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# Challenges and Prospects for Retired Nursing Managers in Their Second Careers in Japan: Through the Narratives of Nursing Managers Narumi Ooshige

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#### Abstract

**Background:** In many countries, including Japan, the number of individuals with chronic and complex illnesses related to aging and lifestyle is increasing. Consequently, there is a greater demand for healthcare services. In an aging society, it is important to improve career awareness among nursing managers with strong nursing practice skills. This study aimed to identify the challenges and prospects of post-retirement nursing managers in their second careers.

**Methods:** This qualitative descriptive study aimed to describe the phenomenon and process by which nursing managers transition to their second careers. Nineteen nursing managers who were re-employed after retirement at facilities in Japan and cooperated with the study through the kinship method were included. Some of them retired early, before their retirement age. Semi-structured interviews lasting approximately one hour were conducted in October 2023. As attributes of the research participants, we asked about their age, years of experience in their last position, the number of hospital beds in their previous position, the hopes and thoughts they had about their second career, and their current thoughts after transitioning to their second career. The Nagasaki Prefectural University General Ethics Review Committee approved this study (approval number: r5021).

**Results:** The 19 subjects in the study were all female, with an average age of 62.7 (60-67) years; 9 were nurse managers, 3 were deputy head nurses, and 7 were directors of nursing; the average duration of their last position was 8.8 years (3 to 20 years). Directors of nursing Thoughts on Working in a Second Career; participant reported "I was invited by my boss, the head of the nursing department," and stated that they chose the same work environment as before. Thoughts after a second career; a case of transitioning from nurse manager to university faculty member said, "When I taught students, I was able to communicate how I used theories and consent.

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#### Background

In many countries, including Japan, the number of individuals with chronic and complex illnesses related to aging and lifestyle is increasing. Consequently, there is a greater demand for healthcare services. Simultaneously, an increased nursing workload combined with the absence of experienced nursing personnel and limited opportunities for guidance and mentorship may lead to a high turnover rate among young nurses [1]. Therefore, it is essential to develop ways to enhance the ability of nursing professionals around the retirement age to continue working safely and healthily. In an aging society, it is important to improve career awareness among nursing managers with strong nursing practice skills.

The Japan Nurses Association (JNA) published guidelines on the working styles and working environment of nursing personnel who are employed before and after retirement (hereafter referred to as "platinum nurses") [2]. Nursing centers operated by prefectural nursing associations work on measures to secure human resources, such as support for returning to work and the prevention/promotion of turnover and retention. Additionally, training programs for platinum nurses are being held. However, although there are reports on training results, it is unclear how training has led to re-employment.

Previous studies on nursing careers measured the career development of nursing directors, with gratitude at the core, and the career maturity of nurses, which was higher for those with older age and years of nursing experience, and for those with role models [3,4]. An exploratory review of literature on nurses' post-retirement employment intentions and recruitment strategies abroad identified

factors that promote the intention to continue working as a nurse after retirement, including the absence of shift work, reduced workload [5], job sharing or job rotation, short-term contract work, financial incentives, a supportive workplace environment, holding a degree, and opposition to attitudes that hinder post-retirement employment [6,7]. In the United States, nurses are adopting diverse strategies, including attractive re-employment policies (financial, status-related, flexible work schedules, etc.), to bring retired healthcare workers back to the workplace [8]. Thus, although there are scattered studies on secondary careers and other aspects of nursing careers, there are no studies on the secondary careers of post-retirement nursing managers.

Therefore, this study aimed to identify the challenges and prospects of post-retirement nursing managers in their second careers.

#### Methods

#### Research design

This qualitative descriptive study aimed to describe the phenomenon and process by which nursing managers transition to their second careers.

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#### Research participants

Nineteen nursing managers who were re-employed after retirement at facilities in northern Kyushu and cooperated with the study through the kinship method were included. Some of them retired early, before their retirement age.

#### Data collection method

Semi-structured interviews lasting approximately one hour were conducted in October 2023. One interview was conducted per subject in a private room, with only the subject and researcher present. The interviews were recorded on an IC recorder with prior consent from the research subjects. As attributes of the research participants, we asked about their age, years of experience in their last position, the number of hospital beds in their previous position, the hopes and thoughts they had about their second career, and their current thoughts after transitioning to their second career. An interview guide was developed in accordance with the research objectives, and the participants were asked to speak freely about their thoughts and feelings.

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#### Data analysis method

Verbatim transcripts were prepared from the interview data. From the verbatim transcripts, we extracted content related to the transition period to a second career; the narratives themselves were summarized by a nurse manager and a deputy nurse manager to candidly describe the respondents' thoughts after the career transition. Rigor was ensured by a qualitative research expert while being supervised.

#### **Ethical considerations**

The Nagasaki Prefectural University General Ethics Review Committee approved this study (approval number: r5021). In addition, we explained verbally and in writing the publication of the research results and obtained consent to participate in the study by signature. The results of the study were explained orally in writing and consent for participation in the study was obtained.

