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

Due to population ageing, Japan and Germany have to extend individuals' working lives. However, physical and mental ill-health increase with old-age, leading to disabilities that affect whether and how individuals can remain in the labour force. Workplace accommodation is a means to enable disabled individuals to remain productively employed. Drawing on qualitative interview data, this paper explores how School Authorities in Japan and Germany use workplace accommodation to support teachers with physical and mental disabilities. Teachers are a white-collar profession strongly affected by ill-health, especially burnout. The article furthermore explores how such workplace accommodation measures influence older teachers' career expectations and career outcomes, including thoughts about (early) retirement. It finds that even though the institutional contexts in Japan and Germany are rather similar, career options and expectations vary, though with similar (negative) outcomes for national strategies towards the extension of working lives.

workplace accommodation; disability; public school teachers; Japan; Germany

1. Introduction

The likelihood of having a physical or mental disability drastically increases with age for teachers (Freude et al., 2005); a white collar profession that has a high prevalence of being affected especially by mental health problems such as burnout (Hakanen et al., 2006, Bauer et al., 2007) which leads to depersonalisation, emotional exhaustion and/or a reduced sense of personal accomplishment and achievement (Griva and Joeke, 2003). Besides potentially affecting an individual's capability to fulfil his/her original work-related tasks, burnout directly affects individual job satisfaction (Skaalvik and Skaalvik, 2009) and, as a consequence, turnover intention (Yang and Lee, 2009) and, potentially, physical health (Tsuboi et al., 2002).

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

As the teaching force is ageing in most countries (OECD, 2005), including Germany and Japan (OECD, 2013), as national economic pressures has caused the closure of (ill-health) early

retirement pathways and as national public policy in both countries requires individuals to extend their working lives (Muller-Camen et al., 2011, Flynn et al., 2014, Hofäcker et al., 2016), it is important to investigate how older teachers are dealing with ill-health and employment. Furthermore, it is of interest how teachers can be supported by institutional stakeholders, such as School Authorities, to remain productive members of the teaching force. Thirdly, it is important to consider how ill-health and related support affect teachers' individual career expectations in later life.

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

This article explores accounts of Japanese and German teachers as well as stakeholders, including School Authority employees, with regard to the support requested by and support given to older teachers who suffer from disabilities and illness. We focus on teachers who report to have developed (chronic) ill-health, whether this might be physical or mental, including burnout, and whose illness affects their ability to pursue job-related tasks. Most teachers in our sample talked about mental health as opposed to physical problems. Nevertheless, we deliberately include both physical and mental health problems in this study, as both necessitate workplace accommodation measures in order to reinstate and/or maintain individuals' abilities to pursue job-related tasks (Nevala et al., 2015). Physical health

problems that affect teachers' ability to work include, for example, voice disorders (Roy et al., 2004) and hearing problems (compare for professionals in general: Tye-Murray et al., 2009) (possibly affecting teachers' ability to interact with students as well as affecting individuals teaching music) or muscular-skeletal illnesses (Freude et al., 2005) (affecting teachers in general as well as those teaching physical education). Mental health is more difficult to define, diagnose and conceptualise, but is associated with the presence or absence of subjective well-being. Symptoms for the absence of subjective well-being might be depression, anxiety, and a feeling of hopelessness, but also the absence of positive functionings in life including self-acceptance, positive relationships with others, autonomy and having a purpose in life (Keyes, 2002). The syndrome of job stress, known as burnout, then, is "a prolonged response to chronic emotional and interpersonal stressors on the job, and is defined by the three dimensions of exhaustion, cynicism, and inefficacy" (Maslach et al., 2001: 397). Burnout is associated with and appears to cause increasing levels of physical ill-health including cardiovascular and musculoskeletal diseases (Honkonen et al., 2006), but also mental health problems such as depression and anxiety (Peterson et al., 2008). In combination with physical and mental health effects, burnout leads to increased job withdrawal, lower productivity and effectiveness at work as well as to lower job satisfaction and reduced organisational and job commitment (Maslach et al., 2001).

