

GREEN PAPER

Career Transition Points:

Exploring the challenges and opportunities of career transitions and mental health and wellbeing

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Final Draft

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Executive summary

This green paper sets out the evidence for the mental health and wellbeing impacts of a range of common career transition points across the lifespan, including:

1. entering the workforce and young workers transitions
2. transitions to leadership and management
3. transitions associated with family and caring responsibilities
4. redundancy and career change transitions (both involuntary and self-directed)
5. health-related changes
6. relocation transitions
7. career shocks and unanticipated events (e.g., bereavement or divorce)
8. late career and transitions to retirement.

Good work is important for physical and mental health and wellbeing. However, when individuals experience a change or transition, whether within work roles or in their lives outside paid work, this transition can disrupt their sense of normality, and potentially lead to deterioration in their mental health and wellbeing. Such disruption to their role, relationships, routines and assumptions about the world requires a period of adaptation.

Work and life transitions are a natural and normal part of the career journey, and must be actively considered in organisational planning. While organisations and individuals may not have control over the timing or nature of some transitions, most are still likely to occur in most workplaces. Proactive planning enables organisations to have resources in place for when such transitions arise. This can include providing greater access to information, alongside practical, emotional and social support. Managers and supervisors, as well as workers and colleagues, have critical roles in locally implementing policies and connecting individuals with support.

While this paper draws on the available evidence for recommended strategies, there are significant gaps in the literature, particularly with regard to organisational strategies. Investment in applied research and evaluation that reviews the effectiveness of system-level interventions is a significant area for future work. Additionally, intersectionality is currently poorly reflected in the existing organisational literature regarding transitions. In particular, considering the complexities experienced by individuals with multiple minority identities is important to promote more diverse and equitable organisations, which reflect the Australian population.

The evidence also demonstrates that despite the identified challenges, transitions are a unique opportunity for organisations and managers to proactively support workers and create a mentally healthy workplace, in addition to collegial and peer support, and personal self-care strategies. This paper focuses on organisational-level strategies over individual-level interventions where possible.

Organisational strategies to support workers experiencing all forms of transition include the following:

- **Understand the demographics of your organisation.** Understanding your organisation's unique demographics enables identification of the relevant career transitions for your workforce, for example, transitions linked to age, life stage and family situation.
- **Take a person-centred approach.** Placing the individual at the centre of decisions impacting them ensures they can communicate their needs, establish desired boundaries and make

changes at their own pace. Ask, do not assume. Everyone's experience and personal circumstances are unique.

- **Normalise experiences of change and transition.** We all experience various seasons in our working lives and will undergo at least some of these transitions. Acknowledgement helps workers feel that their experiences are normal, and that they may have a range of responses. It also encourages access to support.
- **Enable flexible work arrangements.** By supporting and maximising opportunities for flexible work arrangements, individuals are empowered to make decisions that are best for them in work and life.
- **Tailor approaches for individuals and teams by local managers or supervisors.** This includes maximising personal autonomy in how to meet work requirements, reviewing the demands of work and ensuring individuals are informed about, and empowered to access, relevant supports.
- **Be inclusive.** Be intentional in organisational practices that include, rather than exclude, team members experiencing changes. For example, avoid meeting times that may be challenging for those with caring roles or health conditions and adopt language that destigmatises changes.
- **Create a learning culture.** Promote and support a learning culture, celebrating learning as an ongoing process, rather than idealising perfection.
- **Provide supportive management.** This includes managing with sensitivity to the different needs of staff, providing clarity in work direction and creating an environment where reasonable work demands are balanced with autonomy and support.
- **Provide a range of supports.** This includes practical, emotional and social support, and access to relevant procedures and processes:
 - **Practical information** can be tailored to individual transitions. This could be presented as a change pack, tip sheets and/or links, and resources to support those navigating change. It is important to ensure resources cater for all staff, including those in operational and office-based roles.
 - **Emotional support** includes access to wellbeing programs, coaching and Employee Assistance Programs (EAPs) from professional providers. It can also include specialist transition support and clear referral pathways for those who are struggling personally. Access to career coaching, training and resources can also help individuals self-manage their own career journeys. However, in some cases, workers are reluctant to access EAPs, potentially due to concerns about limits to confidentiality, or stigma attached to help-seeking, hence a range of other strategies is important.
 - **Social support** offers connection and advice in times of need and helps reframe identity. Peer-support groups can be established in the workplace, (e.g., parent groups, new leadership circles). Mentorship and buddy systems can also be valuable ways to facilitate social support.
 - **Access to relevant procedures and processes** including workplace entitlements for specific transitions should be easy and open. Individuals contemplating change may feel uncomfortable having to announce this to their manager to seek information. They should be able to access information about entitlement and support independently.

Acknowledgements

Thanks to the following experts, who contributed to relevant sections of this document.

- Prof. Nancy Schlossberg and Stephanie Kay, TransitionWorks
- Thea O'Connor, Menopause at Work
- Sabina Read, Psychologist
- Dr Jim Bright, Bright and Associates
- Aimee Jellett and Bibi Kahveci, Seek
- Wendy Jenkins, Ready Resilience
- Shannon Threlfall-Clarke, VTHC
- Grainne O'Loughlin, Karitane
- Andrew Keay, Aged Care Planners
- Mark Leopold, Superfriend
- Lucas Finch, Xero
- Wesley Chapman, PEER
- Dr David Anthony, Mantle.

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Purpose and objectives of this document

Good work is good for us, and the health benefits of good work are well documented. A Consensus Statement on the Health Benefits of Good Work, developed by the Australasian Faculty of Occupational and Environmental Medicine (AFOEM) of the Royal Australasian College of Physicians (RACP), and endorsed by 283 Australian medical, business, union and statutory bodies, states:¹

Good work is engaging, fair, respectful and balances job demand, autonomy and job security. Good work accepts the importance of culture and traditional beliefs. It is characterised by safe and healthy work practices and it strikes a balance between the interests of individuals, employers and society. It requires effective change management, clear and realistic performance indicators, matches the work to the individual and uses transparent productivity metrics.

Additionally, long-term work absence, work disability and unemployment generally have a negative impact on health and wellbeing. As individuals move through their working lives, they can encounter a range of transitions, both personally and professionally. Whether desired or otherwise, such transitions can cause significant disruption to work and present risks to physical and mental health and wellbeing. As noted by the International Labour Organization², investment in transitions is a critical aspect to address the future of work.

Workplaces play an important role in protecting and promoting work–life wellbeing, by acknowledging the issues around the whole person and supporting people to manage work and life demands through both recognised and sometimes hidden transition journeys. Proactively supporting individuals through these career transitions can not only protect and promote people’s mental health and wellbeing, but it can also increase productivity and engagement levels, enrich organisational culture, attract and retain talent and mitigate workplace risk.

This green paper summarises the available evidence on the mental health and wellbeing impacts of common career transition points across the lifespan and potential organisational strategies that can reduce these risks. Where possible, we focused on recent Australian, peer-reviewed evidence about the impacts of these transitions and identified organisational and management level strategies that employers and organisations can implement to support their workers. We also noted relevant gaps in the literature and opportunities for future research.

What are transitions in the workplace?

Before considering individual and specific transitions, it is important to consider what we mean by transitions in the workplace. **Transitions** are events that result in changes or disruptions in an individual’s role, responsibilities, routines and assumptions.³ While **change** relates to external pressures, the event or situation that takes place, transition refers to the internal psychological process that individuals undergo to come to terms with the new situation.⁴ According to Bridges⁵, a transition involves 3 major states: letting go of the old situation and associated knowledge (i.e., current state), moving through an adaptation that involves disorientation and adjustment (i.e., transition state) and launching a new beginning (i.e., future state). Merriam⁶ refers to 4 main types of life transitions, as recognised in this paper:

- **Anticipated events** are planned, normative and expected within cultures and progress in a relatively predictable fashion. Such transitions include joining the workforce, partnering and parenting, and retirement.

- **Unanticipated events** are not normalised within peer groups or associated with a typical age. They can be either positive (e.g., acquiring an unexpected windfall) or negative (e.g., health challenges or bereavement).
- **Non-events related to transitions** are events that were expected but do not occur, and which require changes to one's sense of the likely future (e.g., infertility, lack of promotion).
- **Sleeper transitions** develop gradually, perhaps with imperceptible change, but which culminate in more significant changes (e.g., gradual career shifts or shifts in personal priorities and career interests).

In all cases, changes occur within both an individual and broader context. This includes:

- an individual's appraisal of the transition and their coping strategies
- access to resources and supports to adapt to and reshape identity arising from transition
- the impact of other factors within the individual's immediate and broader circle.

An individual's ability to cope with a transition can depend on many factors, such as socioeconomic status, family and community networks as well as workplace support. To help provide a useful framework to better understand these factors, Schlossberg's Transition theory identifies 4 major sets of factors that can influence a person's ability to cope with a transition: Situation, Self, Support and Strategies, known as the 4 Ss:

- **Situation** refers to the characteristics of the event or non-event.
- **Self** involves personal and demographic characteristics.
- **Support** involves the personal network around the individual.
- **Strategies** involve the individual's existing coping responses.

As workplaces seek to support the many varied career transitions, it is important to consider these factors as well as the organisational strategies discussed above.^{3,7}

Successful adaptation to change involves learning new behaviours and approaches, changing perceptions and expectations, and becoming accustomed to the new state. Typically, this success is influenced by the desirability of the transition, an individual's level of control over the transition, the timeframe or duration of the transition, an individual's level of preparation, and access to relevant resources and support. Some of these factors are individual, and many transitions themselves are outside the control of employers. Nevertheless, workers bring their whole self to the workplace, including experiences of transition. This presents opportunities for organisations to support individuals as they navigate life transitions, promoting and supporting their mental health and wellbeing.

This paper considers 8 common career transitions that can occur across the career lifespan:

1. entering the workforce and young workers transitions
2. transitions to leadership and management
3. transitions associated with family and caring responsibilities
4. redundancy and career change transitions (both involuntary and self-directed)
5. health-related changes
6. relocation transitions
7. career shocks and unanticipated events (e.g., bereavement or divorce)
8. late career and transitions to retirement.

For each transition, this paper summarises what is known about the transition, including who it impacts, the prevalence in Australia (where data is available), and evidence about the potential

impact on individual mental health and wellbeing, as well as information about the impacts on teams and organisations (where data is available). We also focus on the potential evidence-based strategies that employers can use to support workers to address these changes.

General organisational strategies to support transition

While every transition is different and unique and will be addressed in this document, some organisational strategies are broadly recommended for all transitions. Consistent with the *Blueprint for Mentally Healthy Workplaces*⁸, and its key principles to *Protect, Respond and Promote*, organisations implementing the following approaches will promote staff mental health and wellbeing and mitigate risks associated with transition:

- **Understand the demographics of your organisation.** Understanding your organisation's unique demographics enables identification of the relevant career transitions for your workforce, for example, transitions linked to age, life stage and family situation.
- **Take a person-centred approach.** Placing the individual at the centre of decisions impacting them ensures they can communicate their needs, establish desired boundaries and make changes at their own pace. Ask, don't assume. Everyone's experience and personal circumstances are unique.
- **Normalise experiences of change and transition.** We all go through various changes in our working lives, and will experience at least some of the career transitions outlined above. Normalising these experiences as part of the career lifecycle can help remove stigma associated with transition, and help individuals accept the range of responses they may experience. This can also help to facilitate adaptation and encourage support seeking when it is needed.
- **Enable flexible work arrangements.** This empowers individuals to make decisions about how they work. Organisations can endorse a results-oriented, rather than face-time oriented culture, embrace diversity of experiences, design work to maximise boundary control according to personal preferences^{9, 10} and implement systems that support cross-functionality for shared roles and back-ups.
- **Tailor approaches for individuals and teams by local managers or supervisors.** This includes maximising personal autonomy in methods used to meet work requirements, reviewing the demands of work and ensuring individuals are informed about, and empowered to access relevant supports.
- **Be inclusive.** Intentionally designing organisational practices that include, rather than exclude, team members helps to mitigate the risks to mental health and wellbeing that are associated with transition. This could include avoiding meeting times that may be challenging for those with caring roles or health conditions, supporting remote working where possible, and adopting language that destigmatises changes.
- **Build a learning culture.** A learning culture that acknowledges errors and mistakes, and celebrates learning as an ongoing process, rather than idealising perfection, can allow individuals to try out new approaches and roles, and support them to adapt to changes.
- **Provide supportive management.** Managers play a significant role in supporting individuals through change. Supportive management includes managing with sensitivity to the different needs of staff, providing clarity in work direction and creating an environment where reasonable work demands are balanced with autonomy and support.
- **Provide a range of supports.** This includes practical, emotional and social support, and access to relevant procedures and processes:

- **Practical information** can be tailored to individual transitions. This could be presented as a change pack, tip sheets and/or links, and resources to support those navigating change. It is important to ensure resources cater for all staff, including those in operational and office-based roles.
- **Emotional support** includes access to wellbeing programs, coaching and Employee Assistance Programs (EAPs) from professional providers. It can also include specialist transition support and clear referral pathways for those who are struggling personally. Access to career coaching, training and resources can also help individuals self-manage their own career journeys. However, in some cases, workers are reluctant to access EAPs, potentially due to concerns about limits to confidentiality, or stigma attached to help-seeking, hence a range of other strategies is important.
- **Social support** offers connection and advice in times of need and helps reframe identity. Peer-support groups can be established in the workplace, (e.g., parent groups, new leadership circles). Mentorship and buddy systems can also be valuable ways to facilitate social support.
- **Access to relevant procedures and processes** including workplace entitlements for specific transitions should be easy and open. Individuals contemplating change may feel uncomfortable having to announce this to their manager to seek information. They should be able to access information about entitlement and support independently.

1: Entering the workforce and young workers transitions

About this transition

People aged 30 years or younger represent a substantial proportion of Australia's working population.¹¹ These young workers largely fall into 4 different categories, with unique mental health and wellbeing vulnerabilities:

- **Casual 'first job' workers.** These workers are typically employed in casual roles with low workplace influence, often while studying. They may feel little investment in the workplace, seeing it as a source of income and a 'survival job', but not a major focus of their identity.¹² They usually have low workplace power and control, putting them at risk of psychological harm, especially when employment is insecure.^{13, 14}
- **Apprentices and trainees.** These workers have particular vulnerabilities, given the bonded nature of apprenticeships and power disparities in these arrangements.¹⁵ Many report a sense of disposability and poor working conditions, including long hours, physically demanding work, low wages and poor supervision. Those on working visas (e.g., the 417 Working Holiday Visa program) may be even more vulnerable due to power disparities, age and language barriers.¹⁶
- **Graduates and those commencing full time career roles.** As workers move into more permanent and vocationally aligned roles, they can experience both positive emotions of pride and achievement. But they can also experience some distress, feelings of overwhelm and under preparedness.g.,^{17, 18} with increased pressure to perform in their chosen field. Some new workers may feel pressure to take on available roles, even if poorly aligned to their interests and skills¹⁹ or commensurate with their own or others' expectations.
- **Side hustles.** This may include gig type work and entrepreneurial activities that are income-generating work performed alongside full-time jobs. Side hustles are more common as the gig economy provides opportunities for workers to undertake supplementary work, but they can add to workers' overall demands.²⁰

Risks and mental health and wellbeing challenges

Research suggests 15% of young workers under 25 report high levels of psychological distress, with this figure doubling during the COVID-19 pandemic.²¹ Notably, over 61% of young people under 35 years old are worried about their finances, job security and failure to meet their career goals.²² Additionally, early adulthood can be a peak age for onset of many mental disorders—75% of people will experience their first mental illness by age 24.²³

The school-to-work transition has been documented as a critical developmental point for young workers. They are more likely to experience a higher prevalence of job strain and unemployment than older workers.²⁴

Workforce entry can negatively impact a young person's mental health and wellbeing as they experience pressures in their early career journey, such as:

- **Job strain.** For many young people, entering the workforce is a new experience, characterised by a series of short- term, unrelated, demanding, unstable, unsafe, stressful 'survival jobs'.²⁵⁻²⁷ Young workers²⁸ are more likely to experience job strain (i.e., low-control jobs with high physical, emotional and time-related demands of work) and underemployment and insecure work (i.e., casual and temporary employment) than older workers.²⁹⁻³² This may have been further exacerbated by the economic repercussions of COVID-19. Industries with high concentrations of

young workers, such as hospitality, have been disproportionately affected by job losses, reductions in hours and uncertain business futures.³³ Local and international studies consistently find young people are more likely to change jobs than any other age group^{34,35} and are more educated than ever before,³⁶ but are the least employed and most underemployed,³⁷ and transitions to full-time work are taking longer.³⁶

- **Inadequate supervision and training.** Young workers are particularly at risk in the workplace. They lack the skills, knowledge and awareness about workplace health and safety developed from experience in the workforce.³⁸ This is exacerbated by inadequate supervision and training, which Safe Work NSW³⁹ identified as a significant risk factor for occupational illness and injury in young workers.
- **Limited networks.** The increase in hybrid work arrangements is restricting development and maturity of professional networks for many young workers, compared with the incidental training opportunities provided in office environments. This needs to be considered more carefully for early career workers in the new world of work.⁴⁰
- **Competing life pressures.** Many young people are also frequently undergoing other life changes as they move to independence, including relationship formation, graduations, new living arrangements and financial independence from family.⁴¹ These moves to independence may result in distress, and help explain why common mental disorders (such as anxiety and depression) often occur in the first 3 decades of life.^{23,42}
- **Workplace harms.** Compared with older workers, young workers entering the workforce are at a higher risk of workplace-related harm.⁴³⁻⁴⁶ This may be due to limited experience, awareness⁴⁶ and confidence recognising and reporting both physical and psychological hazards,⁴⁷ and feeling stressed, tired and overworked.⁴⁷
- **Workplace bullying and harassment.** Young workers are vulnerable to workplace bullying and more likely to encounter unwanted sexual advances at work. This is especially evident for young female workers^{41,48} and those identifying as LGBTIQ+.⁴⁹
- **Substance use.** Young workers, especially those with low educational attainment, low socioeconomic status and early experimentation with alcohol/drug use, are more likely to use alcohol or drugs at work.⁵⁰⁻⁵² This is more prevalent in male-dominated, 'blue-collar' industries such as construction, manufacturing, mining and agriculture,⁵³ or workplaces with high levels of work stress, long hours and easy access to alcohol in the workplace (e.g., hospitality and food service).^{50,54-56}

These factors contribute to adverse employment experiences, which can increase the risk of depression and/or anxiety.⁴¹ However, early experiences at work can also be a protective factor for young people to develop resilience and the ability to adapt to challenges at work.⁴¹ As a result, supporting young workers as they enter the workforce can positively impact mental health and wellbeing in the long term.

