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Workplace accommodation for older teachers in Japan and Germany: The role of the institutional context in supporting late career options for teachers with ill health**

Owing to the ageing of their respective populations, policy-makers in Japan and Germany are challenged to extend the working life of individual employees. However, conditions of physical and mental ill health tend to increase with old age, leading to disabilities that affect whether and how individuals can remain active in the labour market. Workplace accommodation is a means to enable disabled individuals to remain productively employed. Drawing on qualitative interview data, this discussion explores how institutions such as School Authorities in Japan and Germany use workplace accommodation to support teachers with physical and mental disabilities. Teachers are a white-collar profession strongly affected by ill health, especially burn-out. The discussion furthermore explores how such workplace accommodation measures influence older teachers' career expectations and career outcomes, including thoughts about (early) retirement. It finds that even though the institutional contexts in Japan and Germany are rather similar, career options and expectations vary, though with similar (negative) outcomes for national strategies towards the extension of working lives.

Key words: professional labour markets, disability, workplace accommodation, Japan, Germany (JEL: I10, I18, J11, J26, L30)

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Introduction

The likelihood of having a physical or mental disability drastically increases with age, and especially for members of the teaching professions (Freude, Seibt, Pech, & Ullsperger, 2005); a white collar profession that has a high prevalence of being affected especially by mental health problems such as burnout (Hakanen, Bakker, & Schaufeli, 2006; Bauer, Unterbrink, Hack, Pfeifer, Buhlgrißhaber, Muller, Wesche, Frommhold, Seibt, Scheuch, & Wirsching, 2007) which leads to depersonalisation, emotional exhaustion and/or a reduced sense of personal accomplishment and achievement (Griva & Joeke, 2003). Besides potentially affecting an individual's capability to fulfil his/her original work-related tasks, burnout directly affects individual job satisfaction (Skaalvik & Skaalvik, 2009) and, as a consequence, turnover intention (Yang & Lee, 2009) and, potentially, physical health (Tsuboi, Takeuchi, Watanabe, Hori, & Kobayashi, 2002).

Ill health of both the physical and mental types and its effects on teacher careers has been a prominent topic in international HRM research (cf. Travers & Cooper, 1993; Goddard & Goddard, 2006; Hughes, 2001; Skaalvik & Skaalvik, 2011). For example, the incidence of early labour market exit due to ill-health is considered to be high in general (Van Rijn, Robroek, Brouwer, & Burdorf, 2014) as well as among teachers, both in Europe and in North America (Bowers, 2001). This specifically applies to Germany (Weber, 2004; Bauer et al., 2007; Goetz, Loew, Hornung, Cojocaru, Lahmann, & Tritt, 2013), where, for example in the German Federal State of Hamburg, 23.4 per cent of those leaving the teaching profession prior to pension age in 2008 did so because of ill-health reasons (Bonorden, 2009). Ill-health also affects the teaching force in Japan where the amount of Japanese teachers taking leave of absence due to health reasons in general, and psychiatric disorders in particular, has increased significantly between 1995 and 2004 (Inoue, Tani, Kauta, Masaki, Fukunaga, & Okazaki, 2007). Furthermore, the percentage of teachers that retired prior to retirement age (age 60) in Tokyo increased from 12.8 per cent to 22.3 per cent between 1994 and 1997, and the percentage of those quitting their job in the teaching profession increased from 21.6 per cent to 24.1 per cent over the same time period (Kudomi, 1999). Reasons for ill-health, and especially for burnout, are similar across Japan and Germany, and include work intensification and changing pupil-parent-teacher relationships (Van Droogenbroeck et al., 2014, Santavirta et al., 2007, Kudomi, 1999, Yamashita and Okada, 2010); the changing image of teachers in society (Yorimitsu, Houghton, & Taylor, 2014) and psychological factors such as increased work commitment (Kieschke & Schaarschmidt, 2008).

Japan and Germany have been chosen because both countries have highly institutionalised employment and human resource management (HRM) systems managing the teaching force, with HRM policies being established at the School Authority-level (OECD, 2005; Cortina, Leschinsky, Baumert, Mayer, & Trommer, 2008). Given that health issues among the teaching force are prevalent in both countries, the comparison presented here aims to show whether and how institutional-level stakeholders are able to accommodate teachers with ill health and disabilities. This discussion aims to examine whether and how both positive and negative 'stay factors' such as employer

interventions to help manage health issues and the closure of early retirement routes play out (respectively) in German and Japanese workplaces. Overall, this discussion seeks to contribute to the literature on workplace accommodation, specifically for public sector employees. It uses a qualitative lens, contextualising actual decisions over the provision of accommodations and corresponding lines of argument. The discussion also contributes to comparative HRM research generally as well as to processes of age management specifically. The following sections introduce the data and methods used, and the institutional contexts in Japan and Germany where workplace accommodation takes place. The fourth section discusses the findings of the data analysis before arriving at conclusions and implications for future research.

Context

The teaching force in most countries is ageing (OECD, 2005), including Germany and Japan (OECD, 2013). Simultaneously, national economic pressures are causing the closure of early retirement pathways for those diagnosed as suffering ill health while national public policy trends in both Germany and Japan appear designed to require individuals to extend their working lives (Muller-Camen, Croucher, Flynn, & Schröder, 2011; Flynn, Schröder, Higo, & Yamada, 2014; Hofäcker, Schröder, Li, & Flynn, 2016). Against this cross-national background, it is important to investigate how older teachers are dealing with ill health and employment. Furthermore, it is of interest how institutional stakeholders such as School Authorities can support teachers towards remaining productive members of the teaching workforce. Thirdly, it is important to consider how ill health and related institutional support might affect the individual career expectations of teachers in later life.

