Exploring the challenges and facilitators that impact the experiences of being an older female worker in the European labour market: Findings from a rapid review of literature

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Abstract

Older women make a significant contribution to the labour market yet still experience negative workplace impacts. We undertook a rapid review of literature to assess the experiences of older female workers in the European labour market with the aim to identify current research gaps. We discuss how current data and future research could be utilized to improve the working lives of older women in Europe.

Electronic databases including Business Source Complete, Social Policy and Practice and PubMed were searched. 4797 records were identified, of which 24 full-text reports were included.

Compared to men, older women were found to experience more adverse health impacts as a result of work-related stress. Older women bear a greater share of caring responsibilities which has a negative impact on their health. A lack of support for menopausal symptoms in the workplace often prompted early retirement for older female workers. Income and role disparities between men and women were identified, with women having relatively discontinuous employment histories and lower pension funds due to a higher burden of unpaid, domestic labour throughout their life course. This has a cumulative effect on their income, their role and position at work, and their ability to retire. Older women also reported experiencing workplace discrimination, a lack of autonomy and job control, and less training and development opportunities. Flexible working was found to be contested terrain, with it being a means to support older women to maintain careers but also resulting in poorer career outcomes.
Keywords: Older women; Older workers; Employment; Workplace well-being; Occupational health; European labour market; Gender wage gap; Gender discrimination

Introduction

The number of people aged 55 years and older accounted for 33.6% of the total EU-27 population in 2019. This percentage is projected to reach 40.6% by 2050, which has raised concerns about the impacts of progressive ageing of the older population (Eurostat, 2020). The need to offset the impact of population aging on public finances and to improve the financial wellbeing of older people has placed extended working lives for older people high on Europe’s political agenda (Phillipson, 2019). For example, many EU member states reformed their pension systems to raise the labour market exit age and retirement age, aiming to improve public finances (Economic And Financial Affairs, 2012). This is also true at the individual level, as working longer (and retiring later) is a means of increasing financial security in old-age. In 2019, women and men aged 55 or more accounted for 20.2% of the total population in employment in the EU-27, which reflects a steady growth in their labour market participation since 2004 at 11.9% (Eurostat, 2020).

In specific, the Europe 2020 strategy for growth and employment over the last decade has focused on improving the labour market participation of older women among other specific groups with lower-than-average employment rates (European Commission, 2010). In 2019, the employment rates for men aged 55-64 were still higher at 66% when compared to women aged 55-64 years at 52.6% (European Commission, 2016).

However, despite the growing participation of older women in the workforce, there are well-documented accounts of the challenges they experience in the labour market. These include reduced labour force participation, lesser-grade roles and lower wages (European Commission, 2016; Street, 2017). These issues are exacerbated with increasing age, with research showing higher levels of perceived age-based stereotypes faced by women in work settings compared to men (Manzi et al., 2019). The increasing emphasis on extending the working lives of older people, when considered against the backdrop of inadequate work quality and working conditions which disproportionately and persistently impact older women, highlights the urgent need to explore their labour market experiences in depth (Phillipson, 2019). The significance and persistence of the challenges impacting older women in the workplace make it necessary to examine in greater depth how these barriers affect the working lives and experiences of older women.

The primary objective of this rapid review is to synthesize and review literature that documents the experiences of older female workers in the European labour market with a specific focus on retirement and extended working lives, with the aim to identify research gaps. A key goal is to highlight the experience of older women in the workplace, both in relation to other sub-
groups as well as from a unique standpoint. Therefore, comparisons will be made between older women’s experiences and other sub-groups in the findings when available, appropriate or relevant to making the experience of older women salient. In the final section, we discuss how current results and future research could be utilized to improve the working lives of older women in Europe.

We used an interdisciplinary (psychology, sociology, business) lens to explore and understand the mechanisms that support and hinder labour market participation, focusing on data published over the last decade. By reviewing research focusing on Europe, we cover a broad variety of welfare systems that offer insights into different challenges and facilitators but no obvious solutions to the barriers faced by older women. In this paper we focus on the commonalities of the experiences of women rather than the differences between welfare systems.

**Method**

We conducted a rapid review to explore the challenges and hindrances of older female workers in Europe. A rapid review “is a rigorous and transparent form of knowledge synthesis that accelerates the process of conducting a traditional systematic review through streamlining or omitting a variety of methods to produce evidence for stakeholders in a resource-efficient manner” (Hamel et al., 2021, p. 81). Rapid reviews differ from systematic reviews in that they use various methods to accelerate the review process (see table 1 in Khangura et al., 2012, p. 2). For instance, they often synthesize evidence within a shortened timeframe, typically undertaken between 3 weeks to 6 months, or by introducing restrictions at the search and retrieval stages by including only readily accessible, published literature, using language and date restrictions, narrowing geographical context and setting, or restricting retrieval, assessment and author follow-up processes. Later stage processes can also be adapted e.g., having only one person screen titles and abstracts, conduct full-text review and data extraction and omitting a quality appraisal of the papers (Khangura et al., 2012). In terms of their scope and purpose, they can be classified as a “descriptive” review based on Xiao and Watson (2019).