The potential impacts at team and organisation levels

Research is lacking on the workplace impacts at team and organisational levels when young workers experience mental health and wellbeing challenges as they enter the workforce.⁴³⁻⁴⁶ As highlighted above, young workers—especially those with low educational attainment, low socioeconomic status, and early experimentation with alcohol/drug use—are more likely than older workers to use alcohol or drugs at work, with effects at the worker, team and organisational levels. Further, young workers are vulnerable to workplace bullying, more likely to encounter unwanted sexual advances at work, and perceive greater inequity in their treatment at work compared with older workers—factors that also affect team dynamics and workplace culture.

In part, this limited evidence may be because young workers are often less securely attached to employers. They may leave workplaces that negatively affect their mental health and wellbeing, so are no longer seen as experiencing challenges. However, this loss of workforce talent and skills is worthy of attention, particularly given the investment in training and skills and the potential for long-term 'scars' of early unemployment on career prospects.⁵⁷ Further research is warranted to determine team and organisational impacts.

Strategies and opportunities to support successful transition

Potential strategies to support young workers entering the workforce are included below. They are presented as organisational, individual and structural strategies, for clarity.

Organisation level strategies

- **Define, promote and provide high quality work for younger workers.** High quality work refers to work that balances reasonable job demands, control and security, and balances effort and reward.⁵⁸ Promoting high quality work will protect and promote the wellbeing of young workers and may reduce the likelihood of mental health problems.¹¹ This can be achieved by reducing psychosocial job stressors, such as excessive workloads, lack of control and support, and job insecurity, and promoting the positive aspects of work.⁴¹
- **Develop a culture of supporting young workers via staff inductions** to welcome them into the organisation (e.g., a comprehensive 2-day induction). Induction helps set expectations within the organisation and support younger workers to establish their career goals, their professional identity and professional networks. Regular check-ins specifically around transition are important. Pairing younger workers with peers, experienced staff and mentors can be hugely impactful and a great way to facilitate check-ins.
- **Provide inclusive leadership training and development** that positively embraces the benefits of young workers and addresses unconscious bias. Manager training can also focus on actively reviewing career fit with young workers. Deliver training for younger workers to address the potential risks associated with a lack of experience. Training should be practical and meaningful, focusing on how to do their jobs with appropriate support and supervision as they develop skills.

Individual level strategies

- **Invest in the mental health literacy of all workers (young and old) and their knowledge around health and safety protocols.** When done well, training allows young workers to recognise how working conditions influence their mental health and wellbeing, advocate for their rights and fair treatment at work, proactively look after their mental health and wellbeing as well as that of their peers, increase their confidence in reporting incidents and build their knowledge about where and how to seek help if needed.⁴¹ [Work Safe Victoria's new 'Umm' campaign](#) for young workers⁵⁹ is a good example.
- **Train and educate young workers on health and safety protocols and procedures, particularly around psychological health and safety.** Such training increases confidence in reporting incidents, and reduces negative workplace experiences and their mental health impacts. It is an investment by employers,⁴⁷ even if the workforce is transient, that can empower young workers to speak up about their experiences²⁸ and improve overall workplace culture.
- **Provide access to career support.** Publicising, normalising and supporting young workers to access career support through Employee Assistance Programs (EAPs), graduate programs or other services may help individuals clarify their personal goals and career direction. Encourage young workers to ask their supervisor about availability and access to the organisation's unique

resources. These supports can help individuals through the various career transitions and assist in clarifying personal goals and career direction.

- **Reach out to allies.** Health and safety representatives (HSRs) are another resource in the workplace for younger workers. HSRs play a critical role in making workers safer at work and advocate for workers to ensure their views and concerns are heard.

Societal or structural strategies

- Because unemployment and unstable work is substantially higher in young workers than older, **population level strategies to address youth unemployment** are warranted.⁴¹
- **A publicly funded career service** could support young people to review their career choices. While many are exposed to career education in secondary schooling, those wishing to review, redirect or self-manage their careers may not have the resources to access such services privately.

Gaps in the literature

The strategies offered above are evidence based, but evidence on promoting mental health and wellbeing for young workers entering the workforce is limited. In particular, more research is needed to establish protective factors and organisational strategies that can contribute to young people's wellbeing and resilience at work and how this may vary across industry and employment contexts in Australia. This research should incorporate intersectional lenses, because unique factors may be present (e.g., individuals from different cultural and linguistic backgrounds, experiencing socioeconomic hardship, people with disabilities, those with neurodiversities such as Attention-Deficit Hyperactivity and Autism-Spectrum Disorders, and those identifying as LGBTIQ+). Applied research studies could evaluate specific programs to identify the most critical elements for success.

As noted earlier, evidence is lacking about team and organisational level workplace impacts when young workers entering the workforce experience mental health and wellbeing challenges.

2: Transitions to leadership and management

About this transition

Transitioning into management or leadership roles is very significant for some workers. It may be a conscious decision to 'step-up' or an unplanned transition arising from organisational changes. Either way, becoming a manager involves adjusting one's identity, with new challenges, changes and demands.⁶⁰

Inherently, a leader's action (or inaction) significantly affects their team or organisation, for better or worse. There are established relationships between leader wellbeing and leadership behaviours,⁶¹⁻⁶³ team member performance and wellbeing,^{64, 65} and overall leadership effectiveness.⁶⁶⁻⁶⁸ However, despite the high stakes of management roles, leaders are typically underprepared for, and under-supported during, the transition to new leadership roles, with estimates that nearly half of leadership transitions fail.⁶⁹ Additionally, many new leaders rise to leadership roles based on technical proficiency, but are not provided with skills and training in leadership and management, which are separate skills.⁷⁰

Risks and mental health and wellbeing challenges

Transitions to management can affect mental health and wellbeing in various ways.

- **Additional stress and supervisory responsibilities.**^{71, 72} In addition to personal tasks and activities, leaders also exert considerable energy and effort to support workers and broad organisational aims.⁷³ The relatively large scope of leaders' roles is often reflected in long working hours, heavy workloads, and continual change and uncertainty. These factors can contribute to burnout, with 54% of young leaders experiencing burnout.⁷⁴ Managerial anxiety over being held accountable can lead to micromanagement and many struggle with the tension between supporting staff and managing their performance.⁷⁵
- **Imposter syndrome.** Imposter syndrome is prevalent in every industry and every profession. Not even high-achieving individuals and athletes are immune to imposter syndrome. Up to 82% of people will experience feeling like they have not earned what they have achieved and are a fraud at some point in their lives.⁷⁶ In the workplace, imposter syndrome typically results in lack of confidence, poor decision making, underperformance and if left unchecked it can affect an individual's mental health and wellbeing.⁷⁶
- **Changing identity.** The transition to a new leadership role requires an identity shift. New leaders are likely to experience anxiety, conflict and threat connected to valued aspects of their identities.⁷⁷ These identity challenges are also more significant in the experiences of new leaders from minority and non-dominant groups.⁷⁸ Becoming comfortable with this identity change involves new leaders experimenting to determine their leadership style.
- **Feeling like a novice again.** New leaders who were in their previous position for a while may feel they mastered their responsibilities and deliverables. It can be disconcerting to feel like a novice again, particularly when the team is looking to the leader for all the answers. A leadership change often comes with a salary bump and higher stakes. So, the risk of failure is now financial, which can add pressure. Organisations can help by promoting a culture of ongoing learning where it is acceptable for new leaders to be continually learning and take a 'fail fast' approach.
- **Loneliness.** "Being in the team but not of the team, regardless of whether one sits in a separate office or open plan workspace."⁷⁹ Around 91% of first-time managers have reported feeling

isolated, with 88% reflecting minimal face time with their teams exacerbated their burnout.⁸⁰ This relational transition **moving from 'mate' to 'manager'**, can be particularly challenging or isolating when friendships are close and personal information is shared.^{81, 82} And it can be complex for both parties. Egos and emotions can get in the way. Some peers may feel as though they deserved the promotion and be less than supportive. Other closer colleagues may assume they will now receive special treatment or be less inclined to follow processes. They may not feel like they can share the challenges and frustrations they once had when their peers shared the same responsibilities. Without this peer support, some new leaders may experience mental health issues or avoid seeking help out of fear they will be perceived as not being up to the job.

- **Stigma. This includes internalised self-stigma, or social stigma, experienced by leaders who are diagnosed with a mental illness.** Generally, leaders are expected to display strength and resilience; any indication that they do not may be perceived as role incongruent and problematic.⁸³ Research on bias against leaders experiencing psychological distress finds depression-related stigma may be an additional complication.⁸³⁻⁸⁵

The potential impacts at team and organisation levels

If transitions to leadership cause individuals' psychological distress and dysfunction, it can have significant flow-on effects on their teams and organisations, eroding wellbeing and performance more broadly. Currently, literature focuses on the role of managers and supervisors in supporting their staff wellbeing.⁶⁷ There is minimal literature on how transitioning into leadership impacts the individual's own wellbeing. Further, limited research has addressed the potential impacts of the leaders' mental health and wellbeing challenges on team and organisational functioning or on the mental health and wellbeing of managers and supervisors themselves.⁸³

Importantly, the impact of leaders' mental health and wellbeing on leadership behaviours may lead to reduced personal resources and increased stress. Even low levels of psychological distress can reduce desired leadership behaviours and increase problematic supervision which affects workers. For example, managerial anxiety about being held accountable can lead to micromanagement and struggle with the tension between supporting staff and managing their performance. Additionally, changes resulting from poor mental health, such as sleep disturbance and increased alcohol usage, can impact a leader's behaviour. These changes contribute to stigma against the leader; it is perceived as unacceptable when leaders experience mental illness, which further burdens those leaders.⁸³

Strategies and opportunities to support successful transition

Leadership transition supports include organisational and individual approaches.

Organisation level strategies

- **Start training before formal leadership roles start.** Organisations can offer formal and informal training in leadership and management skills to help emerging and new leaders develop and refine their skills. This training can cover topics such as understanding their own management style; building trust; and managing increased responsibility and demands, such as providing a safe workplace including managing disclosures of psychological distress and mental illness. Further, it is important to view leadership as a practice that benefits from ongoing support and development.
- **Develop policies and processes for 'in boarding'.** Promoting from within has many benefits, but often organisations skip important processes that a new hire receives. Some of these challenges include doing 2 roles at once; that is, the transition is delayed while handing over their previous workload. Internal hires often hit the ground running without time for learning or to assess their

leadership style. The new leader also has to contend with 'baggage' or preconceived notions from existing workers.

- **Provide coaching and mentoring.** Providing access to external objective feedback and confidential coaching can help new leaders challenge assumptions and build understanding. One-on-one feedback and advice can be invaluable in developing perspective.⁶⁰ This is particularly important in management teams that exhibit a sense of competition and a lack of trust between individuals. Coaching also helps new leaders manage increased responsibilities and juggle other demands. Similarly, mentoring with an experienced internal leader can help new leaders develop greater organisation-specific situational awareness.
- **Clarify workplace procedures and processes.** For many new managers, negotiating the procedural requirements of roles is overwhelming, and some aspects of their role may occur infrequently. Clear materials that spell out advised processes, and where to seek help may be useful, particularly for less common scenarios.
- **Establish peer networks.** Leadership communities such as peer networking and 'promotion cohorts' (for medium and large organisations) allows new leaders to build new connections, discuss challenges and develop skills in a supportive environment.
- **Promote a learning culture.** Create forums for managers and leaders to present their mistakes and failures. Organisations can promote a mentally healthy culture of ongoing learning where it is acceptable for new leaders to not know the answers to all questions and to admit mistakes. This can be more proactively encouraged by requiring new managers to focus on listening, rather than contributing, for a set period of time.

Individual level strategies

- **Conduct one-on-one meetings.** One-on-one meetings let leaders get to know team members, understand their roles and motivations, and personally communicate their new appointment. Leaders can ask team members to define their roles and listen carefully. Knowing where a team member adds value means a leader can better enlist that person's help. The team member also receives agency and autonomy over their work.
- **Set boundaries.** Many new leaders think they need to become a different person to lead well. Leaders can be themselves, but set firm boundaries. They can do this by being transparent, clearly defining roles and communicating their expectations. They may need to be clear about work–personal boundaries with team members who are friends.
- **Ask for feedback.** A leader does not have all the answers. A leader can ask for feedback to check the team is on board and to get their buy in. Importantly, the leader must be transparent and accountable for others to follow their lead.
- **Check in.** Regularly checking in with reports can help leaders adjust their management approach for different people and build close relationships.
- **Practise self-care.** New leaders need to protect their personal wellbeing, including being aware of early warning signs of distress, engaging with trusted mentors and confidances, prioritising sleep, setting boundaries, engaging in physical activity and good nutrition, and seeking help as required. Often, new leaders overwork to prove themselves; organisations can assist by communicating policies such as discouraging emailing after hours and on weekends.
- **Leadership training and development.** Individuals can prepare for leadership transitions by reflecting on their personal style and experiences, and intentionally developing their approach. Considerations include managing first impressions, aligning expectations, recognising and managing stress, seeking feedback, building effective relationships laterally and vertically, and managing expectations of previous peers.⁸⁶ New leaders also need to understand their business,

industry and community. They can attain this knowledge via attendance at conferences, participation in business conversations, or return to study.

- **Recognise the triple challenge.** This notion can help reframe the transition to leadership. Coached or self-paced reflection can prompt individuals to consider which elements of their current roles and responsibilities should cease, be retained or added to as they move to new management levels.⁸⁷

Gaps in the literature

Given the importance of leaders and managers, the lack of research about how transitioning and holding a leadership position impacts a person's wellbeing is surprising.^{83, 88-91} There may be several reasons for this result. First, it may be because researchers and the broader community have high levels of compassion for workers, who experience greater job stress levels than managers or business owners;⁹²⁻⁹⁴ as a consequence, leaders are often overlooked.⁸³ Second, leaders' wellbeing may not be a focus for others. Leaders may be perceived as stronger and therefore mentally healthier. As they move up the social hierarchy, they are presumed to experience less job stress, be more resilient and have access to more resources,⁸³ factors that are critical for mental health. A plethora of research, training and resources addresses the role of leaders in supporting the mental health and wellbeing of team members, especially in the COVID post-pandemic world.⁹⁵ However, Barling and Cloutier⁸³ contend "...we need to know more about the transitions into and out of leadership positions," and how they affect job incumbents' wellbeing.

In terms of interventions, almost no research systematically considers organisation-level strategies that positively affect leaders' mental health and wellbeing.^{83, 90} This is a significant gap in our understanding of what interventions are effective for this group. The existing literature largely focuses on individual strategies, with minimal focus on work design. Research could focus on intersectional stresses and mental health stigma faced by leaders who are less well represented, including women,⁹⁶ those from culturally and linguistically diverse communities⁹⁷ and leaders with disabilities, who are poorly represented but may experience additional intersectional barriers.⁹⁸ Additionally, given the existing and increasing responsibilities leaders carry, including promoting the wellbeing and performance of workers, it is critical to consider the emotional toll that can be exacted by engaging in high-quality leadership behaviours.