The literature on workplace accommodation discusses how organisations may support people with (chronic) ill health and disabilities to maintain/reach their full potential in the workplace (Nevala, Pehkonen, Koskela, Ruusuvoori, & Anttila, 2015). Older individuals with ill-health and disabilities are more likely to ask for a workplace accommodation than younger individuals (Baldrige & Swift, 2013) and the same is likely to be true in schools. In fact, the positive support of organisational stakeholders is instrumental in facilitating the return-to-work after absences due to illness or disability, and organisational policies in support of the disabled are seen as increasingly important for rehabilitation (Franche, Baril, Shaw, Nicholas, & Loisel, 2005). However, the amount of social support appears to be mediated by the degree of disability, the frequency of support claim and the resulting qualitative and quantitative amount of workplace accommodation. Perceived and actual support decrease with increasing level of disability and frequency of claims (Lysaght, Fabrigar, Larmour-Trode, Stewart, & Friesen, 2012). This includes both healthy co-workers' positive perceptions of the fairness of individual accommodation arrangements (Colella, 2001) as well as line managers' willingness to accommodate requests for workplace changes (Florey & Harrison, 2000).

This discussion explores accounts of Japanese and German teachers as well as stakeholders, including School Authority employees, with regard to the support requested by and support given to older teachers who suffer from disabilities and illness. We focus on teachers who claim to have developed (chronic) ill health, whether this

might be physical or mental, including burnout, and whose illness affects their ability to pursue job-related tasks. To illustrate, most teachers in our sample talked about mental health as opposed to physical problems. Nevertheless, we deliberately include both physical and mental health problems in this study, as both necessitate workplace accommodation measures in order to reinstate and/or maintain individuals' abilities to pursue job-related tasks (Nevala et al., 2015). Physical health problems such as voice disorders (Roy, Merrill, Thibeault, Gray, & Smith, 2004) and hearing problems that affect teachers' ability to work can be compared to problems affecting members of the professions generally (cf. Tye-Murray, Spry, & Mauzé, 2009). The impact of physical health problems such as muscular-skeletal illnesses can impact on some teachers severely: for example, music and sports or teachers can experience increasing disability to interact with students as well as affecting the individuals concerned (Freude et al., 2005).

Mental health is more difficult to define, diagnose and conceptualise. However, we posit that it is associated with the presence or absence of subjective well-being. Symptoms for the absence of subjective well-being might be depression, anxiety, and a feeling of hopelessness, but also the absence of a positive role and purpose in life, including self-acceptance, positive relationships with others, autonomy and having a purpose in life (Keyes, 2002). The syndrome of job stress, known as burnout, then, manifests itself as 'a prolonged response to chronic emotional and interpersonal stressors on the job, and is defined by the three dimensions of exhaustion, cynicism, and inefficacy' (Maslach, Schaufeli, & Leiter, 2001, p. 397). Burnout is associated with and appears to cause increasing levels of physical ill-health including cardio-vascular and musculoskeletal diseases (Honkonen, Ahola, Pertovaara, Isometsä, Kalimo, Nykyri, Aromaa, & Lönnqvist, 2006), but also mental health problems such as depression and anxiety (Peterson, Demerouti, Bergström, Samuelsson, Åsberg, & Nygren, 2008). In combination with physical and mental health effects, burnout leads to increased job withdrawal, lower productivity and effectiveness at work as well as to lower job satisfaction and reduced organisational and job commitment (Maslach et al., 2001).

Methodology

We draw on interview data that were collected in Japan and Germany between 2008 and 2013 through three funded research projects. In total, we conducted 28 face-to-face, in-depth semi-structured interviews, including 14 interviews in Germany and 14 interviews in Japan. These interviews were conducted in two School Authorities, the Tokyo Board of Education (Japan) and the Federal State of Hamburg (Germany). We were therefore able to follow a multiple case study design, in which interview data were obtained at different hierarchical levels within two bounded case studies (Yin, 2009, Stake, 2006). For Germany, we conducted ten biographical interviews with teachers aged 50 or older and four interviews with school ministry-level stakeholders, including HR managers and employee representatives. For Japan, we use eleven biographical interviews and three interviews with school ministry-level stakeholders, including HR managers (see Table 1).

Table 1: Interview participants in Germany and Japan, biographical interviews and stakeholder interviews**Biographical interviews with teachers aged 50 and over**

Country	Pseudonym	Gender	Education	Age	Job Status
Germany	<i>Helga</i>	female	University	57	Part-time
Germany	<i>Maria</i>	female	University	62	Part-time
Germany	<i>Heide</i>	female	University	63	Part-time
Germany	<i>Sabine</i>	female	Teachers college	58	Part-time
Germany	<i>Hilde</i>	female	University	59	Full-time
Germany	<i>Karl</i>	male	University	61	retired
Germany	<i>Erika</i>	female	Teachers college	58	Part-time
Germany	<i>Edda</i>	female	University	58	Full-time
Germany	<i>Bettina</i>	female	University	58	Full-time
Germany	<i>Rolf</i>	male	University	58	Full-time
Japan	<i>Kusuda</i>	female	4 Year College	57	Full-time
Japan	<i>Aoki</i>	female	4 Year College	58	Full-time
Japan	<i>Takayama</i>	male	4 Year College	53	Full-time
Japan	<i>Kurashige</i>	male	4 Year College	51	Full-time
Japan	<i>Yamamoto</i>	male	4 Year College	51	Full-time
Japan	<i>Somei</i>	female	4 Year College	54	Full-time
Japan	<i>Tsuruta</i>	male	University Master's degree	52	Full-time
Japan	<i>Kato</i>	female	4 Year College	57	Full-time
Japan	<i>Kusune</i>	male	4 Year College	54	Full-time
Japan	<i>Ota</i>	male	4 Year College	52	Full-time
Japan	<i>Kawazaoe</i>	female	4 Year College	56	Full-time

Stakeholder interviews with School-Authority (HR) staff

Country	Pseudonym	Gender	Job description
Germany	<i>DE_HR1</i>	male	HR Manager
Germany	<i>DE_HR2</i>	female	HR Manager
Germany	<i>DE_TU</i>	male	Trade Union Representative
Germany	<i>DE_WC</i>	male	Works Council Representative
Japan	<i>JP_HR1</i>	male	HR Trainer
Japan	<i>JP_HR2</i>	female	HR Coordinator
Japan	<i>JP_HR3</i>	male	HR Counselor

While the stakeholder interview partners in both countries were sampled based on their official job function in and knowledge of Human Resource Management processes and workplace accommodation measures in their respective School Authorities, interview partners for biographical interviews were identified using a snowball sampling strategy. While not providing a representative sample across the entire population, snowball sampling allowed us to identify and establish contact with eligible respondents in the absence of the two School Authority's willingness to provide us with a population register.