Japan and Germany have been chosen because both countries have highly institutionalised employment and Human Resource Management (HRM) systems managing the teaching force, with HRM policies being established at the School Authority-level (OECD, 2005, Cortina et al., 2008). Given that health issues among the teaching force are prevalent in both countries, the comparison aims to show whether and how institutional-level stakeholders are able to accommodate teachers with ill-health and disabilities. This paper aims to examine whether and how both positive and negative "stay factors" (e.g. employer interventions to help manage health issues and the closure of early retirement routes, respectively) play out in German and Japanese workplaces. The goal of this paper is to contribute to the literature on workplace accommodation, specifically for public sector employees. It uses a qualitative lens, contextualising actual decisions over the provision of accommodations and corresponding lines of argument. The paper also contributes to comparative research as well as age management. The following sections will introduce the data and method used, and the

institutional context in which workplace accommodation takes place in Japan and Germany. The fourth section will discuss the findings of the data analysis and the last section will conclude the paper.

2. Data and Method

We draw on interview data that were collected in Japan and Germany between 2008 and 2013 through three funded research projects. In total, we conducted 28 face-to-face, in-depth semi-structured interviews, including 14 interviews in Germany and 14 interviews in Japan. These interviews were conducted in two School Authorities, the Tokyo Board of Education (Japan) and the Federal State of Hamburg (Germany). We were therefore able to follow a multiple case study design, in which interview data were obtained at different hierarchical levels within two bounded case studies (Yin, 2009, Stake, 2006). For Germany, we conducted ten biographical interviews with teachers aged 50 or older and four interviews with school ministry-level stakeholders, including HR managers and employee representatives. For Japan, we use eleven biographical interviews and three interviews with school ministry-level stakeholders, including HR managers (compare Table 1). While the stakeholder interview partners in both countries were sampled based on their official job function in and knowledge of Human Resource Management processes and workplace accommodation measures in their respective School Authorities, interview partners for biographical interviews were identified using a snowball sampling strategy. While not providing a representative sample across the entire population, snowball sampling allowed us to identify and establish contact with eligible respondents in the absence of the two School Authority's willingness to provide us with a population register.

- Insert Table 1 about here -

All of the interviews used similar interview schedules. The stakeholder interview participants acted as experts (Flick, 2009, Bogner et al., 2005) in providing structural and contextual information about education policy and HRM practices towards (older) teachers in their respective institutional contexts. Topics discussed included the overall public sector employment system in their countries, HRM policies and practices towards teachers including pay, promotion systems, job training, working time flexibility; (early) retirement options and

pension systems; as well as occupational stress factors and ways in which such factors can be offset.

The interviews with teachers aged 50 and older followed a semi-structured biographical interview approach (Roberts, 2002), which is regularly used in teacher career studies (i.e. Kelchtermans, 1994, Stroobants, 2005, Kelchtermans and Ballet, 2002). Interview schedules for both the German and Japanese interviews covered similar topics surrounding older teachers' past and present employment careers; envisioned future career developments; decisions over anticipated (early) retirement timings and transitions; changes in the teaching profession; perceptions about the HRM concerning teachers including support from their School Authorities; as well as private-life factors affecting their employment life and vice versa. All interviews lasted on average one and a half hours; were collected face-to-face; were audio-taped and subsequently transcribed in German respectively in Japanese after having received informed consent from all participants. The data was collected and analysed by researchers fluent in German respectively Japanese using a thematic analysis approach (Braun and Clarke, 2006).

3. Institutional context comparisons

An institutional comparison of the employment and management of (older) teachers in the public sector in Japan and Germany shows similarities as well as differences. Similarities are found in the overall employment system, which follows a lifelong career-based model in both Japan and Germany, compared with a position-based approach found, for example, in Canada and the United Kingdom (OECD, 2005). In a career-based model, teachers typically enter the profession after a teaching-specific university degree programme, have to pass a rigorous state exam, and tend to stay in the profession until retirement. The career within the profession follows an upward-oriented linear as well as hierarchical structure, often identified as a seniority-based system, which influences promotions and pay (OECD, 2005: 143). Furthermore, the responsibility for HRM lies with the School Authority, which oversees and manages all public schools in a specific geographic area. School-level head teachers, or principals, only have limited scope to manage their own teaching staff (Klemm, 2011).