3: Transitions associated with parent and caring responsibilities

About these transitions

A carer is defined as anyone who cares, unpaid, for a family member or friend who cannot cope without their support due to illness, age, disability, a mental health problem or addiction.⁹⁹ Family care refers to unpaid informal care for individuals who are dependant, temporarily or permanently unable to function independently and/or in need of help with routine activities.^{100, 101} Family care encompasses caring for children, grandchildren, children with additional needs¹⁰² and caring beyond parenting (i.e., assisting family members because of a long-term health condition, disability or functional limitation¹⁰³, such as elderly parents, spouses or partners¹⁰⁴).

Carer ages range from young carers (up to 24 years)¹⁰⁵ to grandparents with primary care responsibilities for grandchildren. Common transition points for parents caring for children and ageing parents include parental leave, start of childcare, start of primary school, year 12, special needs, life changes, care of ageing parents and care of grandchildren.¹⁰⁶ Caring also incorporates the 'Sandwich Generation'—a carer with parenting responsibilities while also caring for elderly parents¹⁰¹—and more recently the 'Double Sandwich Generation'—individuals in their 60s caring for their grandchildren, allowing their own children to work while also supporting parents in their 90s.¹⁰⁷

Official statistics suggest Australia has 2.65 million carers, representing 10.8% of all Australians.¹⁰⁸ This figure is likely an underestimate; other sources suggest an estimated 2.8 million carers are employed in the Australian workforce.¹⁰⁹ Approximately 70% of Australian families had both parents in the workforce in 2021 (versus 64% in 2017).¹¹⁰ On average, men undertake more paid work than women, with fathers working an average of 75 hours a week: 46 hours spent on paid work, 16 hours on housework and 13 hours on child care. Comparatively, mothers work an average of 77 hours a week, comprised of 20 hours paid work, 30 hours household work and 27 hours of child care.¹¹¹

Risks and mental health and wellbeing challenges

While many people look forward to and are enriched by caring and parenting, this transition often comes with significant change. It can involve a loss of identity, meaning, relationships and structure, increasing the risk of psychological distress and mental health conditions.

Parenting care

The transition to parenthood is a major life transition characterised by significant change and associated stressors that can increase psychological distress, fatigue and isolation. Many expectant and new parents experience a mental health condition,^{112, 113} with 20% of mothers and 10% of fathers experiencing anxiety or depression during pregnancy and the first year of parenting.¹¹⁴ These results may be underestimated especially for fathers, who are less likely to report distress.¹¹⁵ Beyond this, a higher prevalence of mental health conditions is associated with struggles to balance work and family commitments,¹¹⁶ lack of sufficient leave and support after childbirth,¹¹⁷ stressful life events, a history of substance abuse and exposure to previous trauma.¹¹⁸ Some of the factors impacting mental health and wellbeing of working parents are outlined below.

- **The birth experience.** Infertility, use of IVF, pregnancy loss, terminations, stillbirths and serious illnesses associated with birth can have significant psychological impacts.¹¹⁹⁻¹²¹
- **Hormonal interactions and psychiatric responses** involved in pregnancy and labour can increase the risks of new parents developing mental health conditions.¹²² Challenges with feeding and

settling, financial stress, relationships stress, deterioration in physical activity and broader social supports, and sleep deprivation further exacerbate distress.¹²⁰

- **Perinatal discrimination.** Pregnancy is currently the most common discrimination complaint in Australian workplaces.¹²³ Discrimination can have long-term adverse impacts on the psychological health of new and expectant parents. Discrimination influences help seeking behaviour. Many new parents do not seek help and accept distress as part of being a parent; 74% do not seek help until they are at crisis.¹²⁴
- **An unequal burden.** Women not only shoulder the burden of domestic work in caring, but also carry the 'mental load' or 'admin' associated with family life. In a 2021 Global Deloitte study of 5,000 women in 10 countries, including Australia, 77% of women interviewed said their workload had increased since the COVID-19 crisis began and 66% said they bear the greatest responsibility for family household management and chores.¹²⁵ This result was associated with a decline in female participation in the global workforce, with 23% of working women considering leaving the workforce, and 57% planning to leave their current employer in the next 2 years. This presents more challenges for women, who can lose 'power' when taking time out of the workforce or working part-time. Women are also at an increased risk of domestic violence when pregnant or in the post-natal period, with 76% of Australian domestic violence victims experiencing violence while pregnant.¹⁰⁴
- **Work-life interference** remains a persistent challenge in Australia, particularly for women, mothers and other working carers. Parents and carers can have higher levels of absenteeism and presenteeism, and reduced work status. Time constraints mean parents may struggle to engage in workplace activities that build social and career networks, resulting in missed opportunities for advancement or promotion.
- **Work-related factors** can increase the risk of poor mental health for individuals already at greater risk for mental health distress. Such factors include low supervisory support, lack of job control and role clarity, and poor change management.
- **COVID-19 pandemic restrictions and policies** (particularly remote schooling) exacerbated mental distress, particularly for working parents.¹²⁶ Many working parents juggling COVID-19 restrictions, mental health issues and home schooling experienced 'pandemic parental burnout':¹²⁷ it is particularly pronounced for women and increasing with time.¹²⁸

Research also indicates particular groups may be at a greater risk of experiencing mental health challenges in the perinatal period. For example, parents of children with disabilities and other high needs (e.g., mental health issues) report higher levels of emotional distress, likely arising from more substantive caregiving responsibilities.^{129, 130} Additionally, sole parents, particularly mothers, have significantly worse mental health outcomes;¹³¹ adoptive and foster caregivers also report higher levels of stress,¹³² depression and anxiety.¹³³ There is significantly less research on the psychological and mental health of fathers,^{134, 135} which is critical given noted changes in parenting roles and the potential stigma associated with men taking parental leave or accessing workplace flexibility.^{136, 137}

The initial transition to parenthood is a huge shift, but additional changes are likely throughout parenthood:¹³⁸

- Parents may have trouble accessing childcare services due to unaffordability, unavailability and illness rates in young children.
- Challenges when children start school include adjusting work schedules around shorter school hours, school holidays and childcare or school events and celebrations.

- Challenges as children grow include choosing schools, helping adolescents navigate hormonal and social pressures, supporting adolescents with increasing study demands and enabling them to attend social, work and school commitments.
- Parents support young adults to become autonomous and develop personal responsibility, as they move into further study and careers. Relationship breakdowns, and potential family violence, can affect obligations and expectations, with return to the home or cycling levels of independence and reliance.
- As children leave home, parents must adjust to the so-called 'empty nest' and reframe their expectations and routines.^{139, 140}

Changes in physical needs, logistics and the balance between personal, professional and family commitments continue through all these phases. Parents report feeling time poor,¹⁴¹ and experience parenting stress as they negotiate these requirements,¹⁴² but can also demonstrate familial resilience in the face of these pressures.¹⁴³ Parental depression and anxiety can negatively affect personal, family and child developmental outcomes in both genetic¹⁴⁴ and non-genetically related families,¹⁴⁵ and therefore, warrants serious attention.

Other forms of family care

Individuals who care for family members including elderly parents, siblings or spouses with chronic physical or mental illnesses experience greater levels of fatigue, psychological distress, anxiety and depression.^{104, 146-150} Caregivers of partners, close family members (e.g., parent, sibling or child) and other family members contemplate suicide at a higher rate than the general population.¹⁵¹ Primary stressors of caregiving (e.g., unwell family members, family members with cognitive disabilities and care duration) and secondary stressors (e.g., family conflict and financial stress) are associated with poor mental health outcomes.¹⁴⁸ Long-term carers caring for an elderly person or someone with a permanent disability or terminal illness often report feeling lonely or isolated, increasing the risk of psychological distress.¹⁵² Caregivers may also report feeling out of control, trapped and helpless¹⁵³ and prioritising family needs over their own,¹⁴⁸ exacerbating mental health risks. Partners of spouses with chronic illness also report poor psychological health from lack of self-care and formal care support.¹⁵⁰

Caring responsibilities can negatively affect workforce participation and financial stability. Most family carers are of working age, but have lower workforce participation levels than non-carers.¹⁵⁴ New parents, older parents and carers of people with chronic conditions often leave the workforce or reduce their paid working hours after taking on caring responsibilities.^{100, 154, 155} Approximately 22% of primary carers work full-time, compared with 43% for the general population.¹⁰⁹ Often, women with caring responsibilities work fewer hours than men.¹⁰⁰ Reduced employment and out-of-pocket caring costs have financial repercussions; approximately 160,900 primary carers and 53,000 non-primary carers in Australia are not paid for caring. Australian primary and non-primary carers lose an estimated \$11.4 billion and \$3.8 billion respectively.¹⁰⁹

Family carers in the workforce display higher levels of absenteeism, presenteeism and reduced work status related to caring responsibilities.¹⁵⁶⁻¹⁵⁸ Exhaustion and burnout are also common.¹⁵⁹ Almost one-third of Australian primary family carers take time off at least weekly due to caring roles.¹⁵⁴ Family carers balancing work and care obligations for their parents also report concentration problems and struggle to participate in social or career-enhancing activities at work, with potential financial or career penalties.¹⁵⁶

Importantly, caring responsibilities can have positive effects, including opportunities for work-family enrichment.^{160, 161} Supporting carers can significantly benefit workers, allowing them to

participate fully at work in ways that match their values and reduce stress and anxiety. For the organisation, this kind of support can reduce absenteeism, improve staff retention, staff diversity, worker focus, productivity and performance, and generate reputational benefits of building and promoting a family friendly workplace.

The potential impacts at team and organisation levels

As noted above, family carers display high levels of absenteeism and presenteeism, which alongside increased turnover, increases economic costs for businesses.^{109, 156, 157} A PwC report about perinatal mental health conditions in Australian workplaces attributes costs to productivity losses associated with presenteeism, absenteeism and turnover.¹¹² The mental health challenges of carers also cost organisations, with businesses facing high estimated annual costs of lost productivity if postnatal depression is not addressed (\$158 million for mothers and \$68 million for fathers with perinatal depression).¹⁶² While research has examined the individual and organisational impacts of family caregiving, there is little research about how family and caring responsibilities affect teams. However, when working carers experience intense and unresolved work–family conflict (i.e., when the demands of work and family roles are incompatible), this can result in reduced job performance and team conflict.¹⁶³ Proactive strategies are critical to prevent friction or conflict, and a build-up of resentment.

Importantly, organisations that support family care responsibilities benefit from being seen as family friendly, which can help to attract and retain talent.^{164, 165}

Strategies and opportunities to support successful transition

Organisation level strategies

Parents returning to work can face discrimination. Research from the Perinatal Workplace Wellbeing Program (PWWP) found returning women were demoted or had their roles changed while on leave, or experienced ‘benevolent sexism’.¹⁶⁶ The study also found returning fathers experience discrimination and stigma when requesting flexible work arrangements. An employer support carers and parents in many ways.

Large organisations (i.e., those with over 100 staff, or a turnover of more than \$2 million) can demonstrate a commitment to supporting staff with family and caring responsibilities by being certified as a Family Friendly Workplace.¹⁶⁷ This process—which benchmarks organisations against the minimum National Work and Family standards and best practice—identifies areas of strength and recommends areas for improvement. Based on this report, an organisation can then develop and work through an endorsed work and family action plan, and be certified as a family-inclusive employer, which can be communicated to current and future staff, clients and the community.

Whether or not an organisation is seeking certification, a range of strategies can improve the mental health and wellbeing of working family carers,¹⁶⁸⁻¹⁷⁰ improve staff retention, increase productivity and reduce organisational costs:¹⁶⁸

- **Encourage family flexible arrangements**, including flexible use of family leave. **Caregiving and family leave policies** should promote **flexible work arrangements** (i.e., flex-time or telecommuting) and time off as required, consistent with obligations under the National Employment Standards.¹⁷¹ For new parents, policies such as *Keep in Touch Days*, and breastfeeding support help to manage immediate care needs while remaining employed.¹⁷² These actions can help carers feel they have over their work and care commitments, which promotes mental health.¹⁷³ Flexible arrangements can start before the worker becomes a parent or carer, and can include support for fathers and non-birth parents to take additional leave

before birth to support their partners. This is particularly relevant for pregnancy loss or when there are health complications.

- **Provide access to job protected paid family leave**, available equally to all parents and carers.
- **Promote and champion flexible work arrangements in senior leadership roles**, to help workers feel confident to request such arrangements and promote a culture of acceptance. This can offset concerns about lack of access or stigma.^{174, 175}
- **Visibly support and enable dads and non-birth partners to take longer periods of parental leave**. Use senior leadership as role models and explicitly address concerns about taking leave, reassuring workers of opportunities for career growth and promotion.
- **Recognise every journey to parenthood is unique and personal**. Many people will not wish to disclose their situation.
- **Automate and embed processes into systems** (e.g., reminders for when someone is returning from extended leave).
- **Provide easy and independent access to policies and procedures**, so workers know what is available without having to ask. This helps to maintain confidentiality if workers do not wish to disclose their personal circumstances, such as trying to become pregnant or after a miscarriage.
- **Equip leaders with family supportive supervisory behaviours**. Supportive supervisors are a critical factor contributing to the mental health and wellbeing of new and expectant parents and carers. These behaviours support workers' family roles and include emotional support, instrumental or practical support, role-modelling behaviours, and creative work–family management. They improve perceived health and work–family balance satisfaction of carers.^{176, 177} Supervisor training can focus on holding effective conversations about caring transitions, setting clear boundaries about staying in touch and deciding who is responsible for reaching out. These actions help to avoid the 'boss lottery', where parents' experiences vary based on the leader's skill in implementing policies. Managers should also be trained and alert to potential signs of compromised wellbeing and know how to link carers with suitable support.
- **Make reasonable adjustments**. Organise family-friendly meeting schedules that avoid drop-off and pick up times and recognise parents' need for 'life-admin' days or time to attend activities. An organisation may also consider generating term-time leave arrangements to help parents manage school and extracurricular commitments.
- **Establish peer networks** to help individuals connect with and learn from others.
- **Provide education to the whole organisation** about emotional and mental health at this life stage to increase capacity to identify and respond to distress in themselves or others.
- **Provide support material to carers**. Eldercare kits can contain information about aged care facilities, fees, government assistance and rebates. Childcare kits can provide information about childcare facilities and fees, government assistance and rebates and childcare options (i.e., a childcare directory).
- **Provide transition coaching and mentoring** to help individuals better manage their transitions and personal circumstances. Parental leave can be a time where parents and carers experience a loss in confidence, and experience challenges in balancing parenting and professional roles. Intentional support can help individuals negotiate their own journey and establish their needs.
- **Provide access to carer-related support and direct services**, including Employee Assistance Programs (EAPs) and dependent care assistance programs for mental health support. EAP wellness programs and dependent care assistance programs may also improve carer mental health and lighten the burden on family carers.^{178, 179} Caring assistance programs also benefit carers, but organisations usually have more childcare assistance programs than elder-care assistance programs.¹⁷⁴

- **Do not ‘set and forget’.** Consider what support is needed for all types of family carers, and how those needs change over time. For example, parenthood involves ongoing transition points as children grow from babies and toddlers to school-aged children and adolescents.
- **If possible, provide on-site childcare managed by an external childcare provider,** or a Family Room that parents can use after school or when a child cannot go to childcare or school.

Individual level strategies

- **Learn the supports available for carers,** such as government funded carer payments and Paid Parental Leave. Encouraging men to access carers leave, whether for parenting or other caring roles, is also critical to promote gender equity and more evenly share caring responsibilities. This also has positive impacts for the wellbeing of parents, partners and children.¹⁸⁰
- **Seek out available support,** practical resources and information in the workplace to prepare for the transition (e.g., peer support groups, leave policies, COPE’s free Ready to COPE App¹⁸¹).
- **Adapt work goals to align with caring commitments.** Have clearly defined and communicated personal boundaries with the workplace.
- **Connect with others through a local support group** or organisations that provide services and support for carers and parents (e.g., Carers Australia, COPE's Mama Tribe).
- **Speak to other family members about sharing caring responsibilities** (e.g., siblings sharing care for an elderly parent). It may help to clearly articulate the needs of the person being cared for, and to be specific about what contributions are most helpful (e.g., decision making versus financial support versus regular social visits).
- **Reduce the risk of burnout by adopting self-care and wellbeing strategies.** Staff may participate in skills training programs to enhance their resources and learn how to effectively manage competing roles and priorities.¹⁸² For instance, training programs encompassing stress-resiliency and mindfulness can enhance overall mental health, optimise coping skills and reduce stress.¹⁸³ An individual may also balance paid and domestic work with wellbeing strategies to cope with stress and improve mental health.¹⁸⁴ Balance may include adapting, adjusting or reframing work-related goals to help manage paid and caring roles. Any decisions to change working arrangements should be made, where possible, as a family unit, to prevent the burden being borne solely by women; currently, women spend 64.4% of their weekly working time in unpaid care work, compared with 36.1% for men.^{180, 185}
- **Reach out if you need help.** Discussing support options with their GP is a good first step for workers experiencing poor mental health.¹⁸⁶

Gaps in the literature

Significant research is available about the demands of early parenting and strategies for working parents, particularly women. However, other areas within this domain are less well covered. More focus on ways to support men as active parents and reduce the stigma of parenting involvement would benefit men and help mitigate gender inequity. Other research could investigate the needs and challenges of primary family carers of same sex spouses, carers of siblings, grandparent carers (particularly working grandfathers), and Sandwich and Double Sandwich generations. More research is also needed on what organisational and individual interventions best support these broader family caring subgroups.