Each interview used a standard or similar interview schedule. The stakeholder interview participants acted as experts (Flick, 2009; Bogner, Littig, & Menz, 2005) in providing structural and contextual information about education policy and HRM practices towards (older) teachers in their respective institutional contexts. Topics discussed included the overall public sector employment system in their countries, HRM policies and practices towards teachers including pay, promotion systems, job training, working time flexibility; (early) retirement options and pension systems; as well as occupational stress factors and ways in which such factors can be offset.

The interviews with teachers aged fifty and older followed a semi-structured biographical interview approach (Roberts, 2002), which is regularly used in teacher career studies (i.e. Kelchtermans, 1994; Stroobants, 2005; Kelchtermans & Ballet, 2002). Interview schedules for both the German and Japanese interviews covered similar topics surrounding older teachers' past and present employment careers; envisioned future career developments; decisions over anticipated (early) retirement timings and transitions; changes in the teaching profession; perceptions about the HRM concerning teachers including support from their School Authorities; as well as private-life factors affecting their employment life and vice versa. All interviews lasted on average one and a half hours; were collected face-to-face; were audio-taped and subsequently transcribed in German respectively in Japanese after having received informed consent from all participants. The data was collected and analysed by researchers fluent in German respectively Japanese using a thematic analysis approach (Braun & Clarke, 2006).

Institutional context comparisons

Data were gathered in comparable institutional settings in each country. An institutional comparison of the employment and management of older (aged fifty and more) teachers in the Japanese and German public sectors shows similarities as well as differences. Similarities are found in the overall employment system, which follows a lifelong career-based model in both Japan and Germany, compared with a position-based approach found, for example, in Canada and the United Kingdom (OECD, 2005). In a career-based model, teachers typically enter the profession after a teaching-specific university degree programme, have to pass a rigorous state exam, and tend to stay in the profession until retirement. The career trajectory within the profession follows an upward-oriented linear as well as hierarchical structure, often identified as a seniority-based system, which influences promotions and pay (OECD, 2005: 143). Furthermore, the responsibility for HRM lies with the School Authority, which oversees and manages all public schools in a specific geographic

area. School-level head teachers, or principals, only have limited scope to manage their own teaching staff (Klemm, 2011).

Consequently, in both countries, specific health-related HRM policies and practices are designed and implemented largely at the School Authority-level. The School Authorities in both Japan and Germany offer prevention measures such as support and advice, and have implemented confidential and anonymous support schemes for teachers regarding occupational health and safety, issues concerning violence against teachers, and stress. Once health problems occur, both countries have similar schemes in how health status is assessed and evaluated. Teachers in both countries have then access to paid sick leave as well as to re-integration support upon their recovery and depending on the severity of their illness. Another option to alleviate ill health is by reducing stress levels, for example, by reducing the annual working time, the level of responsibility and/or to phase into retirement. While German teachers can easily, flexibly and autonomously decide whether they want to work full or part-time at any given point in time, this is not as easy for Japanese teachers, who can only work part-time if having child or eldercare responsibilities or as an immediate and short-term response to illness.

If, however, teachers cannot return to their teaching job due to ill-health the German School Authority has a very limited amount of alternative jobs that teachers can be asked to do. This is normally not the case in Japan, where teachers are expected to stay in the teaching force throughout their employment life. If neither teaching nor an alternative job can be done due to the health status, German teachers were in the past able to take ill-health early retirement – an option that is, however, decreasingly available because access criteria have been sharpened in recent years. In Japan, institutionalised ill-health early retirement is not very common especially if teachers reach their early fifties, mainly due to a lack of institutional arrangement for flexible accommodation (OECD, 2004). While in Germany early retirement pathways have been closed over time and teachers increasingly have to work up until age 65, Japanese teachers, whose retirement age is lower than their German peers', may opt to either fully retire already at age 60 or continue working up until age 65, though with fixed-term annual contracts, reduced pay, and reduced levels of responsibility. However, early retirement at financially-attractive terms is available at least to some Japanese teachers in their 50s because their schools and School Authorities aim to decrease the average age of the teaching force by providing career opportunities for younger teachers (OECD, 2004).

Findings

Managers' responses (Germany)

In line with previous research literature (cf. Bauer et al., 2007), ill health generally and burnout especially are significant topics for the German School Authority. One HR manager (DE_HR2) claimed that 60 per cent of those hospital beds that are reserved for privately-insured individuals are occupied by teachers, and that the cost of both managing health and paying for ill-health retirements is a growing concern for the federal state. While in the past, teachers were able to balance out their job responsibilities and to find time and space to deal with any extra work, this is no

longer possible due to changes to the teacher working time. A working hour increase coupled with a re-evaluation of time deemed necessary to complete tasks, such as marking exams, led to the perception that the working time had increased substantially. At the same time, organisational change demands led to actual work intensification. Teachers are therefore no longer able to recover from high stress work phases.

[...because of the new working time arrangement, which is considered work intensification] teachers do not have any time gaps any more, they do not have the possibility anymore to balance out their responsibilities time-wise.... They regularly have to work on weekends, during holiday time etc. They do not have the chance to effectively manage their time. (DE_HR2)

Also, in previous times teachers were able to use financially attractive state-financed ill-health early retirement pathways, which more recently government intervention had closed or made less accessible. The number of ill health early retirement cases was therefore falling. However, this decrease does not mirror the actual overall health status of the teaching profession, as commented on by one HR manager we surveyed. Instead of retiring early, teachers have to increasingly 'live' with their illness while continue working, mostly out of financial reasons:

We have fewer cases [of ill-health early retirement], but this is not because teachers have found a different way to deal with their illnesses. It is the opposite. Now, I would hang in there because my children might still be at college... I know a lot of colleagues who say: 'I would really have to reduce my working time or retire early [because of ill-health], but I cannot afford to do so'. (DE_HR2)

The School Authority has responded to increases in stress and burnout, mostly by taking preventive measures, as '*controlled planning can be useful in order to detect those teachers that show burnout symptoms*' (DE_HR1). These coordinated activities mainly include awareness raising through leadership training, but also dedicated projects on practical health issues. According to one HR interviewee, the topic of ill health is regularly discussed in the school's leadership training. However, he argued that the issue '*cannot be evaluated and solved on a systemic level*' (DE_HR1) and that managing issues of workplace stress is the responsibility of the school management team rather than of the School Authority itself.

