusal to work, inability to find work and inability to work is very damaging, because there are many who can't easily work on account of acute illness, long-standing sickness, or serious disability, not all of which is obvious to the casual observer. At this point doctors play a major part in helping to distinguish reasons for not working, as, in many societies, they have a legitimising role for sickness absence from work or receipt of sick pay and disability pensions. These are not small issues; the numbers involved are large. For example, in Sweden, in 2000, of 5.6 million adults of working age, 62.4% were in work, and only 4.7% were unemployed. But 11.8% were on sick-leave, and 21.1% were in receipt of disability pensions. It was recently reported that, in the Glasgow region of Scotland, sickness absence is about 16% of the work force, and the government is taking some initiative to reduce it because we need workers.

Sickness certification is the means by which society formally permits people to be not working, without loss of dignity or loss of identity, but they have to fulfil certain conditions as part of the contract with the community (Parsons 1951). They must allow their claim of illness to be checked by a doctor, must refrain from work, and must behave appropriately. This certification has often been treated very lightly, or complained of as a chore by doctors. Simple, obvious, short-lived illness is easily dealt with, and very short periods are usually excused from external certification. And physical illness arising from specific working conditions (accidental injury, certain cancers, pneumoconioses, etc) raise different issues which will not be dealt with here.

But, sick-leave from work is often a complex clinical, personal and social phenomenon, the presenting complaint not necessarily being the sole or principle problem. We know for example, that sickness absence increases with adverse conditions at work, including pressure to increase the pace of work, conflicting demands, and low control over your own work (Stansfeld, 2002). Problems outside work, in families and relationships may also be an important component. However, if approached holistically, in the manner of Paul Tournier, these situations have the potential for very important medical practice, requiring careful physical, psychological and social diagnosis, and prescription of a wide range of appropriate therapies and personal and social assistance.

4. People with disabilities.

People with disabilities raise additional issues. It is very few who cannot work in any way. Most, of course, have significant abilities, and want to work as far as they are able. But their ability to work often depends as much upon the environment, circumstances and practical arrangements of work as upon their own limitations. We have gone a long way to adapting social situations, including work situations to permit people with limited sight, hearing and mobility to work, but there is much more to do. And an important part of the environment is the attitudes of others.

Identity is a key issue, with two facets. First, they may suffer discrimination as non-workers, lacking the identity possibilities of a profession, trade, job or worker-status, and second, they are labelled with an identity as 'disabled', or as whatever type of disease or disability they suffer from. Though the worst stigmatising terms (often also used as terms of abuse) are probably less used in recent years, we all know it is still common to refer to people as 'a diabetic', 'an epileptic', 'a spastic', 'a schizophrenic', 'a stroke victim', and so on. It must be very hard to live with your identity as a disease category, though, of course, there are many individuals who have overcome all these things with heroic fortitude and great success.

5. Women.

I pointed out earlier that most of the literature relating to work applies to men. From a current view-point, it is amazing how strong the historical assumption was that in relation to paid work and economic activity, women could largely be ignored. Even Tournier's book of 1972 seems to assume very traditional women's roles. But worker-identity has been problematic for women. The traditional house-wife and mother role, whilst arguably the most important in all society, has never been awarded the status of a job, even less a career or profession, in spite of recent attempts to do so. Research classifications still categorise it as unclassifiable; traditionally married women were classified by their husband's job.

In my parents' generation, it was probably still 'normal', though by no means universal, for most women to expect no profession or career except that of housewife and mother. My mother was withdrawn from school by her father to look after the family on the grounds that, as a girl, she did not need education; she never 'worked', and always felt something important had been lost. Something of this attitude even persisted in my brother-in law, but he was comprehensively defeated by a wife and three daughters! How often have you heard "I'm only a housewife"; no job, no status, low self-esteem. Yet, raising a family and running a household may be very demanding and an excellent training in organisational and managerial skills. We might do better to recruit some of these experienced 'housewives' into business and public service management, than keep many of the men we now have!

Of course, many of our generation have worked when children were older, or after they have left home, but, in spite of equal opportunities legislation, women get less top jobs, often get less pay than men doing the same job, and in part-time jobs, largely taken by women, may be paid poverty wages. Perhaps these features of society are part of the explanation why women have more of the common mental disorders than men: in the British national Psychiatric Survey of 2000 (Singleton et al, 2001), women were twice as likely to have obsessions, somatic symptoms, compulsions and phobias, and almost one and a half times more likely to

suffer symptoms of fatigue, problems with sleep, and to have a total of neurotic symptoms above case-threshold. Mixed anxiety and depressive disorders in the age group 16-64 were 19% for women, 13% for men.

Of course, nowadays, very many women are training and pursuing careers of all sorts. As we well know, they are postponing (where not eschewing altogether) having children until well into their thirties, with long-term consequences which may not be entirely satisfactory. Their 'worker-identity' may be a real gain, with improved self-esteem, but surely we still need to find a way of recognising the 'housewife and mother' role, the 'domestic manager' role, and investing it with a clear, high-value identity and due status, especially as many women find themselves doing 'double duty' - working both outside and inside the home!