4: Redundancy and career change transitions (both involuntary and self-directed)

About these transitions

Career changes can arise due to redundancies or workplace change (involuntary job loss), self-directed career changes, or even both. These transitions are considered separately below, given their different implications for individuals and the workplace.

Involuntary job losses (redundancy and job displacement)

Redundancy and job displacement involves involuntary separation from a job, often for economic reasons, such as workforce downsizing, restructuring, closures, changes to the skills required for the role or other workplace changes. Australia has a relatively dynamic labour market compared with other OECD countries.¹⁸⁷ About one-fifth of employed Australians separate from their job annually, and one-fifth of those separations are displaced workers. Historically, men, older workers and less educated workers tend to be displaced more often,¹⁸⁷ whether through formal redundancies or other forms of involuntary job displacement. Workers with shorter tenure and casual contracts tend to face higher redundancy rates. The COVID-19 pandemic resulted in significant job disruption in Australia, with an estimated 870,000 workers losing their jobs between February and May 2020.¹⁸⁸ Notably, gender and age patterns varied during this transition, with women, young workers and those in insecure work more likely to be stood down or made redundant.¹⁸⁹

Close to 70% of displaced workers find new jobs within one year and around 80% within 2 years.¹⁹⁰ However, re-employment rates are lower for displaced workers than for workers experiencing other types of job separation and certain populations have significantly lower re-employment rates following redundancy. Women, older workers and less-educated individuals tend to have lower re-employment levels post-redundancy.¹⁸⁷ This result is likely because of discrimination, limited opportunities and personal decisions to leave the workforce.

Self-directed career changes

Career changes involve moving to a new profession beyond linear career progressions. Both globally and nationally, career changes are increasingly common, with individuals seeking versatile, boundaryless careers that are flexible, dynamic and self-managed.^{191, 192} By the time they retire, it is estimated that young Australians will have held up to 17 different jobs over five careers in their lifetime, which is referred to as a portfolio career.¹⁹³

The COVID-19 pandemic has increased drivers for change, with ING¹⁹⁴ reporting that since COVID-19, 1 in 3 Australians were considering changing jobs and more than 3 million wanted a complete career change. More recently, there is further drive for change. A survey indicated 56% of workers were taking steps to change their employment in early 2022,¹⁹⁵ a phenomenon entitled the 'great resignation' or 'great reset'. A focus on wellbeing has been a significant trigger for this change, with 29% of respondents in a recent Australian survey¹⁹⁶ noting burnout as the key reason for resignation, while many nominate wellbeing as a reason to stay or move jobs.¹⁹⁷ Making a career change after 40 is common, with 41% of respondents to a recent Seek survey having made career changes, over half of whom moved into new work and new industry.¹⁹⁸ Often, older workers change careers to achieve a better work-life balance, with a desire for greater stability and job security. Optimistically, almost all (97%) were at least somewhat happy with their decisions.¹⁹⁸

Several personality and demographic factors increase the likelihood of career changes: openness to experience and extraversion, high self-efficacy, being young and male.¹⁹⁹ Career change is likely the result of a mix of factors and motivations.²⁰⁰ Reasons for career change include job dissatisfaction, poor pay, a desire to align work with values, poor relationships with bosses, health problems, wanting more flexibility and a desire for growth/challenge.^{201, 202}

Emerging workplace trends, including the gig economy and portfolio careers, mean a 'career for life' is redundant for many. The number of careers is increasing for younger generations, with young workers 'job hopping' at 3 times the rate of older workers.²⁰³ This outcome is attributed to emerging expectations of workers, emerging new jobs and industries, more freedom in career choices and a shift away from expectations of a 'career for life'. However, while patterns of careers and motivations for change are shifting and career changes are now more common than lifetime career stability, the narrative of a 'career for life' can create mismatched expectations, and potential anxiety. Given the increasing normality of career changes, it is important for organisations to shift their practices to support and respond to such a movement.

Risks and mental health and wellbeing challenges

When considering the impact of career changes and redundancy, it is necessary to acknowledge employment is not seen equally by all. Dr Amy Wrzesniewski, a professor at Yale School of Management identified 3 different contexts of work: people who see their employment purely as a **job**, focusing on financial rewards and the necessity of income; people who see their work as a **career**, perhaps with explicit intentions for advancement; and people who see their employment as a **calling**, and feel a sense of purpose and deeper alignment between their vocation and who they are as a person.²⁰⁴ Even the concept of 'career' is changing. Traditionally, a 'career' was considered to refer to the work you are paid to do, but emerging definitions encompass life contributions across paid work and other activities such as hobbies and community engagement.^{191, 205} These evolving definitions are consistent with generational shifts in attitudes towards work and the psychological contract. The impacts of career change are different depending on how individuals see their employment and its centrality to their identity.

Individual impacts of involuntary job loss

Just under one-third of displaced workers are still unemployed after 12 months and re-employment rates are even lower for certain groups, including women, older workers and those with less formal education.²⁰⁶ Involuntary job loss is associated with decreased psychological wellbeing.^{207, 208} In contrast, voluntary redundancy may have more positive outcomes.²⁰⁹ Paul and Moser²¹⁰ suggest relationships between involuntary job loss and mental distress may be causal. An Australian study¹⁸⁸ found 69.1% of Australians who lost their job during the COVID-19 pandemic reported poor mental health. In contrast, only 24.2% of respondents whose work was unaffected by the pandemic reported poor mental health.

Notably, negative psychological impacts start once a change is anticipated, and for some, resolution, even if undesired, reduces distress because individuals can start transitioning.^{211, 212} Demographic differences moderate the impact of involuntary job loss on mental health. For example, men and people with blue-collar jobs tend to experience more distress by involuntary job loss than women and people with white-collar jobs.^{210, 213} Long-term unemployment significantly increases an individual's chances of experiencing poor mental health.^{214, 215} Therefore, supporting displaced workers to find suitable work can help protect their mental health.

Financial challenges are consistently one of the biggest stressors for displaced workers,^{210, 215} with displaced workers experiencing persistent earning losses even after re-employment. Weekly

earnings for workers with new jobs are 8% lower on average than their previous job.²¹⁵ Both the initial income loss and the potential for a sustained reduction contributes to the financial stress associated with redundancy. Unsurprisingly, individuals with more financial resources are better protected from poor mental health following job loss.²¹⁰

Psychosocial factors such as the loss of social connections, changes to routines and a sense of purpose, and stigma associated with unemployment also contribute to poor mental health following redundancy.^{210, 213} This can also extend to negatively impacting the mental health of family members and potentially lead to marital separation.^{207, 216, 217} Involuntary job loss is also associated with decreased physical health.²¹⁸ This result is unsurprising, given the mental health benefits associated with good work.²¹⁹

Organisation impacts of involuntary job loss

Often organisations downsize for financial reasons. However, a study of 537 large firms found limited evidence that downsizing significantly improved profits.²²⁰ The potential for downsizing to negatively impact organisational culture is well established, largely due to remaining workers experiencing 'survivor syndrome' and 'survivor sickness'.²²¹ 'Survivor syndrome' is associated with feelings of guilt, anxiety, apathy and disengagement. 'Survivor sickness' is associated with denial, job insecurity, feelings of unfairness, fatigue, reduced risk taking, decreased motivation and distrust. These experiences likely reflect a worker's decreased belief in job security, decreased trust in management and guilt associated with remaining in the job.^{221, 222} Therefore, organisations considering downsizing should consider not only the impacts on displaced workers but also the potential negative impacts on remaining workers.

Individual and organisation impacts of self-directed career changes

The limited research on the mental health impacts of self-directed career change indicates the impacts tend to be influenced by the motivations for change. Some individuals thinking about or undergoing a career change experience fear of failure, insecurity, a fear of the unknown and concerns about making the wrong decision.^{193, 223} Career changes triggered by external factors such as redundancy are likely to have more significant negative impacts on mental health and wellbeing.

In contrast, a career change can have positive mental health and wellbeing effects when individuals perceive they are in control and the change increases alignment with personal interests, values, personality and skills/aptitudes. While voluntary career transitions may trigger fear or uncertainty, they are less likely to negatively impact mental health due to perceptions of control and the desirability of the change. Further, staying in a career that no longer fit is likely to negatively affect mental health and wellbeing. However, 'sleeper transitions'—where a person gradually accepts slightly different roles until at some point, they realise they are in a different career—can result in less disruption and distress. Although a career change can be highly stressful in some settings, a successful career change is often associated with improved life satisfaction^{199, 224} and can increase confidence, empowerment and perceived mastery.^{225, 226}

Strategies and opportunities to support successful transition

Organisation level strategies

- **Provide open and ongoing access to career education, mentoring programs and counselling services** (e.g., external or Employee Assistance Program (EAP) services delivering career education seminars). These services can help individuals reframe their beliefs and expectations about career changes, learn skills and strategies for self-assessment, research the labour market and generate career ideas and Goals.

- **Mentoring programs** can also support personal reflection on career growth and normalise different career transitions, while helping individuals forge their own pathways. They are particularly effective for men.²²⁷
- **Upskill management** to understand their role in career transitions conversations. Build managers' skills and confidence to have supportive conversations, understand the holistic impacts on workers and refer them to appropriate supports.
- **Offer opportunities for upskilling workers** to help them be more competitive in the job market.
- **During periods of organisational change:**
 - **Build open transparent communication and trust in the workplace** to mitigate potential risks associated with change processes. Transparency and clear communication from organisational leaders about the change, the reasons for it, and how and why decisions are made can help to mitigate a sense of organisational injustice or favouritism in the redundancy processes. One option is informal 'drop-in' sessions with leaders where staff can ask questions and receive transparent answers, which are then communicated via FAQ documents.
 - **Offer voluntary redundancies as a first option**, to reduce the burden and need for involuntary displacement.
 - **Support positive exit rituals** when individuals leave, including a formal farewell so workers can say goodbye to colleagues, where possible. This is particularly impactful when a role redundancy impacts senior staff. Not being 'escorted' from the premises immediately after receiving news of role redundancies can help workers get closure, say farewell and move on more successfully. It also helps workers staying with the organisation to feel respected.
 - Providing **adequate pre-notification and career transition support is also associated with lower** absenteeism rates, decreased turnover and fewer termination lawsuits.²²⁸ Exiting workers who are offered formal career transition support are also more likely to maintain favourable opinions of the organisation²²⁹ and experience improved mental health if they regain suitable employment.²¹⁰ So, supporting exiting workers benefits both the worker and the organisation.
 - **Run facilitated workshops** that normalise experiences and emotional responses to change to help individuals understand and manage their own responses.
 - **Provide counselling.** In addition to career transition support, counselling helps to improve an individual's mental health following redundancy.²¹⁰ Importantly, services should be holistic and flexible, to meet each worker's needs, rather than fragmented workers need to explain their story multiple times to different agencies. Services could consider the impact of organisational changes on partners and families of workers and local communities, particularly if the workplace is a significant employer in a small community and changes have large and broader impacts. For example, closing a large factory in a relatively small community may have a disproportionate impact on the viability of other community services, such as banking, healthcare and education. In these cases, organisations should consider support for community change and adaptation, such as retraining for workers.
 - **Depersonalise language regarding role changes.** While subtle, this strategy can help workers depersonalise and reframe their experience. For example, saying "My role was made redundant" is more helpful than saying "I was made redundant". People should also avoid phrases that imply personalisation and blame (e.g., "targeted redundancies"), which may negatively affect coping and mental health and wellbeing.

- Enable the **return of 'boomerang workers'** (i.e., workers who leave an organisation and later return). This is being identified as a significant and increasing trend in 2022, particularly following the 'great resignation'.²³⁰ Organisational departures that are handled well can create a talent pool of former workers who return with new skills to complement existing organisational knowledge.

Individual level strategies

Six coping strategies that can help workers navigate redundancy and self-directed career changes can be categorised into 2 groups:²³¹

- **'Problem-focused' strategies** include searching for re-employment, retraining and relocating for better job opportunities.
- **'Symptom-focused' strategies** include seeking social support, accessing financial assistance and engaging in unemployment community programs. Individuals can help mitigate stressors by using any of these 6 strategies, and strategies are often reinforcing. For example, retraining programs may also help establish new social support networks.²³² Seeking social support is particularly important, because it is the principal strategy individuals use to cope with unemployment.²³³ **Establishing new routines and daily structures** is also associated with better mental health during unemployment.²³³ Workers undergoing career changes may also benefit from **career transition support** to help better understand themselves (i.e., their values, interests and abilities) and the labour market. They can then plan and undertake a career change based on those insights.²³⁴ **Research on educational and occupational options and resources** can help career changers plan next steps, address outdated career beliefs that create unrealistic expectations, and restore control of the transition. Career transition services can also upskill people in current job search practices, tools and technology and act as a sounding board.

As well as these strategies, 5 psychological factors can influence a worker's experience and duration of disruption:²³⁵

- **Readiness** refers to how a person appraises their career change motivation (higher motivation is correlated with a shorter change process).
- **Confidence** refers to how effective the person considers the change will be.
- **Control** is how strongly the person considers the transition is in their control.
- **Perceived support** is how much social support the career changer has.
- **Decision independence** refers to how much other people need to be considered when making the change (e.g., partners, dependent children or parents). Proactively addressing and boosting these 5 factors can help protect the mental health of career changers. For example, control is a primary variable associated with life satisfaction for transitioning military personnel.²³⁶ Many organisations also make their EAP services, which offer mental health counselling, available to impacted workers for a period to support their transition. **Counselling** may help workers to alter their perception of control.

Gaps in the literature

Redundancy is a fairly well researched field, but significant gaps remain. Most studies tend to use western industrial samples.²¹⁰ More research could address how cultural factors (i.e., individualism versus collectivism) moderate the experience of job loss. Several sources highlighted how to comply with regulations and protect the organisational culture when downsizing, but little

research addressed what 'best practice' downsizing looks like to support worker mental health through redundancies.

Research is limited on the mental health risks associated with self-directed career changes. Some research suggests individuals changing careers may experience increased susceptibility to stress and fear,^{193, 223} but more research is warranted. Further, the majority of career change research focuses on individual characteristics.¹⁹⁹ Research is needed on cultural, organisational and contextual factors that contribute to career change motivation, challenges and success. While career change is often seen as an individual decision, limited studies investigate how institutions (e.g., governments, organisations) can help individuals make successful career changes.

Final Draft

5: Health-related changes

About these transitions

Research on returning to work following workplace injury is extensive, but less is known about career transitions and the implications for workers with non-work-related health conditions. An estimated 40% of Australians live with a disability or long-term health conditions.²³⁷ This section addresses non-work-related health conditions—illness, injuries or conditions (including physical, mental or psychological) that are not related to employment.²³⁸ The range of health conditions is extensive, but this paper considers 3 health-related transitions: cancer, menopause and gender transitions. They represent different forms of transitions, with different potential responses and risks, and provide a sample of considerations for workplaces and organisations.

Depending on the nature of the transition, some workers may move through non-work-related health conditions privately, with their workplace and colleagues unaware of their condition. Generally, workers do not have to inform their workplace about their health or medical conditions, and employers may not discriminate on the grounds of health or disability, according to the Disability Discrimination Act 1992 (Cth).²³⁹ However, the Fair Work Commission states it is reasonable for employers to request information about matters that could affect a worker's capacity to perform the essential (inherent) requirements of a role,²⁴⁰ or an illness/injury could place the worker, colleagues or others at risk.²⁴¹ This may be challenging, but provides opportunities for individuals and organisations to collaborate on developing effective responses that support workers and enable them to be productive and effective at work throughout health-related transitions.