#### Methods

#### Participant characteristics

The 19 subjects in the study were all female, with an average age of 62.7 (60-67) years; 9 were head nurses, 3 were deputy head nurses, and 7 were directors of nursing; the average duration of their last position was 8.8 years (3 to 20 years). The number of beds in their previous jobs ranged from approximately 100 to 800, with 8 coming from

small-to-medium-sized hospitals with 100 to 499 beds and 11 from large hospitals with 500 or more beds. The job titles of the respondents after changing their jobs were as follows: 3 directors of nursing, 1 head nurse, 2 facility managers, 4 university faculty members, 6 nurses, 1 staff member, and 2 school nurses. The average interview duration was 41 min. Note that two of them were rehired at the same workplace.

#### Thoughts on working in a second career

One respondent, who was now a head nurse said, "I did not realize how the world perceives 60 year olds until I really started job hunting. About a year before I retired, my supervisor [director of nursing] said, 'What are you going to do next year?' I was told something like that. I was told what I would be doing next year at the same hospital...[that] it would be fine to continue. I'm not confident about providing direct care to patients. The previous director of nursing had also invited me. I chose (rehiring) because I thought it would be good to be in the place I was used to. I chose a department completely different from the one I was used to." Another participant reported "I was invited by my boss, the head of the nursing department," and stated that they chose the same work environment as before.

One of the deputy directors of nursing said, "I had no expectations for a second career. They just asked me to come. I thought I wanted a more relaxed work schedule. I knew that after my new job, I would be asked to reduce my hours." She wanted a work style different from her previous job.

One of the nursing directors said, "If I were to work, I could take care of my mother. I can work three or four days a week and take care of my family. It was like I was following my destiny. I don't want to be a detriment to the manager after me by staying on as a rehire, because it would be better for him to be able to exercise his own abilities. The company also believed that it would only be detrimental to make it a requirement to be able to care for one's parents and for the head of the nursing department to stay on as head of the nursing department himself."

## Thoughts After Taking up a Second Career (by Previous Position and Pattern of Job Change)

#### Head nurse

From head nurse to nurse:

"Quit my job. If I can make a living. I want to quit anytime. In my current job. I do not feel that it's worth living for or that it's worthwhile." "I think it is a little harder than the post-retirement job I had in mind. I am satisfied with my current job. It is worthwhile. I must think about how to take care of my own position. I did not have any idea what my role should be, and I was told that I could say what I had experienced as a head nurse. I was looking for a different kind of workplace, not a hospital."

From nurse manager to a university faculty member:

"I thought I was a child, but now I think I'm more mature than an adult. When I go to a training site, I see students trying their best to respond to the nurses, and when I ask them later what they thought of it, I feel that it was a nice response. I am happy to hear that the students found the lecture easy to understand and interesting because they could connect what they had experienced with the class content. I think it was good."

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From head nurse to head nurse of a private hospital:

"I would look up places close to my home to see where they were located. If I work in a hospital, how many beds do I have? Is it acute or chronic care? Until now there have been a lot of public hospitals, so private like that. So I have been prepared for anything."

From nurse manager to nursing director of a private hospital:

"It's not all good things at all, so maybe 60 percent of me wishes I hadn't done it. However, I do not know if I would have come here if I had looked elsewhere."

#### Deputy nursing director

From deputy director of nursing to administrator of a nursing training center:

"One good thing is that I am in charge of lectures, training, and job placement support in various centers here, so I enjoy my job very much because it gives me a sense of fulfillment, responsibility, and accomplishment. One of the reasons is that I have been working in a large organization until now, and here we have eight individuals, including half-day placements, so I wondered how it would be to come to a small organization, but for me, the human relations, or working environment, is very good."

From deputy certified nurse specialist (CNS) to nurse:

"I want to do something that will stay in my heart, rather than just caring about money. I think that this is very important. Because I am a nurse. I want to be a nurse for the rest of my life. For this reason, I do not require more management. This is why I want each nurse to watch and grow. I believe that this role must be taken up educationally. I do not want to think with the staff, or worry with them, or say this is good, but I think that part."

From deputy director of nursing to administrative staff:

"I had the chance to experience how personnel decisions were made because I talked about personnel matters with senior administrative staff members. I wondered how personnel decisions and transfers are made, but I now understand how they are decided."

From director of nursing to staff (nursing training center)

"I really enjoy being in contact with students about become managers. I like talking to young people. On the contrary, I enjoy it, and I think how satisfying it is to see that those nurses grow after taking the first and second courses. But hard work is hard work. It's fun. You cannot do this unless it is fun. A burden is a burden."