When a teacher is experiencing burnout it is deemed to be his or her supervisor's responsibility to provide support which might include personal meetings, feedback, but also changes to working conditions and work content. This especially applies if teachers are no longer able to teach at all or to teach certain subjects. Physical education and music were identified as particularly problematic both because of the nature of the subject itself and the limits faced by head teachers in being able to make adjustments to how the curriculum is taught. While teachers who are no longer able to carry out their duties in the classroom can concentrate a reduced amount of their duties on administrative work, it is up to the school management team to ensure that others cover their teaching.

In addition to courses targeting school-level leadership staff, the School Authority is offering health-related training to all teachers. In fact, the School Authority requires that teachers participate in training on a regular basis, at least up until age

55 after which age participation in training measures becomes voluntary. The dedicated teacher training institute offers, for example, ‘*voice training; stress management and how to deal with difficult situations*’ (DE_HR2). It was emphasised that health-related training is in great demand but that the corresponding budget is not large enough to satisfy this demand, even though the interview partner mentioned that she herself ‘*[has] accumulated a lot of overtime*’ (DE_HR2) offering such training and health-related coaching.

The health seminars that we offer are in great demand. That is, I could have double as many seminars, but I do not have the budget to offer more. I started about six years ago to offer these seminars, and when I look at the overall demand pattern, many seminar topics were demanded four or five times as often as I can actually offer them. (DE_HR2)

Teachers’ experiences (Germany)

The observation that stress and burnout are primarily considered by the School Authority to be issues which should be addressed individually rather than systematically means that teachers’ ability to manage mental health issues while remaining employable depend very much on their own circumstances as well as the willingness of their managers to provide support. Based on the analysis of the biographical interview data, we identified four types of (lack of) support in dealing with teacher ill health. In this section, we discuss these four cases of teachers who received managerial support (Sabine); found an early exit route (Heide); could not retire but reduced work commitment (Hilde) and suffered from lack of support (Edda).

Both Heide and Hilde mentioned that they suffered from work intensification and organisational change. Heide, a female teacher aged 63, elaborated on four systemic changes that had rendered her working life unbearable: ‘*Those four changes simultaneously – horrible!*’ (Heide) She had already in the past only worked part-time because she thought: ‘*I would not have been able to manage all of my work working full-time – grading all these exams in German and Philosophy*’ (Heide). As she did not perceive herself to have any further levers to reduce her stress level without falling seriously ill, she had started to plan her early retirement well ahead of time.

You have to start planning the latest at age 50. ‘How do I get out of this job in time? Before breaking down, without getting sick so that I can still fully enjoy my retirement?’ Otherwise, it does not work at all! (Heide)

Heide consequently arranged for early retirement after taking unpaid leave as well as a sabbatical year, and therefore left active service already at age 60. She was only able to do so because she had the financial means to retire on an actuarially reduced pension, an option she noted many teachers are unable to take because she thought that they might be unable to afford to do so.

Contrary to Heide, Hilde – a female teacher aged 59 – could not afford to retire early because she is a single mother of an underage son. Due to this financial responsibility, she had to work full-time, even though she felt that she had already exceeded her limit. In addition to the work intensification, Hilde cited a lack of recognition for her work as a major stress factor.

They [the school leadership team] do not recognise what I do here in the arts department – we always have conflicts... They always tell us: ‘You have to do more’, and ‘Can’t you also do this?’ But they do not see what we do. Can’t they at least once recognise and praise what we do...? That I do large-scale murals with my students? They put us under a lot of pressure (Hilde).

The combination of not being able to leave early or to reduce her working time and the perceived level of stress has led her to work to rule.

Well, I try to find ways for myself to work less. I do not do any big projects anymore, even if colleagues ask me to. Those times are over – all these wall murals and film projects... I need to take care of myself, objectively, and I will try to cut back and take things easier (Hilde).

Therefore, while Heide self-financed her early exit from teaching, Hilde found other ways to reduce her stress by working less and by reducing her extracurricular work commitment. Both teachers did so to prevent health-related impairments, which were, as they thought, inevitable if they had not acted accordingly.

Contrary to Heide and Hilde, Edda and Sabine were not able to take action before health problems occurred. Sabine, a 58-year-old female teacher, had experienced clinical depression in her late 40’s, which she attributed to over-commitment that played out in terms of her taking on extracurricular activities and additional school-level tasks.

Our former head teacher had the tendency to stick me with all sorts of extra things, always in passing. And it took me ages to see through him and see his intentions. I always thought he thinks so highly of me that he has confidence in me... but in the end, the stress increased exponentially. (Sabine)

At the same time, Sabine was pursuing a university degree to teach students with disabilities. The combined load of work and study led to her having to leave work for three months in order to receive treatment. With the help of her therapist, she learned to limit herself to a manageable workload.

My immediate supervisor understood this very quickly and also supported me. He also took care of me when I was about to say Yes again. My head teacher, it took him longer to understand... He was about to ask me a favour again, and my supervisor heard this and screamed: ‘Have you still not understood? Ms. *Sabine* is now able to say No! Hang in there, Ms. *Sabine*, stay strong and say No!’ (Sabine)

Lastly, the case of Edda highlights that not every case of illness can be dealt with, especially if the immediate supervisor is not supportive. Edda had to leave the teaching profession because of mental ill health and was working in the school ministry at the time of the interview. She recounted that her former school’s management team was, from her perspective, at least partly responsible for her illness.

This bullying was horrible... What I experienced in my old school was a great burden for me. This was very stressful. I have experienced a school management team because of which I became ill. I think I can say that... This was especially my head teacher who did not support his teachers. (Edda)

Edda therefore ended up leaving her school because she experienced a burnout and was no longer able to teach. Since, unlike Heide, she could not afford to retire early on a reduced pension, she secured an alternative job within the School Authority.

However, she described being stigmatised for having left teaching for reasons of ill health.