Cancer

About these transitions

Cancer is a major cause of illness in Australia, with 150,782 cancers diagnosed in 2021 (an incidence rate of 484 cases per 100,000 persons).²⁴² While the median age of diagnosis is 68 years,²⁴² a significant proportion of cancer diagnoses occur in working populations. Additionally, improvements in cancer treatment mean many more people work during and following treatment,²⁴³ and Australian cancer survival rates are among the highest in the world.²⁴⁴ Patients increasingly receive oral cancer treatments to minimise work disruption,²⁴⁵ and many cancer survivors are both willing and able to return to work after their treatment.²⁴³

However, common symptoms of cancer treatment—such as fatigue, vomiting, nausea, diarrhea and headaches²⁴⁵—undoubtedly present workers with extra challenges in completing their normal tasks. Additionally, many people diagnosed with cancer also experience mental health conditions. Around one-third meet criteria for mental health conditions,²⁴⁶ cancer survivors are at increased risk of anxiety, depression and suicide.²⁴⁷ Issues with thinking and memory are common before, during and after cancer treatment, and can include problems paying attention, thinking quickly, concentrating, organising thoughts or tasks, and short-term memory. Individuals may report a 'mental fog', caused by the cancer itself and associated inflammation, cancer treatments including some chemotherapies, medications, sleep problems, stress/anxiety, and secondary medical conditions.²⁴⁸ Surviving cancer can also create fertility issues for both men and women, which can have a significant emotional impact and, in some cases, require fertility treatments.²⁴⁹ If a worker is required or chooses to disclose information about their health, employers must handle the information in compliance with the *Privacy Act 1988* and any other relevant laws.

Workers being treated for cancer have highly diverse experiences; often, return-to-work processes are non-linear and vary between individuals.²⁵⁰ In addition to cancer and treatment type, age, gender, geography (i.e., living rurally or in a larger town or city), employment type (full-time, part-time or casual), the degree of existing financial strain and/or psychosocial disadvantage, other caring roles, sources of support and job type will impact a person's return-to-work decisions and experience.²⁵¹

Provided the environment is safe and comfortable, there are documented benefits of staying at work while undergoing cancer treatment or returning soon after treatment concludes.²⁵² These benefits include routine and structure, improved financial resources, social connections and opportunities to feel 'normal'.²⁵³ Employment is also a protective factor against mental illness.²⁵⁴ For many cancer survivors, work is a central element of their identity and self-esteem, providing financial security, maintaining social connection and allowing them to exercise their abilities and talents; it is more than paid employment. However, the desirability, importance and interpretation of work depends on the relative importance of those factors to individuals.²⁵⁵ Poor work environments, where cancer survivors lack support, resources, guidance or job security, or experience discrimination, can negatively impact their return-to-work.²⁵⁰

Strategies and opportunities to support successful transition

Organisation level strategies

To support cancer survivors living with and beyond cancer, a focus on cancer survivorship is valuable.²⁵⁶ Factors that support a successful return to work include a focus on the person (particularly their symptoms, work abilities, motivation and coping), their environment supports (across family, workplace and professional support), and occupational considerations of the type of work and work flexibility.²⁵⁷ Cancer Council NSW published a practical guide—*Cancer, work and you*—which provides useful information for workers and employers on their obligations, rights and entitlements in the workplace.²⁵⁸ Drawing on this resource, major positive factors that support effective transitions for those experiencing cancer diagnosis and treatment include the following:

- **Take a person-centred approach by treating people with compassion and respect.**
- **Provide workplace flexibility, particularly around time and conditions of work.** Examples include flexible start and finish times, time off to attend medical appointments and returning to work in stages.^{243, 258} This is consistent with employer obligations under the Disability Discrimination Act to make reasonable adjustments to accommodate the effects of a worker's cancer diagnosis/treatment.
- **Implement supports,** including temporary alternative duties and provide adjustments such as ergonomic work tools. This reduces the burden on workers and supports their mental health and wellbeing.
- **Regularly evaluate any adjustments** and continue to modify them in line with the worker's needs and preferences.²⁵⁹ The individuals should, as far as possible, be offered autonomy in what they take on and how they meet job requirements.
- **Encourage communication and transparency with team members to clarify expectations and enable the team to offer support and assistance.** Be clear on what information the worker wants to share (and what they do not) and how confidentiality will be respected.
- **Support co-workers.** Someone being diagnosed with cancer can trigger memories or experiences for others.

- **Create and document a return-to-work plan** if the worker takes time off work. A return-to-work plan helps with communication and expectations for all parties.²⁶⁰ Identify who is responsible for monitoring the return-to-work process and/or plan, and planned follow up meetings.
- **Acknowledge not everyone will want to communicate their experience with peers and other team members.** This is an important consideration, especially if the person needs additional leave or temporary time off for treatment. On returning to work, people may need additional workplace adjustments due to disability or long-term physical impediments.
- **Consider how to manage a terminal diagnosis.** Some people experiencing cancer may receive a terminal diagnosis, which will affect them and their co-workers. These situations must be approached with utmost respect for the person, e.g., thinking through issues such as **how to best manage communication and farewells.**
- **Promote cancer screening.** The long-term effects of delayed screening and medical care during the COVID-19 pandemic will not be known for some time. Employers can promote preventative health activities, and consider offering screening programs at work through health safety and wellness initiatives.²⁶¹

Individual level strategies

- **Tap into the cancer care team (including their GP)** to assist with return-to-work planning. They can provide **referrals** to occupational therapists and/or occupational physicians for additional assessment and recommendations, and can offer key emotional, psychological and physical **support and monitoring.** Letters from treating clinicians can help **communicate needs and flexibility requirements** to employers. An important consideration may be whether the workers is immune-compromised and whether this will their work arrangements.
- **Use strategies to help manage challenges with thinking and memory.** Strategies include using lists, setting reminders and putting clear daily structures in place, while trying to reduce distractions (e.g., noise in particular) and the need for multitasking. Having realistic expectations of oneself, and then communicating these expectations and needs to others are both key.
- **Schedule regular breaks** in the calendar as protected time to manage fatigue. This could typically be part of a gradual return to work and flexible duties.
- **Work closely with employers and managers around proactive communication with team members, colleagues and clients, when needed.** This includes being clear on what information the worker wants to share (and what they do not) and how confidentiality will be respected.

Gaps in the literature

Despite the personal and economic importance of returning to work following cancer treatment, there is relatively little evidence regarding workplace strategies to support the mental health of cancer patients, or indeed other chronic health conditions. Most Australian research focuses on occupational causes of cancer, rather than supporting cancer survivors of working age as they move through treatment and potentially return to work.²⁴³

Further, studies that do exist appear to explore return to work as an outcome, and not a process, which is both continuous and complex, and involves significant transition.²⁶² Some preliminary findings suggest workplace-oriented interventions from multidisciplinary treating teams (e.g., work ability or ergonomic assessments, workplace empowerment training), cognitive behaviour therapies and coaching for self-management of chronic disease may help.²⁶³ However, further work is required to determine what best practice may look like, and identify factors that impede or facilitate mental health and wellbeing for individuals in the workplace.²⁴³

Menopause

About this transition

Women¹ aged 45 years and over are a growing segment of Australia's workforce,^{37, 264, 265} with over 1 million working women currently experiencing, or having already experienced, menopause. Menopause is the final cessation of a woman's menstrual cycle that usually occurs between the ages of 45 and 55, marking the end of fertility.²⁶⁶ This is a natural life stage for anyone who menstruates, including some transgender men and non-binary people,²⁶⁷ rather than a medical condition; it is more common than pregnancy or motherhood. A small number of women can also experience premature menopause (occurring before 40 years, impacting 1% of women) or early menopause (40–45 years, around 5% of women).²⁶⁸

These conditions can affect mental health and wellbeing. Premature or early menopause can happen spontaneously, or be caused by medical treatments such as chemotherapy, radiotherapy or surgical removal of both ovaries.²⁶⁹ While the menopause itself is technically a single point in time, the process of ceasing menstruation takes years, so it is more aptly described as the menopause transition. As a topic, menopause and its impacts²⁷⁰ suffers from ignorance and stigma and is under-researched broadly. However, the menopausal transition represents a complex life period with unpredictable timing and complex biological, psychological and social changes.²⁷¹

The mental health impacts of menopause are less well-known than physical symptoms, such as hot flashes, but are almost as common. During perimenopause (the time leading up to the final cessation of periods) many women experience changes in mood and cognition, including an increased risk of anxiety, panic attacks, depression, and concentration and memory difficulties, either for the first time, or with increased severity. But, screening rates are low.²⁷² Insomnia, which is also common during the menopause transition, exacerbates these symptoms.²⁷³

The menopause transition continues on average for 4 years,^{266, 274} although symptoms can last for 5–10 years.²⁷⁵ The range of symptoms can affect personal, social and work lives considerably.²⁷³ Notably, around 20% of people experience symptoms that are severe and long-lasting, while 20% experience no symptoms.²⁷³

Given the variance in symptoms and associated stigma, the exact prevalence of perimenopausal distress is unknown. In a recent Australian study, 83% of women reported their symptoms negatively affected their work,²⁷⁶ while international studies report rates of 60–70%.²⁷⁷ Symptoms that impact work performance include sleep disturbance, headaches, weakness or fatigue, anxiety, memory loss, trouble concentrating, pain in bone joints and hot flashes, with psychological changes often preceding physical changes. In 2022, 44% of women experiencing menopause reported impacted ability to work, with 10% leaving work due to menopause symptoms.²⁷⁸

During this transition, many women report feeling less engaged with work and a sense of secrecy and isolation. The literature describes menopause (or more correctly, perimenopause) as a 'silent issue' for most organisations; most women do not know what to expect, and it is rarely discussed or disclosed.²⁶⁶ Menopause-specific support or information is lacking, which adds to the challenge of managing symptoms at work. Women experiencing perimenopause also fear age-related and gendered discrimination.²⁷⁹ Most literature on this topic refers to these workers as 'older workers', which may be an alienating term. Many women feel reluctant to raise menopause with

¹ Transgender individuals and those identifying outside the gender binary may also experience menopause. However, the existing resources and language are almost exclusively focused on cisgendered women, hence this document is written with that focus in mind.

their managers due to fear it will negatively affect perceptions of their performance.^{278, 280} Most women do not want to be 'singled out' but do want organisational policies and workplace support.²⁷⁹ Proactively planning for women experiencing the menopausal transition can benefit workers and organisations through improved wellbeing, engagement and retention.²⁷⁹

Women also report being less confident, anxious about performance and reluctant to put themselves forward.^{272, 279} Women with greater perimenopausal-related symptoms are less engaged and satisfied with their work, with greater intentions to quit their job and lower organisational commitment.^{266, 276} One Australian study found 45% of participants considered quitting or leaving during perimenopause, while 28% retired during this transition.²⁷⁶ Potential impacts on productivity are hard to establish. While some women report impacts, objective studies suggest no changes, and women may compensate with extra hours to make up for perceived losses.²⁸¹ In fact, some findings suggest menopausal women may perform better than their younger colleagues.²⁸²

It is difficult to establish clear relationships between these factors and perimenopause, because they can co-occur with other life events such as children moving out of home (the so-called 'empty nest'), caring for frail or ill parents and the potential loss of parents or partners.²⁷³ This is also a time when many women are reaching career peaks and taking on more senior roles; some associate menopause with positive outcomes such as increased energy, or enhanced self-beliefs and greater perceived autonomy.²⁸¹

Survey and interviews with perimenopausal women describe a lack of menopause-specific support or information at work,^{266, 279} which can make managing symptoms challenging. In addition, many women are unsure whether line managers have training in awareness of menopause in the workplace.²⁶⁶ There were varying views about whether organisations should or could introduce perimenopausal-specific policies, or whether that would only marginalise or problematise women aged 45+.²⁶⁶

Strategies and opportunities to support successful transition

Organisation level strategies

- **Acknowledge menopause as a common event.** One of the biggest sources of stress during menopause is trying to hide it. Talking about menopause in a neutral or positive manner can help shift the stigma. It is also important to accept the variability of experiences, and avoid implicit assumptions that menopause is problematic in the workplace. But remember, women's experience of menopause is diverse and not all women need or want workplace support.
- **Using real workplace data,** engaging in genuine consultation and participatory processes is important in identifying the needs of those experiencing menopausal transitions in the workplace.²⁸²
- **Train managers** on menopause-related symptoms to create a supportive culture. Ensure leaders are proactive in creating a supportive culture—do not leave it to women to raise their needs. Managers, particularly men, may need training on ways to conduct empathy-based professional conversations with women on this topic.²⁶⁶ Indeed, high supervisor support, full-time employment and control over workplace temperature were associated with reduced reporting of menopausal symptoms in one Australian study.²⁸³
- **Appoint a key contact person in the organisation,** and upskill the occupational health team to respond sensitively. This will help to provide a contact point for help and advice, for workers and managers.²⁸⁴

- **Encourage all workers to cultivate a supportive culture of acknowledging menopause as part of life** and understanding the impacts of this transition. Demonstrate you are aware that this transition is a temporary life stage and that ageing presents health challenges for all genders.
- **Develop a safe and supportive organisational culture where** perimenopausal health is considered **within the context of gender and ageing equity, and gendered ageism**. Most women do not want formal management or 'intervention' for menopause, but rather organisational understanding and support, which sends a broader message to women aged 45+ that they are welcome in the workplace.
- **Collaboratively develop strategies** to address working conditions that exacerbate menopausal symptoms and avoid discrimination. Rather than seeing menopause as a personal weakness, treating it as a temporary life stage with specific needs can reduce risks of discrimination. Practical approaches to assist workers include **specific menopausal leave entitlements** (including return-to-work plans for women with severe symptoms), **flexible work arrangements**, and the ability to **adjust conditions** in their immediate environment (e.g., working from home as required, desk fans and rostered breaks from wearing PPE such as face masks, ergonomic support for those experiencing headaches, comfortable clothing, access to toilets and drinking water).²⁸⁵
- Recognise potential sleep disruptions and provide supports such as **temporary changes to shift patterns or the ability to swap shifts**, as well as flexible working arrangements (e.g., a later start and finish time). Additionally, staff can be empowered to work from home on an ad hoc basis if they have had a rough night.
- Use work health and safety expertise to provide **risk assessments** and develop a plan for **reasonable adjustments based on symptoms** such as migraines or joint pain. This may also require expertise (e.g., occupational physicians, who can help develop monitoring systems to identify and support those experiencing severe perimenopausal symptoms).²⁸² If required, the worker's health professionals may be able help **communicate needs and guidance on appropriate supports**.
- **Address the increasingly sedentary nature of professional, office-based work**²⁶⁶ which is associated with increased perimenopausal symptoms. Encourage movement beyond the desk.
- More broadly, **provide reliable health education and resources for women via internal websites**. This would help women know what to expect, rather than experience menopause as an 'unanticipated event'; 2 in 3 women report they did not know what to expect in approaching menopause.²⁷⁶
- **Increase social connection** through workplace support groups, mentoring and coaching, all of which will reduce isolation of those experiencing menopause.
- **Provide women with access to external support** to cater for women who want to maintain their privacy.
- **Notice and appreciate the qualities that older female workers bring to the organisation**. This could include their steadiness, experience, insight or wisdom. Women are a reliable, committed and resilient segment of the workforce.
- **Embed menopause into existing policies** (e.g., flexible work or fatigue management) or list of reasonable adjustments. Some organisations opt for a menopause policy to help bring about a culture shift and to make organisational supports explicit.

Individual level strategies²⁸⁰

- **Educate** yourself about this life transition and the steps you can take to help yourself.
- **Have fans or a water spray available and dress in adjustable layers** to ease hot flushes.

- **Adjust diet and nutrition** to help meet the needs of a changing body, boost energy levels and mitigate perimenopausal fatigue.
- **Increase active movement**, such as walking at meal breaks. Exercise can help reduce hot flashes, boost mood, reduce anxiety, promote sleep and aid concentration.
- **Take regular energy breaks** to help reset energy, focus and mood.
- **Adopt brain-friendly work styles such as** minimising multitasking, and scheduling distraction-free time for important focused work.
- **Keep the lines of communication open with management** to request flexible work arrangements or other accommodations, if needed.
- **Get advice from health professionals who are knowledgeable about menopause and treatment options for symptoms.** Treatment options including menopausal hormone therapy (MHT), and/or lifestyle changes, can help to manage symptoms such as hot flashes and protect heart health and bone density.
- **Keep perspective**, by remembering menopause is a temporary life stage, and the benefits of women's workplace contribution.