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

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

4. Analysis

4.1. Germany

4.1.1. Managers' response

In line with literature (Bauer et al., 2007), ill-health and especially burnout are significant topics for the German School Authority. One HR manager (DE_HR2) claimed that 60 percent of those hospital beds that are reserved for privately-insured individuals are occupied by teachers, and that the cost of both managing health and paying for ill-health retirements is a growing concern for the federal state. While in the past, teachers were able to balance out their job responsibilities and to find time and space to deal with any extra work, this is no longer possible due to changes to the teacher working time. A working hour increase coupled with a re-evaluation of time deemed necessary to complete tasks, such as marking exams, led to the perception that the working time had increased substantially. At the same time, organisational change demands led to actual work intensification. Teachers are therefore no longer able to recover from high stress work phases.

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

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

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

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

solved on a systemic level" (DE_HR1) and that managing issues of workplace stress is the responsibility of the school management team rather than of the School Authority itself. When a teacher is experiencing burnout, it is deemed to be his or her supervisor's responsibility to provide support which might include personal meetings, feedback, but also changes to working conditions and work content. This especially applies if teachers are no longer able to teach at all or to teach certain subjects. Physical education and music were identified as particularly problematic both because of the nature of the subject itself and the limits faced by head teachers in being able to make adjustments to how the curriculum is taught. While teachers who are no longer able to carry out their duties in the classroom can concentrate a reduced amount of their duties on administrative work, it is up to the school management team to ensure that their teaching is covered by others.

In addition to courses targeting school-level leadership staff, the School Authority is offering health-related training to all teachers. In fact, the School Authority requires that teachers participate in training on a regular basis, at least up until age 55 after which age participation in training measures becomes voluntary. The dedicated teacher training institute offers, for example, *"voice training; stress management and how to deal with difficult situations"* (DE_HR2). It was emphasised that health-related training is in great demand but that the corresponding budget is not large enough to satisfy this demand, even though the interview partner mentioned that she herself *"[has] accumulated a lot of overtime"* (DE_HR2) offering such training and health-related coaching.

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

4.1.2 Teachers' experiences

The fact that stress and burnout are primarily considered by the School Authority to be issues which should be addressed individually rather than systematically means that teachers' ability to manage mental health issues while remaining employable depend very much on their own circumstances as well as the willingness of their managers to provide support. Based on the analysis of the biographical interview data, we identified four types of (lack of) support in dealing with teacher ill-health. In this section, we discuss these four cases of teachers who

received managerial support (Sabine); found an early exit route (Heide); could not retire but reduced work commitment (Hilde) and suffered from lack of support (Edda).

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

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

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

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

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

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

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

Therefore, while Heide self-financed her early exit, Hilde found other ways to reduce her stress by working less and by reducing her extracurricular work commitment. Both teachers did so

to prevent health-related impairments, which were, as they thought, inevitable if they had not acted accordingly.

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

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

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

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

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

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

Edda therefore ended up leaving her school because she experienced a burnout and was no longer able to teach. Since, unlike Heide, she could not afford to retire early on a reduced pension, she secured an alternative job within the School Authority. However, she described being stigmatised for having left teaching for reasons of ill-health.

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

4.2. Japan

4.2.1. *Managers' responses*

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

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

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

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

services at each regional board of education to help teachers cope with work-related concerns and health issues (MEXT 2014). On top of the three basic forms of nationwide institutional support, each school unit as well as each board of education is encouraged to design and provide additional support for teachers.

4.2.2 Teachers' experiences

According to teacher interviewees' accounts, the causes of their ill-health and/or burnout vary significantly, and each interviewee reported multiple factors contributing to their experiences. Eight of the eleven interviewees, nonetheless, commonly discussed a national trend called "open school" as a structural factor underlying their burnout. Having emerged since the early 1990s, the notion of "open school" promotes active incorporation of parental and community voices (e.g., residents surrounding school establishments) into the ways in which teachers relate to their pupils on a daily basis as well as how schools are organised and administered. Those teacher interviewees argued that this national trend has come to place most school teachers under immense pressure to undertake excessive administrative tasks, formal and informal, dealing with parents and communities. Many of the parents and community residents, though not the majority of them, convey discontent and dissatisfaction with various aspects of the ways in which teachers work with their pupils. As a result, for instance, Somei, a female middle school teacher aged 54, argued:

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

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

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

Kusune, a male middle school teacher aged 54, said that he had long been worried that he might be subject to eventual disciplinary dismissal due to accumulated criticisms, and even a

series of threats that some of his pupils' parents might take legal action against him because of his allegedly Spartan-style teaching methods. He complained:

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

The three forms of institutional support discussed above do not seem to fully satisfy most of the teacher interviewees. While recognising their potential significance, teachers in Japan shared the concern expressed by those in Germany about possible negative consequences associated with the use of some of the support. For instance, Tsuruta, a male middle school teacher aged 52, spoke of a possible stigma that might be attached to him if he were to take sick leave. He stated:

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

Aoki, a female middle school teacher aged 58, also delved into her thoughts on using the institutional support. She noted:

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

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

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

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

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

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

5. Conclusion

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

Even though most teachers were affected by ill-health, teachers' "options" and reactions varied across countries. In Germany, it seems as if there is a greater variance of "options" (and career outcomes) than in Japan. This variance is mainly based on support by the school-level

management team as well as on individual financial means to afford part-time work and/or an early labour market exit. The contrast between Sabine's and Edda's experiences indicates that personal relationships with one's immediate line manager is indispensable in the interplay of (ill-) health and employment. In fact, this seems to be what distinguishes Sabine's experience from the others rather than the institutional support. The examples of Heide and Hilde show that a lack of (perceived) support will lead to negative outcomes for the school - i.e. "losing" Heide, who retired early on a self-financed basis, and "losing" Hilde, who decided to reduce her work commitment in order to cope with work demand. All four examples show how (a perceived) (lack of) support influences employment careers and career expectations of teachers. While Sabine is happily and healthily able to do her job, Edda, Heide and Hilde either left employment altogether or "try to survive" despite the continued existence of occupational stress factors.

Japanese teachers appear to have less "options". The employment system, that is geared towards full-time employment, and the social image of teachers prevent them from actively scaling down or reducing stress by means of part-time work or working to rule up until age 60. As mentioned by Japanese teacher interviewees, the likelihood of leaving the teaching force at age 60, the Japanese mandatory retirement age for teachers as of 2015, is very high, as narrated by Kato and Kusuda. This is because this seems to be the only feasible option Japanese teachers have in order to reduce stress and to leave employment while (as they hope) still being healthy and "sane". It is noteworthy that the public image of teachers (compare: Gordon, 2005), those of senior teachers in particular, contribute to preventing many teachers from actively utilising some institutional support, including sick leave, as mentioned by Tsuruta and Aoki. In comparison to their German peers, nonetheless, this perception hinders Japanese teachers' ability to use human agency in making active decisions in their late employment careers, even though they feel that *"we all have to deal with that [ill-health] on our own"* (Aoki).

Even though workplace accommodation is considered an effective means to counter negative effects of ill-health upon employment outcomes (in later life) (Nevala et al., 2015), and even though the notion that social support (for example from supervisors) might help counter burnout among teachers has already been discussed for some time (see: Russell et al., 1987),

the accommodation arrangements provided by the two School Authorities under investigation seem neither effective to deal with the prevention of ill-health nor able to deal with the actual occurrence of ill-health. This is firstly because insufficient financial resources seem to be assigned to such measures (as seen in the German case), and secondly because public images (or social stigmas) prevent teachers from asking for support (as seen in Japan). Social stigmas also played a role in Germany, though especially in the relationship with immediate supervisors who might or might not support teachers in times of ill-health (as seen in the cases of Sabine and Edda).

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

The analysis delivered in this paper has some limitations. First, as a case study with a convenience sample it lacks representation across the entire population, inherent in qualitative research. Secondly, the paper did not take into account the role of teachers' private environments and support given by, for example, spouses. This is even though the paper highlighted the role of personal financial circumstances and its effects on early retirement decisions in Germany (the cases of Heide and Hilde). Also, the article does not compare the accounts of older teachers with those of younger colleagues aged below 50. This

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

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Table 1: Interview participants in Germany and Japan, biographical interviews and stakeholder interviews

Source: own data

Biographical interviews with teachers aged 50 and over

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

Stakeholder interviews with School-Authority (HR) staff

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