I did not get the proper support, because the person, who was responsible for my case, did not really want to help me... He was in a very bad mood in the sense of 'what does she want from me, she is only playing sick'. It was really a stigma not being able to teach because everyone thought that we were the case who obviously played sick because we did not want to teach. (Edda)

Managers' responses (Japan)

Similar to the case of teachers in Germany, ill health among school teachers and burnout in particular have long been recognised as a social problem in Japan. In 2013, The Ministry of Education, Culture, Sports, Science and Technology (MEXT) reported that over roughly the previous two decades the annual number of public school teachers across the country who had left work, either temporarily or permanently, due to alleged mental illnesses had increased by about five-fold: from about 1,100 in the early 1990s to some 5,500 by 2010. Nationwide, those in their late 40s and 50s teaching middle school (junior high school) were more likely than those in any other category to leave their jobs (MEXT, 2014).

All three School Authority-level HR manager interviewees stated that, as the country's largest school district, the Tokyo district has followed the same national trends over the past few decades. Furthermore, while a number of school teachers under the Tokyo Metropolitan Board of Education (TMBE) seek sick leave for a variety of health-related reasons, more than 60 per cent of the reasons are related to their mental ill-health. According to one interviewee, an HR Coordinator at TMBE:

Burnout... is clearly the predominant ill-health condition that [those teachers who take sick leave] have experienced... They say they suffer from a variety of challenges including physical overwork, excessive psychological stress, moderate-to-severe depression, inescapable feelings of distrust of others, etc., but the outcome is mostly the same: burnout as school teachers. ... at least in our case, however, those in their 50s probably have the highest risks due to accumulated, immense responsibilities that they have come to undertake over time, which pulls their attention in a number of directions and causes stress. (JP_HR2)

In response to these national concerns, since the late 1990s MEXT has mandated that all regional boards of education, including TMBE, provide at least the following three forms of institutional support to help those teachers experiencing burnout and to prevent them from suffering any further ill-health. The first form of institutional support is sick leave programmes, which allow teachers to break from their work up to 90 days without pay reduction or loss of jobs. The second is administrative leave programmes, which are often utilised by those who have taken sick leave and need a further break period for full recovery. Together these two programmes allow teachers to break from their work up to three years. While providing only base salaries, the administrative leave programmes also support teachers in gradually resuming their fulltime workloads through various case-sensitive arrangements in terms of working hours and locations. The third type of institutional support is to offer counselling services at each regional board of education to help teachers cope with work-related concerns and health issues (MEXT 2014). On top of the three basic

forms of nationwide institutional support, each school unit as well as each board of education is encouraged to design and provide additional support for teachers.

Teachers' experiences (Japan)

According to the accounts given to us by teacher interviewees in Japan, the causes of their ill health and/or burnout vary significantly. Each interviewee reported multiple factors contributing to their experiences. Nonetheless, eight of the eleven interviewees coincidentally talked about a national trend called 'open school' as a structural factor underlying their burnout. Having emerged since the early 1990s, the notion of 'open school' promotes active incorporation of parental and community voices such as those of residents living in vicinity of school buildings. These voices should feed into the ways in which teachers relate to their pupils on a daily basis as well as how schools are organised and administered. Those teachers interviewed argued that this national trend has come to place most school teachers under immense pressure to undertake excessive administrative tasks, formal and informal, dealing with parents and communities. Many of the parents and community residents, though not the majority of them, convey discontent and dissatisfaction with various aspects of the ways in which teachers work with their pupils. As a result, for instance, Somei, a female middle school teacher aged 54, argued:

I am not entirely opposed to this whole shift ['open school'] ...but, this has clearly resulted in downgrading our authority as teachers and in disempowering us in disciplining our students...you know, we need to discipline [students] who misbehave right in front of our eyes, which is part of our role ...at the same time there are always some neighbours around our school who are very unhappy with students who cause trouble in our community. (Somei)

Takayama, a male high school teacher aged 53, went through severe burnout about six years ago. He was ceaselessly busy with responding to phone calls, emails, and letters from his students, their parents, school neighbours, and supervisors. Each of them asked him to take a different direction not only when problems occurred but also when no obvious disturbance was occurring. He claimed:

It's almost like I was on duty 24/7...I felt completely burned out by the unavoidable overwork, yet the harder I worked the more trouble I created for myself... I felt that too many responsibilities and expectations were placed on our shoulders. We are expected to manage all the problems and make everyone happy, based only on our 'love' of our work and our personal, super-human qualities. (Takayama)

Kusune, a male middle school teacher aged 54, said that he had long been worried that he might be subject to eventual disciplinary dismissal due to accumulated criticisms, and even a series of threats that some of his pupils' parents might take legal action against him because of his allegedly Spartan-style teaching methods. He complained:

One morning I woke up with tears in my eyes feeling that a school teacher's job just doesn't pay off in any sense of the word... I found myself completely immobile...that was the beginning of my burnout. (Kusune)

The three forms of institutional support discussed above do not seem to fully satisfy most of the teacher interviewees. While recognising their potential significance,

teachers in Japan shared the concern expressed by those in Germany about possible negative consequences associated with the use of some of the support. For instance, Tsuruta, a male middle school teacher aged 52, spoke of a possible stigma that might be attached to him if he were to take sick leave. He stated:

Have I ever considered asking for sick leave? Nope. Why?...in theory, yes, it's good that we may leave our work for a little while without losing employment, but in practice, no... I may be looked down upon by other teachers as 'not strong enough' to survive the challenges that most teachers go through anyway...-most men would probably feel the same way in this business [teaching at public schools]...If taking administrative leave, oh I'm sure I would be labelled as a trouble maker, a burden on other teachers, defeated, a loser, and so on. (Tsuruta)

Aoki, a female middle school teacher aged 58, also delved into her thoughts when asked about on seeking institutional support. She noted:

At my age and career stage, I would certainly feel very hesitant to do so [to take sick leave] in the eyes of younger teachers at my school. I have to stand as a reliable, stable, and capable senior teacher who knows how to handle all the work-related challenges...Confessing to workplace colleagues that I am depressed or burned out means I admit that I am weak...All in all I do feel that this whole trend ['open school'] has institutionally generated factors of burnout, but we all have to deal with that on our own... This won't change any time soon, and this thought really depressed me. (Aoki)

However, what implications do stress and burnout have on teacher career decisions? Under TMBE, school teachers reach mandatory retirement age at 60. Upon reaching this age, teachers may request reemployment often up to age 65. Five out of the eleven teacher interviewees noted, however, that, typically, post-mandatory retirement teachers work on a part-time basis, at a significantly lower salary than what they received shortly before mandatory retirement age. Moreover, some of those teachers are relocated to schools that are undesirable work settings due to poor educational environments and negative reputations among the surrounding communities, and where it is usually very challenging to develop positive relationships with parents.