Gaps in the literature

The above strategies are largely based on organisational practices and experiences, rather than on peer-reviewed literature. Literature addressing perimenopausal transitions in the workplace is scarce, and almost none considers strategies to help organisations manage such transitions more effectively. However, strategies that implement menstrual flexibility and a positive menstrual culture at work may offer some potential models.²⁸⁶ Additionally, the impact of COVID-19 on perimenopausal women is unclear. While research is investigating the impacts of additional care work during the pandemic, which was disproportionately carried by women, no research is considering perimenopausal transitions.²⁸²

Gender transitions and affirmation

About these transitions

Another, less frequent, but significant, health-related transition is gender transition: when individuals move from presenting as their assigned sex at birth to expressing a different gender identity.²⁸⁷ The experience for transgender individuals is diverse. It can range from personally presenting as gender-fluid and changes to preferred pronouns (e.g., they/them), changes in attire and presentation, through to hormonal and/or surgical gender affirmation interventions. However, little information has been collected on the experiences of gender transitions in the workforce.²⁸⁸

Gender transition can be both a legal and a physical process. In some countries, such as the UK and the USA, individuals transitioning from male to female (MtF) and from female to male (FtM) must undergo a 'real life experience' before receiving gender affirmation surgery.²⁸⁹ During this period, individuals must fully present as their affirmed gender in all areas of their life, including the workplace. Transitioning in the workplace can be a highly stressful period and renders transitioning workers vulnerable to health and safety issues, including workplace harassment and bullying by colleagues, managers and clients.²⁹⁰⁻²⁹³

Gay, lesbian, bisexual and transgender and gender diverse workers may experience some common issues in the workplace. However, transgender individuals are typically a smaller minority than lesbian, bisexual, and gay individuals, and so face additional challenges that can make them feel

more isolated at work.²⁹⁴ Significant challenges can include being perceived as ‘deviant,’ and departing from gender norms, increased prejudice and discrimination as a member of a minority group, concerns about identity management and decisions about how much personal information to share with co-workers.^{290, 295} Those who undergo gender affirmation surgery may encounter unique social, physical, and psychological challenges.^{296, 297} General attitudes towards transgender individuals are often more hostile than those towards gay, lesbian or bisexual individuals,²⁹⁴ and can lead to more severe outcomes.^{296, 298} Some social relationships will also change for the worse. Many trans people will be rejected by co-workers, friends and family members, potentially leading to depression, anxiety and suicide.^{295, 299}

Changed perceptions of competence are also common and can have significant financial and psychological impacts. Those who transition FtM can experience no change or a slight increase in pay, and no change in views of competence. However, those who transition MtF can experience a significant decrease in pay, status and perceived competence. Notably, keeping silent on their experience due to risks of discrimination is a factor when deciding to disclose affirmed gender. Some individuals keep the matter private because the consequences of disclosure may seem greater than the benefits. Many individuals experience burnout and eventually leave their organisation if they feel they have to deviate from their authentic self to fit with organisational values.³⁰⁰

Strategies and opportunities to support successful transition

Organisation level strategies

Transgender people who feel supported and accepted at work have a better chance of completing their transition. Organisations that develop LGBTIQ+ inclusive practices benefit from positive worker attitudes, higher quality work and staff retention. For example, healthcare and community services agencies can become a Rainbow Tick accredited provider across 6 standards. A Gender Agenda³⁰¹ developed *Supporting gender transition in the workplace: A toolkit for ACT employers*, which provides valuable organisational strategies:

- **The ‘first contact’** that a worker makes with their management team to signal their intention to transition in the workplace is critical. The manager plays an essential role in helping to facilitate a smooth, discrimination-free experience for the worker by **involving the individual in all steps, respecting their decisions** around privacy and confidentiality especially in the early stages and providing a **support team** of management, colleagues, representatives and/or external parties who support the worker’s wellbeing.
- **Practical supports** should be provided. These can include **gender transition leave, access to preferred facilities** (e.g., toilets), **suitable uniforms** that match the person’s gender identity, and **modifying documentation and records** to reflect the person’s preferred name and pronouns, acknowledging the worker’s gender identity and demonstrating respect and acceptance.³⁰²
- Be aware of and **actively manage implicit bias**. For example, FtM individuals are afforded greater authority and respect from others after transition.^{303, 304} Conversely, MtF individuals report that their competence was devalued after they transitioned; trans women were assumed to be less skilled and less knowledgeable.^{305, 306}
- Be aware of **workplace discrimination**. Evidence shows many trans workers are dismissed after transitioning, purportedly for competence-related reasons but more likely due to prejudice and discomfort on the part of employers.^{287, 307} If transgender individuals ‘come out’ as their affirmed gender, they can reap the rewards of complete identity integration. They may also more easily navigate HR policies and workplace relationships, which are ultimately likely to produce better personal identity and psychosomatic outcomes^{308, 309} and workplace attitudes.³¹⁰

- **Encourage greater organisational awareness around transgender individuals.** Even a low level of background knowledge can support more positive attitudes.³¹¹ Failing to acknowledge and hear transgender voices demonstrates a lack of commitment by employers to support transgender workers and create a fully inclusive workplace environment. This, in turn, deprives organisations of the benefits that can arise from becoming more inclusive. For example, inclusive environments enhance worker attitudes,³¹² and are associated with higher work quality.³¹³ Supportive diversity environments can also report higher sales per hour,³¹⁴ higher levels of sales growth and higher customer satisfaction.^{315, 316} Not feeling safe and accepted in the workplace can have a deleterious effect on trans workers' productivity.³¹⁷
- **Include transgender and gender diversity issues within broader diversity and inclusion training.** For example, this could include information about trans identities, pronouns and gender inclusive language.³¹⁸ However, diversity initiatives should not be compliance activities and 'box-ticking exercises', but genuine and deeper engagement. Examples include face-to-face learning, scenarios and role plays, awareness raising and a focus on issues of concern for transgender and gender diverse staff and clients.²⁹⁸ Transgender voices are worth listening to for their own sake, so that the workplace experiences of trans workers are understood and improved, and to contribute to a safe and productive workplace for all staff.
- **Support lived experience groups and peer mentoring support.** Look for opportunities to establish a queer or trans support group in your workplace or industry. This could involve external support, or allowing LGBT+ staff in the workplace to plan and implement such projects. Such time commitments should be acknowledged, with paid time allowed in the work plans of transgender and queer workers to attend meetings. For smaller businesses, this could also be enabled by establishing queer mentoring programs within your sector.
- **Provide access to suitably skilled Employee Assistance Programs (EAPs).** It is important that your EAP services include practitioners who have expertise in supporting transgender and gender diverse individuals in the workplace.³¹⁸ Many individuals experiencing gender transitions feel they have to educate the professional staff around them, such as medical practitioners and counsellors, about their specific health needs. An EAP provider with relevant training and experience can reduce this burden and make the service more useful.
- **Train your HR team** on the health needs of transgender and gender diverse workers.
- **Provide a confidential point of contact** so transgender or gender-questioning workers can discuss plans and raise any complaints. A designated HR team member (either the same, or a different individual) can support managers and co-workers who have questions about how to best support transgender workers.

Individual level strategies

- **Find a good healthcare team** who specialise in gender affirmation and can link you to relevant support services. Services should follow guidelines regarding standards of care, such as those developed by the World Professional Association for Transgender Health (www.wpath.org). This can help to explore your options about forms of care in a safe and positive environment. While some gender-diverse individuals can find it hard to trust health professionals, it is important to find someone you feel comfortable with. If you are in a regional or rural area where services are more limited, telehealth services may be an important part of your care.
- **Focus on physical and mental health.** As far as possible, maintain a healthy diet and sleep routine, reduce use of drugs and alcohol, and engage in regular exercise to help improve mood and connect with your body in positive ways.

- **Build personal resources**, e.g., connect with positive family, friends and peers, take time away from social media and engage in self-care.
- **Take time** to discover what feels right for you in how you express your identity and gender. This does not have to meet others' standards or stereotypes.
- **The right support is key.** For many trans and gender diverse individuals, starting to present as your felt gender identity can raise mixed feelings. It can be both anxiety provoking (in relation to concerns about the reactions of others), but also build confidence (in their ability to live in their affirmed gender role), support at this time is crucial to protect mental health and wellbeing.

Gaps in the literature

As an emerging area of research and scholarship, literature regarding gender transitions in the workplace and the impact on mental health and wellbeing is quite limited. There are gaps in longer-term evaluations of strategies and approaches. Such longitudinal work would complement existing and developing literature, and importantly, all research should include those with lived experience, rather than targeting them as an 'othered' group.

6: Relocation transitions

About this transition

Australians are highly mobile, with 40% of the population changing their residence every 5 years.³¹⁹ According to the Australian Bureau of Statistics, in 2021, Australians relocated more than ever, largely between states and from metropolitan cities to regional areas.³²⁰ This has been partly attributed to the COVID-19 pandemic. But, it also reflects longer-term migration patterns between capital cities and regional areas across Australia³¹⁹ and different push and pull factors in different regions. By 2030, an estimated 1.35 million Australians will live overseas, with one-third in Asia,³²¹ although Covid-related impacts are difficult to determine.

Most decisions to relocate are associated with age and key life events, such as education, entering the labour market, career opportunities, seeking to improve personal and financial opportunities and forming relationships. Young adults are the most mobile population segment.³¹⁹ Many individuals relocate for personal and financial opportunities.³²² Youth also move for economic independence or advanced education.³²³ Demographic factors historically favour young people moving from regional areas to capital cities. Older adults are less likely to move, but when they do, are more likely to move from capital cities to regional areas.³¹⁹ Workers often follow job opportunities to improve their life situation or for financial necessity. Relative access to jobs and house prices also influences decisions to move within states or territories.³²⁴

In addition to event-related reasons, relocation can also be considered as either voluntary (i.e., moving for familial or personal reasons), or involuntary (i.e., triggered by external events such as workplace relocation or closure). These changes can affect workers' mental health and wellbeing, given the social impacts and potential costs and rewards.

Risks and mental health and wellbeing challenges

Relocating is a significant life event associated with a 'high risk of uncertainty and stress' for workers³²⁵ and their families.^{326, 327-330} It often involves multiple life changes, all of which carry potential stress: new roles, finances, partner's employment and educational engagement for children, immigration, living conditions, work hours, responsibilities and conditions, residence, social activities and access to family. It involves operational and emotional stressors, culture shock and adapting to the new location, potential discrimination, workplace etiquette, family and relationship challenges, and readapting at the end of finite relocations.³²²

Operational stress includes stress involved with starting a new job: new expectations, management and practices. Some unease is unavoidable, and can be very stressful, especially initially. Although it may not be vocalised or even valid, workers relocating can perceive pressure to perform, fit in and get up to speed as quickly as possible, given the costs and prestige associated with being selected. Often companies have invested in talent and upskilling, so the relocation involves greater work responsibilities which can add to stress. However, whatever the reason for the move, operational stress usually dissipates over time,³²² and can be managed as an aspect of work-related stress, with reasonable job demands, good support and a level of autonomy and a healthy psychosocial work climate.^{331, 332}

Emotional stress³²² is far less predictable, and more likely to be prolonged and place longer-term strain on the relocated person. Emotional stress presents a risk to mental health and wellbeing and is associated with being 'homesick' from a loss of existing social networks³³³ and sense of place

attachment.³³⁴ Most people have a 'sense of home'—an emotionally based zone of comfort, which can support and strengthen them in difficult times.³²² Relocated workers may not realise their emotional bonds for 'home' have been fractured or severed. Employers, too, may lose sight of, or ignore, a person's 'sense of home' when considering relocation, whether employer or individual-initiated. A challenge with relocating can be learning how to cope with being away from normal support networks, which can result in feeling lonely. While the experience can positively push people out of their comfort zones, it can also feel isolating at times. Many relocating workers struggle with loneliness and missing home and their network of family, friends and wider community (e.g., religious, sporting, hobby, volunteer and other social groups). If the relocation is overseas, they can also find it difficult to make new connections, especially if there is a language barrier.

Culture shock refers to disorientation when subjected to an unfamiliar culture, environment or way of life.³³⁵ This can include moving within Australia. Culture shock can lead to anxiety, excitement, loss of confidence, loneliness and uncertainty. Differences in living standards and norms may cause discomfort. Cultural issues are often overlooked when moving to seemingly similar locations. At times, these situations are assumed to be less stressful and therefore require less preparation. However, poor preparation is anecdotally associated with higher stress than a well-prepared international move with greater recognised adjustment needs.

The destination itself may also cause additional stress. For example, moving house is one of the top 5 most stressful situations individuals experience.³³⁶ Relocating is a significant upheaval and is associated with uncertainty and stress for workers and their families. Those moving to high-risk destinations requiring further security experience even greater anxiety associated with limited choices about where to live, restricted travel options, security personnel and contingency and emergency planning. Differences in living standards and norms may cause discomfort; some arrangements may be considered of a lower standard or perhaps more expensive, with challenges around obtaining standard goods and local restrictions (e.g., bans on public alcohol consumption). Destinations where residents have live-in staff can be challenging for people who find it disruptive or intrusive. Remote or harsh conditions such as mine sites and deserts can compound isolation pressures and weather disparities can impact lifestyle choices.³³⁷

Relocating workers and their families can experience discrimination. Sexual orientation, religion or gender can prompt discrimination within Australia and particularly overseas. Someone with a disability or a family member with a medical condition relocating to a less-resourced location may experience discrimination.³³⁸ Relocations to improve diversity can be challenging for both the individual and the organisation. For example, increasing numbers of women in mining locations must be managed to avoid risks of gender-based harassment.

Workplace etiquette can be a significant issue for relocated workers. Within workplaces, even in the same organisation, communication differences can be significant, particularly manager/team relationships, the degree of formality, modes of giving and receiving feedback, accountability and humour. Those who previously deployed such tools well in their home environment may struggle in a new location, which may affect confidence and effectiveness.

Family and relationship pressures can be profound, affecting the worker and their family.³²² As well as work pressures, workers are usually concerned about ensuring partners or family members are comfortable and confident with the relocation. This can include extended family or elderly parents, who may experience reduced support. A partner or spouse may need to leave their own job and have limited work options due to immigration laws in some destinations, placing additional pressure on the relationship and family.³³⁹ Relocating can impact a worker's engagement at work;

research shows spousal/partner adjustment to a job transfer affected the worker's performance and job satisfaction.³⁴⁰ Adolescent children can experience increased distress, partly due to problems in establishing social relationships.³⁴¹ Some research suggests workers whose families have well-established social networks in their community are perhaps less well equipped to effectively manage relocation transitions.³⁴² Further, sociological and epidemiological studies suggest higher rates of suicide among relocated workers than non-movers, especially younger movers.³⁴³

Lastly, **repatriation and the end of finite placements** can be challenging. Some international relocations may result in workers no longer being suitable to return to roles in Australia due to seniority or specialisation. Workers may choose to continue their career internationally, with associated considerations for themselves and family, or return to redundancy.

For relocations for defined and finite periods, returning home can present its own challenges: re-integrating children into old schools or finding new schools, re-establishing old social and personal networks, and re-integrating with the company, but potentially at a higher level than previous colleagues. Attention to attrition and retention post-relocation is critical, particularly when a worker now has more marketable skillsets, or is unhappy on return.

The potential impacts at individual, team and organisation levels

Relocation is a significant life event, potentially affecting people's mental health and wellbeing in both the short and long term. For the individual, relocation costs money, takes time, and can be aggravating, stressful, and potentially damaging to the family structure.³²² Home and, perhaps more accurately, one's 'sense of home', is left behind for work, career and financial or other opportunities,³²² whether temporarily (e.g. fixed-term secondments) or permanently. A 'home' near friends and relatives and a life grounded in valued memories and experiences is exchanged for a house, or apartment, in a new place, among strangers.

Stress, adjustment problems and loneliness are potential risks, and in the case of relocation failure, loss of self-esteem. Relocation failures can occur for a range of reasons, both organisational and personal. Workers may terminate the relocation due to unsustainable impacts and compromises for them, their partner or children, or due to changes in circumstances (e.g., parent illness). This can trigger clauses that involve significant financial repayments. While self-initiated moves (i.e., applications for transfer and/or promotion by the individual, rather than requests by the organisation) may receive less formal and organisational support, they are typically characterised by similar issues. A worker's perceived level of control over the relocation (i.e., voluntary or involuntary) can have varying impacts on their personal mental health and wellbeing.

Gender and age may also be important factors in adjustment to relocation.³⁴⁴ Because geographic moves are most often initiated to further men's careers, men tend to evaluate relocation experiences more favourably than their partners. The impact on families is also significant. Partners of men transferred for job related reasons report high levels of depression, with boredom, loneliness and feelings of loss, sadness and vulnerability.³⁴⁴ Partners may have to take on many of the logistical responsibilities associated with moving, as the worker adjusts to their new role. This often includes being the main contact for relocation companies and services, and organising visas, vaccines, flights, schooling, medical, housing, utilities, freight, selling and buying property, cleaning and inspections, packing and unpacking household goods and insurance. Partners may feel pressure to find work for financial reasons, or may experience resentment if immigration restrictions inhibit their ability to work. Partners can experience additional isolation or added responsibilities if the worker relocates to a remote worksite, or is engaged in fly in fly out (FIFO) work.

Dependent children may be worried about fitting into new peer groups, while maintaining ties to old friends, especially if there are plans to return to the original destination. They may also enter the school year out of schedule, or be presented with curriculum at different levels. For this reason, some expatriate children enrol in International Baccalaureate programs, which are scholastically demanding, and may not be a good fit for all.