6. People who have retired.

The idea of retirement is relatively modern and is characteristic of industrial societies (Cowgill & Holmes,1978). Pre-industrial societies always had a category of people called 'old', for whom the role expectations were different from those of younger adults. But the change of roles, usually requiring less physical strength, occurred gradually and at no specific age, and was a transition to different but equally valued roles - men might no longer be hunters or farmers, but elders, or priests. Although retired people in modern industrialised societies have a lot of roles, and undertake a lot of responsibilities, such as looking after young children (eg baby-sitting grand-children), these tend to be treated as rather trivial, and not are highly valued.

The situation is likely to change. Where unemployment is low, as in the UK, we are short of workers, short of skills and experience in many trades and professions, and need people to stay in work longer. People over 65 are now much fitter and healthier, are mostly able to work, and many want paid work, though not necessarily full-time. With the increase in older people, the financial burden of pensions has become a big political issue, and many private sector pension schemes have failed and workers have lost their pensions. Ageist attitudes of others need amending; there is much prejudice against older workers, even people in their fifties, looking for new jobs. But, in many countries, future change in this direction is very likely.

Although the traditions and social arrangements for retirement from work vary between different countries, the main issues are generally the same. Many perceptions of retirement for men are very negative; "a first step towards social dependence" (Susser & Watson, 1971), of which the pension is a symbol. I was listening to the news a little while ago in which they reported an attack on 'a pensioner'; no name, no personal identity, just a 'pensioner'. Like 'the elderly', it is not really pejorative, though it does imply dependence, but it is a non-identity, a 'nothing', and is symbolic of the lack of personal value.

In Townsend's classic study in 1954-55 in Bethnal Green, a working class part of London, he found that, although poor pensions were a problem, men complained just as much of boredom and a sense of uselessness - of being unwanted. He reported that "Among the retired, there was scarcely a single person in favour of retirement." I do not believe that this would be as true now in any group, but anticipations of and responses to retirement are undoubtedly very varied, and for many men it remains a great source of loss, including a profound loss of identity.

Tournier recognised this common sense of loss with its many consequences for ill-health and unhappiness in older age. He advocated deliberate preparation for retirement, which is now more common, and the attention at earlier ages to a wide range of interests outside work to sustain life in retirement. But he did not think that unstructured hobbies went far enough, and proposed the idea of a 'second career'. Nowadays, for many people it might be a third, fourth or fifth career, but the principle is the same. His idea was that an interest and activity to sustain retirement should be structured, should have "coherence and continuity", like a previous career, so that it resembles 'work', a job with commitment and purpose.

Some people do obtain paid work after retirement, though often part-time, and often of a lower status than their previous work. Some, however, can use their skills and experience in consultancy, teaching or writing related to their main career, and retain their work-related identity. Some, especially retiring early, re-train and take up a new paid career. But many, assuming that their pension position is satisfactory, do not look for paid work, but, very much as Tournier suggested, pursue a new career very successfully in respect of voluntary work with NGOs. In the UK at least, NGOs are largely dependent upon an army of retired people. To be chairman or a trustee of a major charitable organisation requires abilities, skills and experience akin to those needed for senior positions in private business or public service, and carries exactly similar roles, responsibilities, commitments and risks.

These positions carry some status in society, but I do not think that they confer a recognisable work-type identity! Perhaps those that undertake them for a long period are people who do not crave work-related identity, but find their personal identity from other sources. This might apply more to women, who have often been denied work and career identity in their main adult years, but may more commonly have achieved a satisfying sense of personhood at a deeper level in terms of relationships, family, and community service.

Since each country has an official 'retirement age' when pensions will normally begin, and when not-working is accepted without stigma, 'early retirement' is likely to have some special features. It became common in the UK in the last twenty-five years or so, partly in response to very high levels of unemployment, and the rate of technological change. It was sometimes a matter of individual choice, encouraged by generous early pension arrangements, and some companies had an early retirement age. But it was often forced on people through redundancy, and very strong 'ageism' among employers, which precluded people in their fifties getting new jobs. Some retired early in response to poor health, though this could be only a partial reason, but a source of legitimation. For society there were huge losses in skills and experience, now perhaps openly regretted, and a huge extra financial burden of pensions on companies and public institutions, for no productivity. This could be from age 50, with an expected pensioned life of 30 years or more. Without doubt this is now regretted.

Physical health problems will mostly anticipate early retirement, though high levels of inactivity may increase risks of heart disease, but mental health problems might be expected to be either causes or consequences of retirement. There is evidence of causes - eg 20% of early retirements from the UK National Health Service are for psychiatric reasons (Pattani et al, 2001). There is also evidence of consequences - involuntary early retirement appears to increase the prevalence of the common mental disorders, but planned, voluntary retirement appears to reduce them (Gallo et al, 2000; Drented, 2002).