Amongst our interviewees, working beyond retirement age was not popular as it was considered to lead to dead end jobs. Kato, a female high school teacher aged 57, elaborated on her thoughts as follows:

Why not continue teaching? This whole overwhelming exhaustion is simply unbearable...Things have changed dramatically since I started my career as a school teacher... I love my career, but I hate the way in which the teaching career has been reshaped in society today... This job is no longer about teaching, educating, and mentoring children, which I love to do. Today it's just about how to avoid getting in trouble with parents, mass media, other colleagues, pupils... it's not an option for me to ask for continuation (of employment until age 65), Who wants to do it? I can't get burnout – I would like to leave my career while I'm still sane...It would be best for me to just stop teaching, heal myself from all the [mental] injuries, and move on to the next stage of my life. (Kato)

Kusuda, another female middle school teacher aged 57, had only three years left before reaching the current mandatory retirement age. In response to her career prospects beyond mandatory retirement, she stated:

Teachers are teachers, wherever we go...this is how we have been moulded, this is who we are, our self-identity. We aren't just instructors of technical subjects. We are mentors of the young...It's very hard to change career lines. So, not many options are left for us [after reaching mandatory retirement]. So, at age 60, we wrap up our career. This is the end of our working lives...that's it. (Kusuda)

Conclusions

The analysis of the German and Japanese stakeholder and biographical interviews has shown that (mental) ill health is a common factor in teachers' careers in later life. This was evident in representative School Authority statistics as well as in the non-representative biographical accounts of the teachers interviewed. As a consequence, ill health, and the prospect thereof, affects teachers' perceptions about their envisioned career paths in later life similarly across Germany and Japan. The two School Authorities were also aware of challenges associated with ill health, and had implemented policies to prevent and/or deal with ill-health cases. Nevertheless, prevention measures do not seem to have the desired effect. However, actively asking for support in managing stress had outcomes. For some teachers, like Sabine, this outcome was positive, while it was rather negative in Edda's case. While the qualitative interview data used cannot be generalised across the entire cohort of teachers in this age group and School Authority, it provides an indication of trends and individual perceptions regarding employment and ill-health.

Even though most teachers were affected by ill health, the 'options' available to teachers and reactions varied across countries, not least because of the available range of responses available to HR managers in the national education systems chosen for comparison here. As we have seen, the options open to HR managers in the public sector are largely bound by the government-sponsored institutional contexts within which they must work. In Germany, it seems as if there is a greater variance of options and, by extension, career outcomes available to older employees than in Japan. This variance is mainly based on support by the school-level management team as well as on individual financial means to afford part-time work and/or an early labour market exit. The contrast between Sabine's and Edda's experiences indicates that personal relationships with one's immediate line manager are indispensable in the interplay of (ill) health and employment. In fact, this seems to be what distinguishes Sabine's experience from the others rather than the institutional support. The examples of Heide and Hilde show that a lack of support – actual or perceived – will lead to negative outcomes for the school: for example, 'losing' Heide, who retired early on a self-financed basis, and 'losing' Hilde, who decided to reduce her work commitment in order to cope with work demand. All four examples show how (a perceived) (lack of) support influences employment careers and career expectations of teachers. While Sabine is happily and healthily able to do her job, Edda, Heide and Hilde either left employment altogether or 'try to survive' despite the continued existence of occupational stress factors.

By direct comparison to their counterparts in Germany, school teachers as state-regulated employees in Japan appear to have fewer options. The employment system is geared towards full-time employment – a residual feature of Japanese

employment systems generally. The social image of teachers prevent them from actively scaling down or reducing stress by means of part-time work or working to rule up until age 60. As mentioned by the Japanese teachers interviewed for this study, the likelihood of leaving the teaching force at the age of sixty – to date (2015), the mandatory retirement age for teachers in Japan – is very high, as narrated by Kato and Kusuda. This is because mandatory retirement appears to offer the only feasible option Japanese teachers have in order to reduce stress and to leave employment while they (ideally) are still physically healthy and ‘sane’. It is noteworthy that the public image of teachers – and of senior teachers in particular – contributes towards preventing many teachers from actively utilising some institutional support, including sick leave, as mentioned by Tsuruta and Aoki, and as discussed elsewhere by (for example) Gordon (2005). Nonetheless, in direct comparison to their German peers, this perception among older Japanese employees appears to hinder their ability to use human agency in making active decisions in their late employment careers, even though they feel that *‘we all have to deal with that [ill-health] on our own’* (Aoki).

Even though workplace accommodation is considered an effective means to counter negative effects of ill health upon employment outcomes, especially in later life (cf. Nevala et al., 2015), and even though the notion that social support from (for example) supervisors might help counter burnout among teachers has already been discussed for some time (cf. Russell, Altmaier, & Van Velzen, 1987), the accommodation arrangements provided by the two School Authorities under investigation seem neither effective to deal with the prevention of ill-health nor able to deal with the actual occurrence of ill-health. This is firstly because insufficient financial resources seem to be assigned to such measures, as seen in the German case. Secondly, it is because public images (or social stigmata) appear to prevent teachers from asking for institutional or HR supervisor support, as seen in Japan). Social stigmata also played a role in Germany, and especially in the relationship with immediate supervisors who might or might not support teachers in times of ill health, as seen in the cases of Sabine and Edda.

In summary, workplace accommodation existed to some (homoeopathic) extent in both School Authorities but did not show the desired effect. While only one out of four German teachers was productively kept in employment, all Japanese teachers had to stay but were gladly expecting to retire at age 60. The School Authorities were therefore not able to extend these individuals’ working lives in line with actual national policies (Flynn et al., 2014, Schröder, Muller-Camen, & Flynn, 2014) and international policy recommendations (Walker & Maltby, 2012; OECD, 2006). It remains to be seen whether and how both School Authorities change their approaches and workplace accommodation arrangements when national retirement ages are starting to increase, in line with national responses to the demographic challenge. One recommendation, based on our findings, is to enable school management and teachers to adapt workloads according to levels that are manageable for the individual. While this might enhance that individual’s ability to extend their working life, current trends in how teachers are managed, including work intensification and

increases in working time (as seen in the German case), however, indicate that public policy is currently going into the opposite direction.