Lastly, relocating pets can bring significant pressures. Australia has one of the highest rates of pet ownership per capita,³⁴⁵ and surveys of Australian pet owners suggest the vast majority view animals as family members.³⁴⁶ Relocations are stressful for pets, which can in turn impact the wellbeing of their owners. In particular, international relocations often require extensive quarantine periods, and may not be feasible for some pets, especially older animals. It can involve difficult decisions around whether to leave them behind or subject them to quarantine.

Relocations also impact teams and organisations: a single relocating worker may have many touchpoints, including internally with senior management, old and new business managers, human resources, talent and recruitment management, and with external suppliers, clients and stakeholders. All may be impacted positively or negatively. Relocations of entire teams or workplaces involve significant team and organisational impacts given the scale of change for all involved.³⁴⁷

There is sparse research about the team or organisational impacts of individual-level relocations. However, expatriate success and corresponding psychological capital offers positive organisational benefits, while relocation failures are financially costly and can negatively impact corporate reputations.³⁴⁸

Strategies and opportunities to support successful transition

Organisation level strategies

Teams and organisations play an important role in supporting relocation preparation and successful integration:

- **Assess the worker's readiness for relocation,**³⁴⁹ and their familial attachments, ties and requirements. **Cross cultural training** may be appropriate for international moves.³⁵⁰
- **Ensure the worker has well-documented copies of their relocation terms and conditions** and has been guided through them, providing the opportunity for any questions.
- **Offer practical support and resources** to help workers, especially those with families, to find and access their support needs. Support could include information about childcare, schools and colleges, community and sporting groups, spiritual groups, healthcare services and other forms of social and emotional support. Practical short-term measures such as **assistance with transport** on arrival, and a **local buddy**, can help with integration. A **relocation handbook** (online or printed) for relevant destinations could assist, including contact information about local activities, events and happenings to give workers opportunities to get to know their local community. Organisations may consider offering a paid 'familiarisation visit' so the worker and their partner (plus accompanying children if beneficial) can build awareness and insights into the proposed relocation and any challenges.
- **Provide information about local cultural, professional and working practices,** such as changes in working hours, communication styles or other nuances. Information about local taxation and governmental requirements, banking and other financial matters is also valuable.
- **Encourage managers to meet more regularly with the new worker,** particularly in the first few months to provide support and guidance. Organise a 'welcome' to introduce the worker to the

team. Resourcing inclusive team building activities and events can also be helpful, as well as providing any additional training.

- **Provide financial support for the physical relocation**, such as assistance with transport and housing costs, packing and shipping personal belongings, and helping a partner or children settle into their new home, and visas and taxation assistance for international relocates. Other financial supports could include vouchers or payments so workers can try out new local facilities (e.g., gyms, social and community groups or local restaurants). Practical and instrumental supports help workers and their families adjust and find their new normal.
- **Provide organisational and financial support for the partner or family.** Extended support is critical for a successful transition. Family support is one of the strongest predictors of psychological adjustment of expatriate partners to relocation,³⁵¹ and employer-provided spousal support is critical to enhance spousal adjustment and reduce expatriate failure rates.³⁵¹ The most common reason for assignment failure is inadequate organisational support for the worker and their family, leading to inconsistencies between workers' expectations of organisational support and their perceptions or lived realities.³⁵² Support may include paying for school or childcare fees; this support positively influences adjustment in a new location.³⁵³ An organisation may also allow the worker and family members to return home, often annually, to help maintain both workplace and social connections. Family support can reduce the worker's relocation stress by managing expectations of difficulties and offering ways to solve problems.³⁵⁴ This is particularly important for vulnerable groups, such as migrant or refugee workers, who may have fewer personal resources.³⁵⁵
- **Provide financial support for workers in 'hardship locations'**, such as remote areas or relocations with a high degree of adjustment between old and new destination.
- **Consider temporary placements in relocation policies.** Workers who 'fly in fly out' (FIFO) of remote or dangerous locations are vulnerable to relocation impacts and mental health issues, especially when they are away for long periods from any family members, social networks or pets. They can be particularly vulnerable to loneliness, because they are less likely to invest in establishing relationships in the new location.³⁵⁶
- **Consider 'peer-to-peer' support.** Introduce relocating workers to work colleagues who can provide further guidance in the initial weeks/months. Encourage partners to develop a social network to support themselves and any children.
- **Provide cross cultural training for international moves** including explicit information about local cultural, professional and working practices.
- **Consider providing mental health resources.** This could be sessions with a trained counsellor or internal human resources, or documented ideas on how to build social networks (e.g., business networks, volunteering, hobby groups, sporting or music clubs, school or community groups) and where to reach out for further support.
- **Consider an end-of-relocation interview** to gain further insights and to manage any issues.
- Some companies offer **flexibility in policies and procedures**, which is desirable, but should not compromise issues of health and safety. For example, rather than flights being booked centrally, workers may receive a cash allowance to organise their own flights. However, it is still important to encourage safety, (e.g., business class for long-haul flights, which are more appropriate from a health and safety perspective, especially when people work immediately after the flight). Managing exception requests is common and must be handled promptly, consistently and sensitively to promote equity and minimise anxiety.

Individual level strategies

The better the **pre-move relocation preparation**, the better the person's post-move mental health and job-related contentment and enthusiasm.³⁵⁷ Some key recommendations for workers include the following:

- **Seek out information** about the relocation, and speak with others, especially those with experience of a similar relocation to set realistic expectations.
- **If possible, spend time in the new location before making a permanent commitment** to increase confidence in the decision to move.
- **Arrange to speak regularly with the new manager and any human resource specialists** who can provide ongoing support and guidance, and clarify terms and conditions to reduce misunderstandings about costs and challenges.
- **Find out about local services, cultural norms and nuances** (even if moving from metropolitan to rural areas) and if relevant, learn local languages and customs.
- **Engage with the local community** to help build a sense of belonging. Consider joining business networks, hobby groups, sporting or music clubs, school or community groups to expand your social networks and support. Develop friendships with like-minded work colleagues and neighbours. If a dog owner, visit local known pet parks to meet other pet owners. Actively engage with local activities and events to meet others living nearby.
- **Enable children to maintain existing support groups** whether online or in person, especially if you expect to home and their old school.
- **Recognise** a relocation can have a high degree of uncertainty or stress and **seek support for mental health as needed**. Organisations often provide these resources or speak with your local GP.

Gaps in the literature

Australian research about outcomes and strategies to support intra-country relocations is limited. The available literature largely focuses on organisations where relocation is normalised, such as the military, diplomatic services or multinational organisations. However, additional and deliberate strategies are required for less common relocations. Future research could also investigate work and non-work domains, particularly assessing the psychosocial processes underlying perceptions of stress, and coping mechanisms used by those that move without serious difficulty.

Employers need information on the broader implications of relocation stress, especially at the family level. More can be done at the organisation level in reducing relocation stress among expatriates and families. Investigating cost-effective means of supporting relocating workers and their families should be considered a priority,^{354, 355} particularly when extended family members might be impacted, such as older parents.

7: Crises and career shocks

About these transitions

Some life changes are predictable, planned for and occur as and when desired; other events such as separation, bereavement or a pandemic, come 'out of the blue'. These events can be termed *chance events*—unexpected, and perhaps unwanted events, that can cause significant distress and involve loss, including a loss of personal control.³⁵⁸ They cannot be proactively prepared for, and even when known, the effects or impacts are unanticipated.³⁵⁸

Chance events can act as 'career shocks': "...disruptive and extraordinary events that are, at least to some degree, caused by factors outside the individual's control and trigger a deliberate thought process concerning one's career".³⁵⁸ Negative career shocks are "...events that have a potential negative impact on the individual's career".³⁵⁹

Chance events can be both positive and negative, and in fact positive chance events may be more common for career transitions. Research demonstrates we tend to remember events with high impact and low personal control.³⁶⁰ However, serendipitous positive chance events are also common—seen as being in 'the right place at the right time'—and can trigger self-directed career changes. The Chaos Theory of careers^{360, 361} explores this concept. Chance events require people to be flexible, aware of potential opportunities, adaptable and able to plan for contingencies, so that they, and organisations, can take advantage of unexpected events. There is also the potential for positive re-adaptation. For example, studies of the COVID-19 lockdowns are finding workers have embraced the required changes, and are experiencing better working conditions (i.e., greater flexible work) and greater work–life balance.³⁶²⁻³⁶⁵

However, many chance and unanticipated events (and non-events) are unwanted and can bring with them significant distress—bereavement, divorce or separation, work or personal crises. And even when anticipated, these events are still unwanted and distressing, with some loss of control.

Career shocks disrupt and reshape our assumptions of the world and our identity (e.g., divorce means loss of a relationship, social support and perhaps increased financial vulnerability) with impacts on career choices and trajectories. These events or 'career shocks' can trigger people to reassess their career and seek a new path (e.g., change employment or undertake further education). Some people become disengaged. Factors relating to the event can also affect a person's career path. For example, they can be associated with location changes (e.g., moving office) or major changes in routine (e.g., becoming a primary carer).

Many Australian workers are affected by unexpected events. Between 2020 and 2021, 49,510 divorces were granted (i.e., an increase of 8% over 12 months).³⁶⁶ Separation and divorce are consistently associated with negative mental health experiences, particularly when high conflict is involved. Studies show an increased risk for depression and suicide in men after divorce: they experience a 6-fold increase in risk for depression, and are 8 times more likely to die by suicide than women.^{367, 368}

The loss of a loved one is one of the most common traumatic experience. A high proportion of an organisation's workforce is directly affected by bereavements each year. Some bereavements will be expected, but others will be unexpected: around 9 lives are lost daily to suicide in 2020³⁶⁹ and road deaths increased by 2.3% in 2022 (ie., 1,134 road deaths).³⁷⁰

People can also experience *non-events*: events that are expected, wanted and often normative, but do not happen, involving disappointment and loss of 'what could have been'.³⁷¹ For example, miscarriages are not unusual; up to 25% of confirmed pregnancies end in miscarriage before 20 weeks.³⁷² On average, 6 babies are stillborn and 2 die within 28 days of birth every day in Australia.³⁷² While non-events sound benign, they can be particularly challenging to overcome.

Lastly, broader extreme events (e.g., such as fires, floods, droughts, pandemics or even terrorist incidents) can create large-scale disruption, with impacts for individuals, communities and organisations. They must be considered within business risk planning.^{373, 374}

Risks and mental health and wellbeing challenges

Career shocks and unanticipated events can create major and/or chronic life stressors that negatively affect a person's mental health.³⁷⁵ People facing loss experience a great sense of burden, shock and confusion,³⁷⁶ and may report grief; this process affects their sense of self, emotions, relationships with others and life more generally.^{377, 378} This disruption can result in psychological distress and psychological or emotional trauma.³⁷⁹

Unexpected loss of a loved one through death³⁸⁰ is one of the most frequently reported traumatic experiences, and is associated with developing mental health disorders.³⁸¹ Separation and divorce are also consistently associated with adverse mental and physical outcomes.^{382, 383} Non-events can be equally challenging, such as the impact of infertility.³⁸⁴

For an individual, the impact of loss may not disappear after the immediate event is over or when they return to work.³⁷⁸ Workers who experience major loss tend to take increased sick leave, reduce their work hours, show increased redundancy rates, and are more likely to change jobs.³⁷⁶ Their economic wellbeing may also suffer, from reduced work and especially if they lost their partner (i.e., household income may be reduced by half or even more).³⁸⁵

Major unexpected events can also trigger career deliberations and lead to new career path,³⁸⁶ via further education or a new job.³⁵⁸ Work motivation and career goals can also change.³⁵⁹ For example, some people may be less engaged with work, and so do not take career opportunities when they arise.³⁸⁷ Factors relating to the event can also affect a person's career path. For example, some events (e.g., marriage or elder care) can lead to geographical career transitions, such as moving office or locations.

The potential impacts at team and organisation levels

At the organisation level, loss and grief are associated with increased absenteeism, increased disengagement from work and presenteeism when staff return to work.³⁷⁸ Workplace cultures may be impacted if the worker's colleagues have to pick up additional work. Colleagues may also adopt the behaviours and feelings of those around them (i.e., called emotional contagion), which can impact team engagement and attitudes at work.³⁷⁸ Organisations can also face financial costs from unresolved grief.³⁸⁸ Career shocks starting in the workplace, such as a fall-out with a manager or colleagues, are associated with organisational exits and higher turnover rates.^{389, 390}

Strategies and opportunities to support successful transition

Organisation level strategies

- Encourage leaders and colleagues to **acknowledge workers' losses** and career shocks and **offer kindness and practical help to promote a supportive workplace culture**.³⁹¹

- Develop and promote guidelines and policies (e.g., **bereavement policies**) to support bereaved or grieving workers and ensure they receive the right guidance from managers.³⁹² Policies to support workers who are experiencing separation, divorce, and suicide are also beneficial.
- As with all transitions, **position the person in the centre of their decisions**. Provide an open door for conversation if they would like to discuss what they are experiencing and supporting them to lead negotiations on support arrangements. Significantly, separation and divorce can take years to finalise, so support may be required over an extended period.
- **Increase leave entitlements**, such as compassionate and bereavement leave.^{385, 391} Consider offering options for workers to negotiate additional leave entitlements to manage divorce and separation (e.g., extended leave of absence or purchasing additional annual leave to manage school holidays).
- Be aware of **cultural norms** related to bereavement. For example, certain cultural or religious practices require people to engage in formalised rituals, such as returning with the body to a particular region, and observing anniversaries. Asking the person about such practices demonstrates sensitivity.
- **Provide training or group workshops** and guidelines on how to offer information and practical skills on preparing for and responding to a loss. Topics could include how to identify impacted workers, what support they need and how to continually monitor for declining mental health,³⁷⁸ and leader/manager training around supportive leadership behaviours and resources. Staff may benefit from access to career coaching and support, where they learn behavioural strategies to develop a growth mindset, reframe career goals, build strong career networks and seek out training and development opportunities.³⁹³
- If individuals are experiencing **domestic or intimate partner violence**, provide **family and domestic violence leave (including as required by law)**. Have a policy to help people access and plan for their safety, attend court and use police services. Unpaid family and domestic leave is already included in the National Employment Standards.³⁹⁴ However, the recent provisional decision of the Fair Work Commission (May 2022) includes paid family and domestic violence leave for all permanent award workers.³⁹⁵ The organisation can also offer **flexible working arrangements, ensure privacy, implement safety measures and promote access to support services** internally and externally.

Individual level strategies

- **Engage the support of colleagues, friends and families**, especially those who are empathetic listeners.³⁷⁸ If possible, leaders should encourage staff to **access external mental health support**, whether through Employee Assistance Programs (EAPs) or other services via a GP or primary health care provider.
- **Engage with the local community** to help build a new sense of belonging.
- **Maintain a regular routine, structure and self-care** activities as much as possible.³⁷⁸
- **Change work designs and shift arrangements if possible**. Examples include flexible work options and a phased return to work if leave is taken with initial reduced duties.³⁹¹ Temporary reductions in workloads and setting realistic expectations can help to mitigate against staff presenteeism.³⁷⁸

Gaps in the literature

The individual, team and organisation level impacts of unexpected and non-events, and strategies to support workers remain largely unexplored. There is a significant lack of research addressing the impacts of unanticipated events at team and/or organisation levels. While some research examines the role of significant life events in determining people's work adjustment,³⁹⁶ and work engagement and performance,³⁹⁷ studies examining the longer-term career consequences of

life events seem virtually non-existent. Most research examining individual and organisation interventions focuses on how to support individual workers experiencing personal grief, rather than addressing the organisation level strategies to address career consequences of unexpected events and non-events more broadly.

Final Draft

8: Late career and transition to retirement

About this transition

Globally, the population is ageing; the proportion of older adults is estimated to almost double from 12% to 22% by 2050.³⁹⁸ The Australian population aged over 65 is expected to increase from 15% in 2017 to 20% by 2037.³⁹⁹ Further, more older Australians (e.g. 50 years or over) participate in the labour force, rising from 47% in early 2000 to 67% today.⁴⁰⁰ Several factors are driving this demographic change, including increased cost of living, longer lifespans, low fertility rates and longer working lives. The ageing workforce is 1 of 6 megatrends affecting work health and safety over the next 20 years.⁴⁰¹ A significant portion of working Australians fall into the 'late career' category, many of whom are planning for and approaching retirement. In 2018-19, there were 3.9 million retirees with an average intended retirement age of 65.5 years.⁴⁰²

'Late career' refers to the life stage when people adjust to the prospect of retirement. Work-related goals, decisions and experiences are reconsidered, under the influence of personal, social, economic and organisational factors.⁴⁰³ Traditionally, older workers were those aged 50–70 years (although the World Health Organization defines older workers as those over 45 years). However, 2 significant social changes are disrupting the traditional late career and retirement phase of life.⁴⁰³ First, medical improvements mean people live longer and healthier lives, and can work well past previous retirement ages. Second, not everyone is financially able to spend these extra years of healthy living without an income. Changes to pension entitlements and the practicalities of saving sufficient superannuation can limit retirement.⁴⁰³

Individual experiences of late-career vary greatly.⁴⁰⁴ For some people, it is a period of growth, moving into leadership and more responsibility. Others experience a period of maintenance where they continue to work as they previously have. Some people ramp-down work hours, while others pivot into new roles or industries. Sadly, some people find late career decisions are outside their control due to redundancy or personal circumstances.