From director of nursing to group general manager of a private facility:

"The head of the nursing department of the hospital is separate, isn't he? Because it is a private facility, as we work together in various other places, we need someone in this position to make use of his/her network of contacts. Therefore, I think I can make the best use of such things as human resource management, so I provide support to the nursing department for organizational management at each facility, serve as a point of contact for department heads to consult with, and train nursing managers in human resource development. Therefore, a director in a hospital is aware of the community as a whole, of course, but also of what is going on in the world."

From director of nursing to director of nursing at a private facility:

I enjoy it. I've been working until 9:00 p.m. or 10:00 p.m. ever since I became a director of nursing or a head nurse. I am a workaholic, so I have continued to do so, and I am still doing so."

From director of nursing to director of nursing at a public facility:

"There was a lot of work to be done here, because the place was amazing (i.e., the nursing system was underdeveloped). When I came here, I thought that my previous experiences would be useful. Organizing, or rather running, an organization, or organizing or managing a team was not being done here at all, so I had to start running the nursing director's office first."

From director of nursing to school nurse:

'The way I work now is that I'm contracted for about a year, so for example, I'm replacing maternity leave or I'm replacing maternity leave. Also, last year, when I was there for two months, I had to go in as emergency support because I could not find a nurse, and after I was there for two months, they found someone else, so I was replaced."

From director of nursing to university faculty member:

"I wondered if I was cut out for it, but I was told by others that I was definitely suited for teaching. I was a bit confused about how to work as a university faculty member because my large university just happened to be dealing with COVID-19."

"I was also puzzled about how to work as a university teacher. Because of COVID-19, I decided to give up (overseas assistance), which is the wrong word, but I was convinced that I could do it. However, I am still 65 years old, and I think I was fortunate to have been employed in my current position."

#### Discussion

The results showed that nursing managers after retirement had highly individualized and non-uniform characteristics. Regarding their thoughts on working in a second career, the head nurse accepted an offer from their superior, the nursing director, and chose to continue working in the same environment.

The deputy nursing director stated, "I had hoped to work shorter hours after changing jobs," indicating a desire for a different work style compared to their previous position. The nursing director believed that remaining in the same facility as the nursing director would only be detrimental.

A common factor among nursing managers was that they had chosen to prioritize the ability to care for their parents as a selection criterion. Nurses who continue to work and provide care are in their 40s and 50s, work shifts, use long-term care insurance services, and care for their parents. Issues related to supporting the balance between work and caregiving include improving the workplace environment and enhancing social resources [9]. However, these issues continue even after retirement.

Considerations regarding the second career of nursing managers include cases in which head nurses were demoted to nurses. In these cases, nursing managers understood their position as rehired employees and accepted the new roles they gained by resigning from their previous positions [10].

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In cases where a nurse manager was transferred to the position of nursing director at a private company, the manager was prepared to respond to any situation that might arise, and was therefore mentally prepared to accept the new circumstances. In the case of those who transitioned from deputy nursing manager to center manager, even when moving from a large organization to a smaller one, they felt that the relationships were good and the working environment was favorable. In this way, regardless of the size of the organization, good interpersonal relationships were a source of motivation for employees [11,12].

When the position of nursing director was transferred to another facility, the individual continued to utilize their previous experience in organizational management despite the change in facility. Even in completely different professions, individuals made proactive choices based on their own preferences.

In cases of job transitions during the COVID-19 pandemic, individuals had to give up their original aspirations and make choices out of resignation and acceptance. All of the nursing director's career changes involved starting from scratch at facilities that were completely different from his previous workplace.

Going forward, the retention of senior nurses, including nursing managers, in their new workplaces after changing jobs will become a challenge. According to a literature review by Montayre [13], while there are programs aimed at improving the retention of senior nurses, such as flexible work arrangements, reduced working hours, and interventions promoting exercise and lifestyle changes, no programs specifically targeting second careers were identified.

Therefore, the development of programs focused on second career development is now an urgent priority.

### Conclusion

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- 1. Regarding one of the nursing managers' thoughts on how to work in a second career, the head nurse chose to be rehired at the same workplace after being invited by a superior and did not actively desire a different environment from the previous one. In contrast, the deputy nursing director wanted a change. The nursing director wanted those who needed care to work as much as they could, and none of them chose to remain in the same workplace, considering their junior colleagues.
- 2. Looking at the patterns of job change in terms of feelings after taking a second career, those who changed roles from head nurse to nurse felt that the new role was a setback and wanted to quit at any time, whereas those who were told that they could also mention their experience as head nurses in their new workplace felt that they enjoyed their work.

Those who changed from head nurse to university faculty member became aware of the potential abilities of students through their interactions with them. They also felt that their nursing experience was being put to good use in their university jobs. The deputy nursing director turned training center administrator felt a sense of accomplishment in planning and organizing lectures and training. The pattern of change from a nursing director to a university faculty member was challenging as the latter is a completely different industry. This was influenced by the COVID-19 pandemic.

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#### **Competing Interests**

The authors declare that they have no competing interests.

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