Limitations and implications for future research

The analysis delivered in this study has some limitations. First, as a case study drawing on data from a population surveyed through convenience sampling it lacks representation across the entire population, inherent in qualitative research generally and in case study-based research specifically. Secondly, the study did not take into account the role of teachers' private environments and support given by, for example, spouses. This is even though the study highlighted the role of personal financial circumstances and its effects on early retirement decisions in Germany (the cases of Heide and Hilde). Also, the analysis presented here does not compare the accounts of older teachers with those of younger colleagues aged below fifty.

Thus, future researchers in this field might consider the value of examining whether teachers in different age groups have different perspectives regarding ill health, perceived and actual support received as well as intended career outcomes. It would also be interesting to compare the support given to teachers with ill-health with the support provided for teachers returning from maternity/paternity leave, especially with regard to differences in how positive and negative stigmata influence the type and level of support. Furthermore, the perspective of school management staff will be important in discussing actual support given to teachers as well as options for school-level support in relation to official School Authority policies. These and related questions remain to be investigated in future research.

References

- Baldrige, D. C., & Swift, M. L. (2013). Withholding requests for disability accommodation: The role of individual differences and disability attributes. *Journal of Management*, *39*, 743-762.
- Bauer, J., Unterbrink, T., Hack, A., Pfeifer, R., Buhlgrieffhaber, V., Müller, U., Wesche, H., Frommhold, M., Seibt, R., Scheuch, K., & Wirsching, M. (2007). Working conditions, adverse events and mental health problems in a sample of 949 German teachers. *International Archives of Occupational and Environmental Health*, *80*, 442-449.
- Bogner, A., Littig, B., & Menz, W. (Eds.) (2005). *Das Experteninterview: Theorie, Methode, Anwendung*. Wiesbaden: VS Verlag für Sozialwissenschaften.
- Bonorden, V. (2009). *Personalbericht 2009 der Freien und Hansestadt Hamburg: Personalstrukturbericht*. Hamburg: Senat der Freien und Hansestadt Hamburg.
- Bowers, T. (2001). Teacher absenteeism and ill health retirement: A review. *Cambridge Journal of Education*, *31*, 135-157.
- Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, *3*, 77-101.
- Colella, A. (2001). Coworker distributive fairness judgments of the workplace accommodation of employees with disabilities. *The Academy of Management Review*, *26*, 100-116.
- Cortina, K. S., Leschinsky, A., Baumert, J., Mayer, K.-U., & Trommer, L. (Eds.) (2008). *Das Bildungswesen in der Bundesrepublik Deutschland. Strukturen und Entwicklungen im Überblick*. Reinbek: Rowohlt.
- Flick, U. (2009). *An introduction to qualitative research*, London, Sage.
- Florey, A. T., & Harrison, D. A. 2000. Responses to informal accommodation requests from employees with disabilities: Multistudy evidence on willingness to comply. *The Academy of Management Journal*, *43*, 224-233.

- Flynn, M., Schröder, H., Higo, M., & Yamada, A. (2014). Government as institutional entrepreneur: Extending working life in the UK and Japan. *Journal of Social Policy, 43*, 535–553.
- Franche, R.-L., Baril, R., Shaw, W., Nicholas, M., & Loisel, P. (2005). Workplace-based return-to-work interventions: optimizing the role of stakeholders in implementation and research. *Journal of Occupational Rehabilitation, 15*, 525–542.
- Freude, G., Seibt, R., Pech, E., & Ullsperger, P. (2005). Assessment of work ability and vitality – a study of teachers of different age groups. *International Congress Series, 1280*, 270–274.
- Goddard, R., & Goddard, M. (2006). Beginning teacher burnout in Queensland schools: Associations with serious intentions to leave. *The Australian Educational Researcher, 33*, 61–75.
- Goetz, K., Loew, T., Hornung, R., Cojocar, L., Lahmann, C., & Tritt, K. (2013). Primary prevention programme for burnout-endangered teachers: Follow-up effectiveness of a combined group and individual intervention of AFA breathing therapy. *Evidence-Based Complementary and Alternative Medicine, 1*–8.
- Gordon, J. A. (2005). The crumbling pedestal: Changing images of Japanese teachers. *Journal of Teacher Education, 56*, 459–470.
- Griva, K., & Joeke, K. (2003). UK teachers under stress: Can we predict wellness on the basis of characteristics of the teaching job? *Psychology and Health, 18*, 457–471.
- Hakanen, J. J., Bakker, A. B., & Schaufelli, W. B. (2006). Burnout and work engagement among teachers. *Journal of School Psychology, 43*, 495–513.
- Hofäcker, D., Schröder, H., Li, Y., & Flynn, M. (2016). Trends and determinants of work-retirement transitions under changing institutional conditions: Germany, England and Japan compared. *Journal of Social Policy, 45*, 39–64.
- Honkonen, T., Ahola, K., Pertovaara, M., Isometsä, E., Kalimo, R., Nykyri, E., Aromaa, A., & Lönnqvist, J. (2006). The association between burnout and physical illness in the general population – results from the Finnish Health 2000 Study. *Journal of Psychosomatic Research, 61*, 59–66.
- Hughes, R. E. (2001). Deciding to leave but staying: Teacher burnout, precursors and turnover. *International Journal of Human Resource Management, 12*, 288–298.
- Inoue, K., Tani, H., Kauta, H., Masaki, M., Fukunaga, T., & Okazaki, Y. (2007). Significant correlation of psychiatric disorders with leave of absence among teachers in Japan. *Psychiatry and clinical neurosciences, 61*, 334–334.
- Kelchtermans, G. (1994). Biographical methods in the study of teachers' professional development. In I. Carlgren, G. Handal & S. Vaage (Eds.), *Teachers' minds and actions: Research on teachers' thinking and practice* (pp. 93–108). London: The Falmer Press.
- Kelchtermans, G., & Ballet, K. (2002). The micropolitics of teacher induction. A narrative-biographical study on teacher socialisation. *Teaching and Teacher Education, 18*, 105–120.
- Keyes, C. L. M. (2002). The mental health continuum: From languishing to flourishing in life. *Journal of Health and Social Behavior, 43*, 207–222.
- Kieschke, U., & Schaarschmidt, U. (2008). Professional commitment and health among teachers in Germany: A typological approach. *Learning and Instruction, 18*, 429–437.
- Klemm, K. (2011). Charakteristika und Rahmenbedingungen des Lehrerberufs. In E. Terhart, H. Bennewitz & M. Rothland (Eds.), *Handbuch der Forschung zum Lehrerberuf* (pp.116–121). Münster: Waxmann.
- Kudomi, Y. (1999). Teachers facing the confusion and conflicts in today's Japan. *Hitotsubashi Journal of Social Studies, 31*, 69–83.
- Lysaght, R., Fabrigar, L., Larmour-Trode, S., Stewart, J., & Friesen, M. (2012). Measuring workplace social support for workers with disability. *Journal of Occupational Rehabilitation, 22*, 376–386.
- Maslach, C., Schaufeli, W. B., & Leiter, M. P. (2001). Job burnout. *Annual Review of Psychology, 52*, 397–422.
- MEXT (2014). *Human resource administration for public school teachers: 2012 survey report*. Tokyo, Nikkei Publisher.

