

A Close Personal Friend - written April 2008

A close friend of mine has had a varied medical life. Laboratory researcher, university lecturer, epidemiologist and for the second half of his time in The National Health Service, a clinician trying to manage illness and rehabilitation in older people. Many older people, he tells me, are fit, whilst others simply flirt with frailty. Stands to reason if they have survived thus far. Importantly, he'd seen it as a window on his own future.

Around the age of fifty, life and work events overwhelmed him and a career break seemed a sensible way forward. He returned to university and, for the next two years, studied 'Behavioural Sciences', completing a masters dissertation on the forces that encourage and inhibit mid-life change.

Unsurprisingly, he discovered that change tends to be sudden, brought on by events that are difficult to control, such as illness and redundancy, and the main impact is on the job. Very few plan for change apparently.

I have often wondered about doctors' needs for transformation with age. We are not as physically capable in our fifties and sixties. Skills based on strength, stamina and eyesight for instance cannot go on forever. Long operating lists and demanding emergency duties are no longer a welcome challenge. Yet the experience and intellect are still there.

Transformation, cashing in on lifelong intellectual property and networks, needs advance thought, before people get too tired to bother and simply settle for seeing out their time to the pension. My friend catalogued some of the forces acting on this process. A passionate interest, a personal skill, constraining rules, tiring paperwork and adapting to incessant change would be examples of influences that might push people into a move. On the other hand, yet more rules bound up in the fear of relative poverty pull them back into staying as they are.

My friend describes careers as the spokes of a wheel. It's much easier to transform to a closely related activity, an adjacent spoke, rather than jump across to an unfamiliar part of the wheel. Doctors adapt successfully to part-time work in out-patients, they make good teachers and some enter management, but very few become commercial airline pilots.

The Government want men and women on benefits back in work. What of those who are still clocking-in but not actually working? What about a strategy for transformation instead of planning for retirement?

My friend concedes it may not apply to everyone. Manual workers can struggle. Crippling illness can be a major barrier. And there are those with underdeveloped personal resources where the problem and solution sit firmly in someone else's lap. These are challenging barriers, but not insurmountable.

He also concedes, if people have enough income to get by, they may transform out of the workforce altogether, doing voluntary work, writing, painting or whatever they are passionate about. It's still work after all.

What did my friend do? He became an Occupational Health Physician.