For many Australians, late career ends with some form of retirement from paid work. The top 3 reasons Australians retire are:

- they reach retirement age or become eligible for superannuation (46%)
- they retire due to sickness injury or disability (21%)
- they are retrenched, dismissed or unable to find work (11%).⁴⁰²

Financial security is the main factor influencing Australians' retirement decisions.⁴⁰² Further, 56% of Australians not yet retired worry about not having enough savings to live comfortably once retired.⁴⁰⁵ Historically, retirement looked uniform, typically an abrupt and permanent exit from full-time work at 65 years. However, this is changing, with many working longer either by choice or necessity.⁴⁰⁶ This trend has been further impacted by COVID-19, with many people having to work longer or re-enter the workforce due to negative financial impacts of the pandemic.⁴⁰⁵ Many Australians are also seeking alternative forms of retirement, including phased retirement, transitioning into unpaid work, entering an entirely new field or starting a business.

Another growing trend is the proportion of people 'unretiring', or returning to the workforce after retiring, often driven by financial need or boredom.^{407, 408} Of the 70% of Australians who plan to take some form of retirement, only 23% plan to retire fully.⁴⁰⁹ Further, 169,000 Australians who had previously retired were planning to look for or take up work in the future.^{407, 408}

The growing proportion of older workers coupled with the changing nature of late career and retirement means organisations and governments must better understand and support people as they navigate this life phase. Improving employment prospects for older Australians offers benefits beyond the financial, with better employment prospects improving workers' mental health and wellbeing, personal identity, self-esteem and social connections.¹

Risks and mental health and wellbeing challenges

People can experience a range of challenges in this late-career stage, which can significantly affect their sense of identity:

- **Increased psychological distress.** Transition to retirement often comes with significant change and loss (e.g., of identity, tasks, meaning, relationships and structure), which can create psychological distress.⁴¹⁰ Large Australian studies found retirement was associated with increased psychological distress for women and men aged 45–64, and for men aged 65–74 years.^{411, 412} Planning for retirement and late-career is complex with people simultaneously looking forward to endless leisure time, worrying about finances, needing direction and purpose, having new and perhaps difficult conversations with loved ones, as well as facing their mortality. Many aspects of this transition feel outside people's control, a key factor making this a difficult and stressful transition.^{411, 412} Often retirees can feel overwhelmed by the adjustments and choices that come with this transition, although this can be largely mitigated by proactive, effective and supportive retirement planning.^{413, 414} Notably, people who retire involuntarily due to illness, disability or redundancy face higher risks of poor mental health in retirement,⁴¹⁵ highlighting the importance of supporting older workers to plan their retirement.^{416, 417}
- **A meaningful legacy,** which goes beyond money or property. When people talk of their legacy, it is about leaving a mark on the world or knowing friends, colleagues or clients have benefitted from their efforts. Late-career planning involves being intentional about legacy, and this may involve changing jobs or ramping down paid work so people can find greater fulfilment in volunteer or family activities.
- **Fear of the unknown.** People are often not equipped to manage unstructured leisure time. Work provides identity, clear roles and routines, as well as social interactions and a sense of purpose and value. Retirement can be associated with a fear of the unknown which can lead people avoiding planning altogether. They suddenly find they have worked full-time right up to retirement without creating new identities and connections in their personal lives.
- **Work adjustments.** Many age-related stereotypes are myths, but most people experience some age-related decline (i.e., strength, sight, hearing, short-term memory), which may or may not affect their capacity to work. However, fear of being stereotyped or discriminated against leads people to hide physical and mental changes. In some circumstances, avoidable injury occurs at work with detrimental impacts on people's lives and retirement.
- **Making decisions.** For some people, this is the first time they have been 'free' to follow their own path. Previously influenced by the needs and priorities of families and loved ones, they may not be aware of or know what they want post-retirement. Guidance from professionals and friends can help them explore post-retirement options.
- **Age-based discrimination in the workplace.** Over a quarter (27%) of Australians aged 50+ years' experience age discrimination in the workplace.⁴¹¹ An older worker may experience 'stereotype threat'; that is, the older worker feels others see them as confirming an age-related stereotype. 'Stereotype threat' can be triggered by various situations such as comparisons with younger workers, managers making assumptions about career or retirement plans, and being overlooked for training. It can make work more stressful for older workers, eventually resulting in lower work

engagement and performance.⁴¹⁸ Discrimination and 'stereotype threat' are often driven by myths about the skills, motivations, and capabilities of older workers, and can happen from recruitment onwards. This discrimination is linked to decreased wellbeing and increased mental distress.⁴¹² Adults who experience workplace discrimination are also likely to retire earlier than anticipated.⁴¹³

- **Ageism in recruitment.** This common experience can affect a person's mental health and wellbeing, resulting in adverse workplace outcomes. For example, 1 in 10 Australian organisations report they are unlikely to hire someone who is over 50 years old.⁴¹⁹ This has not changed significantly; a recent study⁴²⁰ found 46.7% of respondents from the HR community reported an age above which their organisation would be reluctant to recruit. As such, many older jobseekers report being 'shut out' and unable to gain employment.⁴¹⁹ Late career unemployment is associated with lower levels of mental health and has lasting negative effects on satisfaction with life.⁴¹⁵ Further, a 1% increase in unemployment rates at 58 years is associated with a 10% increase in death rates by 79 years.⁴²¹ Even if older Australians can secure work, they often face workplace discrimination including ageist jokes, exclusion from training and denial of career-progression.⁴¹⁹

The potential impacts at team and organisation levels

An ageing population presents several unique risks and opportunities for organisations. Organisations that are unprepared for an ageing workforce may face skill shortages, loss of knowledge and experience, person-job fit mismatches, discrimination claims and premature exits. Further, workers who hide age-related decline may prevent necessary work adjustments being made, which in turn, can result in physical or mental injury along with compensation claims.

By contrast, organisations that effectively support older workers may reap benefits including more positive attitudes, higher motivation, better attendance and punctuality, and lower turnover.⁴²² Moreover, these tangible benefits can continue beyond retirement due to the positive relationship that is established between employers and their alumni. Additionally, mature-aged workers contribute to greater innovation, increased productivity, access to a larger talent pool, and improved customer engagement.⁴¹⁹

On a broader societal level, employing more older workers could deliver around \$78 billion in economic gains, which represents 4.7 % of Australia's GDP.⁴²³ There is a common misconception that hiring and retaining older workers takes jobs away from younger people. However, research does not support this idea. Rather, encouraging later retirement has no adverse effect on youth employment.⁴²⁴ Indeed, some research suggests increased rates of older employment are associated with increased youth employment.⁴²⁵ Therefore, supporting people during their late career and retirement can positively impact individuals, organisations and society.

Strategies to support successful transition

Organisation level strategies

- **Raise awareness and listen to workers.** Raise awareness of the value and benefits of an ageing workforce by educating senior leaders about ageism, 'stereotype threat' and implicit bias. Examine the assumptions made about age at each stage of the worker life cycle from recruitment to retirement and integrate ageing workforce considerations into strategic planning.

- **Educate staff about older workers** to dispel myths and stereotypes about ageing. Older workers are a heterogeneous group that span at least 2 generations. People's needs change from late career through to retirement, and differ between individuals.
- **Assess the supports available to older workers.** Listen to older workers to understand their needs and concerns, analyse workforce data, and review existing policies and practices. Use feedback and data to identify specific risks and opportunities relating to late-career and transition to retirement.
- **Ensure recruitment processes are free from discrimination and bias**, by applying fair and evidence-based assessment and selection procedures. Incorporate '**blind recruitment**' where possible (i.e., do not require applicants to disclose their age, remove identifying information from documentation, and judge only against inherent job requirements).
- **Create an environment that retains older workers** and enables them to contribute productively.⁴²⁶ This can be achieved by **building an age-inclusive climate**, equipping people leaders to provide **specific supports for older workers**, providing **good flexible work and reasonable adjustment options**, and ensuring older workers are given **fair development opportunities**.⁴²⁷ **Reverse mentoring** may also be a valuable strategy. Moreover, high performance cultures more generally benefit older workers.
- **Enable knowledge transfer through formal and informal mechanisms**.⁴²¹ Introduce mentoring or buddy systems that facilitate 2-way learning across different age groups.
- **Provide succession planning** to help individuals feel comfortable and prepared to retire. Organisations can help with retirement transitions by supporting workers to **plan effectively**, giving people **phased retirement options** and providing opportunities for retired workers to **remain connected** to the organisation as **professional alumni**.
- **Actively gather and monitor organisational data** regarding trends and issues within the workforce. Data can then be used to educate senior leaders about implicit bias and their role in stereotyping older workers, raise awareness of the value and benefits presented with an ageing workforce and make adjustments in the workplace.
- **Introduce a structured transition to retirement approach**, training managers on how to initiate timely and constructive retirement conversations. Managers also need to be able to direct people to relevant programs and support, and feel confident checking in with retired workers.
- **Upskill managers and supervisors.** Train managers in proactively managing fitness for work. Managers benefit from a thorough understanding of compliance and legal considerations relating to age discrimination and fitness for work. They need to be equipped to have supportive conversations about adjustments that enable inherent work requirements.
- **Encourage flexible work conversations.** Ensure managers understand best practice flexible working arrangements and have the skills to discuss options with people wanting to ramp down to retirement. Using trial periods can be an effective mechanism to test assumptions around flexible work limitations.
- **Normalise late-career conversations.** Do not wait until pre-retirement to talk about the retirement transition. Integrate career conversations into the worker management framework, and train managers on how to have the conversations across all life stages.
- **Deliver age-specific support programs** about topics such as health promotion, financial management, community engagement and volunteer work, elder care and mental health. These programs could be offered specifically to older workers or integrated into an age-inclusive wellbeing program. Additionally, an organisation may provide retirement coaching and workshops. Workshops can help participants identify their own transition plans, including both financial and personal wellbeing and take a more holistic and planned approach to wellbeing as

they approach retirement.⁴²⁸ Individualised coaching can help with negotiating specific needs and circumstances.

- **Maintain connection with retired workers** through initiatives such as annual gatherings, newsletters or social media groups. Alumni groups provide mutual support and social connections, and give employers access to the knowledge and capabilities of retirees if necessary.

Individual level strategies

- **Good planning** is one of the most effective ways people can support their late-career and retirement. Taking control over how you transition into retirement is associated with increased satisfaction and wellbeing,^{413, 414} enabling people to maintain and create the supports needed to ensure a successful transition. Further, the sense of agency that comes from planning has the largest positive impact.^{416, 417}
- **Set personal goals.** Planning should go beyond just the financials and consider other aspects of wellbeing such as social connections, family, relationships, health, learning and work (including volunteer work and hobbies). Use values or personal drivers as a framework for setting goals and talk about them with a significant other.
- **Late career conversations.** Initiating conversations with managers about work is important for older workers' mental health and wellbeing. This may be around flexible work options, mentoring younger workers and/or learning and development opportunities.
- **Seek professional support.** Often people seek professional advice for financial planning, but equally, many people benefit from coaching to set personal goals and to prepare more thoroughly for late career and retirement conversations at work.

Gaps in the literature

Although retirement planning has positive impacts on retiree's mental health, effects are highly dependent on several factors, including personal circumstances, agency over decisions, current health and relationships.^{413, 429} One key challenge is that the specific form of retirement planning required can differ significantly between workers. This poses a challenge for organisations and governments wanting to support worker's retirement planning. More research could be done into how best to tailor and deliver retirement planning support in an individualised but scalable way.

Findings are also inconsistent on the impacts of retirement on mental health. Previous research found a multitude of factors can impact retiree wellbeing: psychosocial stressors in late career, financial stability, physical health, voluntary/involuntary retirement and late career unemployment.^{411, 415, 430} Further research would help us better identify how some of these variables, as well as other considerations not yet explored, impact retirement wellbeing.

Conclusions and recommendations

This report highlights a range of career transitions across the lifespan that can impact workers' mental health and wellbeing, and by extension, the culture, functioning and effectiveness of teams and organisations when poorly handled. Supporting workers as they navigate life transitions, promoting and supporting their mental health and wellbeing and creating a mentally healthy workplaces, will enable more Australians to reap the benefits of *Good Work*, as set out in the *Consensus Statement on the Health Benefits of Good Work*.¹ Greater support will also help to avoid the negative impacts of long-term absences from work and unemployment.

Some general themes from this paper are relevant for all organisations:

1. Transitions are a natural and normal part of the career journey and must be actively considered in organisational planning, and inform initiatives focused on protecting and promoting worker mental health and wellbeing.
2. While organisations and individuals may not have control over the timing or nature of some transitions, most are still likely to occur at some time in most workplaces.
3. Proactive planning ensures organisations have resources when such transitions arise. This can include access to information, instrumental support and social support.
4. The role of managers and supervisors in supporting workers is critical. As those in the most immediate position of responsibility, they can be a conduit to support, or a barrier. As such, managers and supervisors need training to build confidence and consistency in sensitively supporting workers to manage these various career transitions.
5. Key strategies for all transitions are promoting autonomy, providing access to flexible working arrangements, and supporting individuals to remain engaged and connected to the workplace in ways that are meaningful for them. These strategies reduce barriers to return to work particularly after extended leave.
6. The literature has significant gaps about organisational strategies to address many of the identified transitions. Investment in applied research and evaluation that reviews the effectiveness of system-level interventions is a significant area for future work.
7. Intersectionality is poorly reflected in the existing organisational literature. In particular, complexities experienced by those with multiple minority identities are rarely, if ever, considered, but are important to promote more diverse and equitable organisations.

Arising from these themes are key recommendations that organisations can adopt to support people experiencing all forms of career transitions:

- **Understand the demographics of your organisation.** Understanding your organisation's unique demographics enables identification of the relevant career transitions for your workforce, for example, transitions linked to age, life stage and family situation.
- **Take a person-centred approach.** Placing the individual at the centre of decisions impacting them ensures they can communicate their needs, establish desired boundaries and make changes at their own pace. Ask, do not assume. Everyone's experience and personal circumstances are unique.
- **Normalise experiences of change and transition.** We all experience various seasons in our working lives and will undergo at least some of these transitions. Acknowledgement helps workers feel that their experiences are normal, and that they may have a range of responses. It also encourages access to support.

- **Enable flexible work arrangements.** By supporting and maximising opportunities for flexible work arrangements, individuals are empowered to make decisions that are best for them in work and life.
- **Tailor approaches for individuals and teams by local managers or supervisors.** This includes maximising personal autonomy in how to meet work requirements, reviewing the demands of work and ensuring individuals are informed about, and empowered to access, relevant supports.
- **Be inclusive.** Be intentional in organisational practices that include, rather than exclude, team members experiencing changes. For example, avoid meeting times that may be challenging for those with caring roles or health conditions and adopting language that destigmatises changes.
- **Create a learning culture.** Promote and support a learning culture, celebrating learning as an ongoing process, rather than idealising perfection.
- **Provide supportive management.** This includes managing with sensitivity to the different needs of staff, providing clarity in work direction and creating an environment where reasonable work demands are balanced with autonomy and support.
- **Provide a range of supports.** This includes practical, emotional and social support, and access to relevant procedures and processes:
 - **Practical information** can be tailored to individual transitions. This could be presented as a change pack, tip sheets and/or links, and resources to support those navigating change. It is important to ensure resources cater for all staff, including those in operational and office-based roles.
 - **Emotional support** includes access to wellbeing programs, coaching and Employee Assistance Programs (EAPs) from professional providers. It can also include specialist transition support and clear referral pathways for those who are struggling personally. Access to career coaching, training and resources can also help individuals self-manage their own career journeys. However, in some cases, workers are reluctant to access EAPs, potentially due to concerns about limits to confidentiality, or stigma attached to help-seeking, hence a range of other strategies is important.
 - **Social support** offers connection and advice in times of need and helps reframe identity. Peer-support groups can be established in the workplace, (e.g., parent groups, new leadership circles). Mentorship and buddy systems can also be valuable ways to facilitate social support.
 - **Access to relevant procedures and processes** including workplace entitlements for specific transitions should be easy and open. Individuals contemplating change may feel uncomfortable having to announce this to their manager to seek information. They should be able to access information about entitlement and support independently.

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