Data from the British National Psychiatric Survey of 2000 are very interesting (Melzer et al, 2004; Buxton et al, 2005). They showed a dramatic, highly significant drop in prevalence of the common mental disorders (mostly depression, anxiety or both) at the age of 65 for men, but not for women. For men, total symptom counts of 18 on the Clinical Interview Schedule (CIS) were 7.3% at age 60-64 and 1.5% at age 65-69. 'Depression', was 3% at 60-64, and 0.3% at 65 -69. It is not a cohort effect (we can check it with the similar 1993 survey), and no variables explain it statistically other than age. Men who retired early had high rates, indeed higher rates than employed men, until 65, when they suddenly achieved similar low rates. Men who were still employed after retirement age not only had low rates then, but had also had relatively low rates in their fifties and early sixties. But the lowest rates were for those who retired at 65. For women, the rates were higher than men at all ages, peaked at age 50-54, then slowly diminished with no large reduction at either age 60 or 65.

These are British figures; it would be really interesting to have this replicated in other countries, but few have large enough surveys. It seems that early retirement is bad for men, but retirement at the age legitimated by society is very good for men. At the moment we don't know why. Perhaps legitimation is the secret; at age 65 perhaps, the generality of men can relax, no longer needing to justify themselves as workers, can, perhaps, 'be' more than 'do'. And perhaps people like me, who are making such a fuss about retirement, are out of step, and need to learn something about personal identity which has nothing to do with being 'something' in work.

D. Identity - What am I? - Who am I?

Who we are and what we are, are very important questions for all of us, with social, psychological and spiritual dimensions. Without a clear sense of personal identity it is very hard to have the self-esteem we need to function well as independent people in inter-dependent society. Without a clear sense of personal identity we are very vulnerable to psychological injury, at risk of anxiety and depression, and disengagement. Without a clear sense of personal identity we cannot easily respond to love with love, to accept forgiveness, to start again after failure.

For many people, work, or a profession or trade, provide an important source of personal identity; for some it may be the only significant source. Even for those for whom this is minimal, being a worker is important for all the other benefits work mediates. Especially in older age groups, both before and after retirement age, some continuing work, paid or not, perhaps part-time, but definitely 'work', may be a very good thing for most people, as well as being important for the community. And for those with specialist skills and experience, is there not also a moral, and a specifically Christian duty to continue to make your specific contribution for as long as it is needed, again, whether it is paid or not.

But work is not the only available source of personal identity, and it is, perhaps, fundamentally inadequate, because few of us can claim that identity for ever. Sickness, disability, redundancy, retirement all threaten an identity built upon work. And we all do have other identities. We are sons and daughters, mothers and fathers, grandmothers and grandfathers and great-aunts and old friends of the family, and so on. These identities, built upon relationships are surely more fundamentally important than work-related identities. And perhaps relationships within the

wider community are also important; can we not build up an identity as a good citizen, as a good neighbour, willing to help others whether in formal organisations or not?

Ultimately personal identity and self-esteem are closely bound up together, and derive from a sense of personal value, of personal worth, of being needed, of being loved for your own sake, for what you are, not just for what you do. This is true health and wholeness. I am sure it is not only experienced by Christians, or by religious people, but it is very specially a Christian message that this is what a loving God offers to those who trust in Him. Jesus said "Are you not worth more than the sparrows...?"

Well, I better think again about retirement, accept my rapidly developing identity as a grandfather, and plant mongongo nuts in the garden.

References.

Buxton JW, Singleton N & Melzer D, 2005; The mental health of early retirees: national interview survey in Britain. Submitted

Cowgill DO & Holmes LD,1978; Ageing and Modernisation, in *An Ageing Population*, ed. V Carver & P Liddiard, Open University / Hodder & Stoughton.

Fryers T; Melzer D; McWilliams B; Jenkins R, 2003; A systematic literature review of social inequalities in mental health. In *Social Inequalities and the Distribution of the Common Mental Disorders.* Maudsley Monograph 44; Psychology Press, Hove & New York, pp1-126.

Forrester D, 1983; Work. In *A New Dictionary of Christian Theology*, ed. A Richardson & J Bowden. SCM Press.

OECD, 2001; Labour Market Statistics; International Labour Organisation.

Lee RB 1979 *The !Kung San: Men, Women and Work in a Foraging Society*, Columbia University Press.

Melzer et al, 2004; Decline in common mental disorder prevalence in men during the sixth decade of life. *Social Psychiatry and Psychiatric Epidemiology*, 39, 33-38.

Parsons T, 1951; *The Social System*, Routledge & Kegan Paul.

Pattani S, Constantinovici N, & Williams S, 2001; Who retires early from the NHS because of ill-health, and what does it cost? *BMJ* 322, 208-209.

Stansfeld S, 2002; Work, Personality and Mental health, *Br J Psychiatry* 181,96-98

Susser & Watson, 1971; *Sociology in Medicine*, Oxford.

Tournier 1971, *Learning to Grow Old*.

Townsend P, 1957; *The Family Life of Old People,* Pelican.

Wesley J,1746; *Forty-Four Serm*ons. Epworth.

Worsley 1987 *The New 'Introducing Sociology'*