- Muller-Camen, M., Croucher, R., Flynn, M., & Schröder, H. (2011). National institutions and employers' age management practices in Britain and Germany: Path dependence' and option exploration. *Human Relations, 64*, 507-530.
- Nevala, N., Pehkonen, I., Koskela, I., Ruusuvuori, J., & Anttila, H. (2015). Workplace accommodation among persons with disabilities: A systematic review of its effectiveness and barriers or facilitators. *Journal of Occupational Rehabilitation, 25*, 432-448.
- OECD (2004). *Ageing and employment policies: Japan*. Paris, OECD.
- OECD (2005). Teachers matter – Attracting, developing and retaining effective teachers. *Education and Training Policy*. Paris: OECD.
- OECD (2006). *Ageing and employment policies: Live longer, work longer*. Paris, OECD.
- OECD (2013). *Trends shaping education 2013*. Paris, OECD.
- Peterson, U., Demerouti, E., Bergström, G., Samuelsson, M., Åsberg, M., & Nygren, Å. (2008). Burnout and physical and mental health among Swedish healthcare workers. *Journal of Advanced Nursing, 62*, 84-95.
- Roberts, B. (2002). *Biographical research*. Maidenhead, Open University Press.
- Roy, N., Merrill, R. M., Thibeault, S., Gray, S. D., & Smith, E. M. (2004). Voice disorders in teachers and the general Population. Effects on work performance, attendance, and future career choices. *Journal of Speech, Language, and Hearing Research, 47*, 542-551.
- Russell, D. W., Altmaier, E., & Van Velzen, D. (1987). Job-related stress, social support, and burnout among classroom teachers. *Journal of Applied Psychology, 72*, 269-274.
- Santavirta, N., Solovieva, S., & Theorell, T. (2007). The association between job strain and emotional exhaustion in a cohort of 1,028 Finnish teachers. *British Journal of Educational Psychology, 77*, 213-228.
- Schröder, H., Muller-Camen, M., & Flynn, M. (2014). The management of an ageing workforce: organisational policies in Germany and Britain. *Human Resource Management Journal, 24*, 394-409.
- Skaalvik, E. M., & Skaalvik, S. (2009). Does school context matter? Relations with teacher burnout and job satisfaction. *Teaching and Teacher Education, 25*, 518-524.
- Skaalvik, E. M., & Skaalvik, S. (2011). Teacher job satisfaction and motivation to leave the teaching profession: Relations with school context, feeling of belonging, and emotional exhaustion. *Teaching and Teacher Education, 27*, 1029-1038.
- Stake, R. E. (2006). *Multiple case study analysis*. New York, The Guildford Press.
- Stroobants, V. (2005). Stories about learning in narrative biographical research. *International Journal of Qualitative Studies in Education (QSE), 18*, 47-61.
- Travers, C. J., & Cooper, C. L. (1993). Mental health, job satisfaction and occupational stress among UK teachers. *Work & Stress, 7*, 203-219.
- Tsuboi, H., Takeuchi, K., Watanabe, M., Hori, R., & Kobayashi, F. (2002). Psychosocial factors related to low back pain among school personnel in Nagoya, Japan. *Industrial Health, 40*, 266-271.
- Tye-Murray, N., Spry, J. L., & Mauzé, E. (2009). Professionals with hearing loss: Maintaining that competitive edge. *Ear and Hearing, 30*, 475-484.
- Van Droogenbroeck, F., Spruyt, B., & Vanroelen, C. (2014). Burnout among senior teachers: Investigating the role of workload and interpersonal relationships at work. *Teaching and Teacher Education, 43*, 99-109.
- Van Rijn, R. M., Robroek, S. J. W., Brouwer, S., & Burdorf, A. (2014). Influence of poor health on exit from paid employment: a systematic review. *Occupational and Environmental Medicine, 71*, 295-301.
- Walker, A., & Maltby, T. (2012). Active ageing: A strategic policy solution to demographic ageing in the European Union. *International Journal of Social Welfare, 21*, S117-S130.
- Weber, A. (2004). Krankheitsbedingte Frühpensionierungen von Lehrkräften. In A. Hillert & E. Schmitz (Eds.), *Psychosomatische Erkrankungen bei Lehrerinnen und Lehrern*. Stuttgart: Schattauer.
- Yamashita, J., & Okada, S. (2011). Parental attitudes toward public school education in Tokyo. *Social Science Japan Journal, 14*, 39-54.

- Yang, S.-B., & Lee, K.-H. (2009). Linking empowerment and job enrichment to turnover intention: The influence of job satisfaction. *International Review of Public Administration, 14*, 13-23.
- Yin, R. K. (2009). *Case study research: Design and methods*. Thousand Oaks, Sage.
- Yorimitsu, A., Houghton, S., & Taylor, M. (2014). Operating at the margins while seeking a space in the heart: the daily teaching reality of Japanese high school teachers experiencing workplace stress/anxiety. *Asia Pacific Education Review, 15*, 443-457.