Rapid reviews come with the advantage of providing evidence in a timely and resource-efficient manner, yet, come with the potential drawback that some caution needs to be taken when interpreting the findings as the breadth of findings included is restricted. Importantly, a rapid review does not compromise on quality, as according to Hamel and colleagues (2021) “the term ‘rapid’ points toward the speed at which the review is performed and not the abbreviation or omission of steps taken to conduct the review.” (p. 75). We chose a rapid review over other types of reviews as our aim was to provide a timely account of the field, with a restricted geographical focus, in order to identify research gaps and inform future research, rather than testing specific research questions.
Eligibility criteria

The scope of the review was defined and limited as follows. Publications were included if:

A. The study sample was aged 55 years or older or reported an average age of 55 or older (this age cut-off was chosen due to the impact of e.g., peri-menopausal symptoms on women <65 years of age, as well as taking into account the European Commission’s definition of older women (European Commission, 2016)).

B. They were conducted in Europe and/or included a European sample

C. They were published in English

D. They were published in or after 2010

Publications were excluded if they:

A. did not focus on older women in the workplace

B. were books, book chapters, theses or dissertations

Some of the inclusion and exclusion criteria were determined to ensure relevance and timeliness of the review. For instance, publications were limited to those conducted in Europe (i.e., the research was conducted on a European sample) to focus the review on a specific geographical, socio-political and legal context so that any recommendations for policy or practice identified would be relevant. Secondly, the publication date limit was set to papers published in or after 2010; a decision that was made to ensure that findings were applicable and relevant to the current time.

Other decisions were made for pragmatic reasons keeping in mind the expedited time scale such as restricting to English-language publications and excluding books, book chapters, theses and dissertations. We chose to only include sources that had gone through rigorous peer review processes, which would eliminate the need for quality appraisals of the papers.
Search strategy

Figure 1. Flow diagram of search strategy and screening

Two consecutive searches were carried out between April 2021 and July 2021, with a final date of 7th July 2021. In the first, five electronic databases were searched, namely, Business Source Complete, HMIC, PsycINFO, Scopus, and Social Policy and Practice. The search concepts included occupational stress and well-being, gender (female), workplace or work environment, and old age or ageing. 1025 records were identified from these databases, of which only seven publications met the inclusion criteria. Following consultation with library information specialists, a subsequent search was carried out to ensure retrieval of the most relevant results for the review. In addition to the free-text terms used in the previous search strategy, Medical Subject Headings (MeSH) terms were added for each concept to help with better retrieval of relevant publications on two additional databases; PubMed and OVID Medline. This search strategy is presented in Figure 1. A total of 3772 records were identified across both databases of which 16 publications were included in the final dataset. In all, 24 full text publications were included in this review for synthesis. Once retrieved from the database search, the results were imported into the desktop version of Mendeley Reference Manager. Title and abstract screening as well as full-text retrieval was done by two authors. The search and screening processes are illustrated in Figure 1.
Data extraction and synthesis

24 articles were included upon reviewing 98 full-text reports. An electronic proforma was used to complete the data extraction from the included reports. Reasons for exclusion included studies being conducted outside the European area, a lack of data pertaining to older women according to our inclusion criteria of 55 years or older, and a lack of focus on experiences in the workplace. The definition of ‘older women’ varied across the dataset, which also contributed to the exclusion of some papers in the final stage.

Data was extracted by two authors and audited by a third author. Data comprising the type of publication, study design, study population and setting, outcomes of interest, main findings and limitations were extracted. Data was synthesised by the first author (ShR) and was reviewed by author SR.

Results

Characteristics of Included Studies

The key characteristics of the included studies are presented in Table 1. Studies included in the review were conducted across Europe, demonstrating relatively wide geographical coverage spanning western, central, southern and northern Europe. Most studies had been conducted in the United Kingdom (UK; N=9), followed by The Netherlands (N=3), Sweden (N=2), Finland (N=2), Germany (N=2), and Italy (N=2). Other countries included Portugal, France, Croatia, and Switzerland, each contributing one study to the review.

<table>
<thead>
<tr>
<th>No.</th>
<th>Title; Year</th>
<th>Location; Author(s)</th>
<th>Aim; Sample</th>
<th>Study design; Analysis</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Employment status and other predictors of mental health and cognitive functions in older Croatian workers 2019</td>
<td>Croatia, Bjelajac, Adriana, Bobić, Jasminka, Kovačić, Jelena, Varnai, Veda Marija, Macan, Jelena, Smolić, Šime</td>
<td>To examine mental health and cognitive functions in older Croatian workers (50-65 years) taking into account their employment status, self-assessed health, and a set of demographic characteristics. Sample: N = 650 (mixed) % of women: 49 Mean age: Not reported</td>
<td>Quantitative study Regression analysis of cross-sectional survey data from Wave 6 of the Survey of Health, Ageing and Retirement in Europe (SHARE).</td>
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<td>2</td>
<td>Hierarchies of health: Health and work-related stress of managers in municipalities and county councils in Sweden 2013</td>
<td>Sweden, Björklund, Christina, Lohela-Karlssoon, Malin, Jensen, Irene, Bergström, Gunnar</td>
<td>To investigate the risk of poor health and stress among male and female managers working at different levels in the public sector. Sample: N = 1091 (mixed) % of women: 77.6 Mean age: Not reported</td>
<td>Quantitative study Analysis of cross-sectional register data using a modified Poisson regression approach to examine risk of stress and illness in relation to management level and sex.</td>
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<tr>
<td>Issue</td>
<td>Title</td>
<td>Country(s)</td>
<td>Abstract</td>
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<td>3</td>
<td>Health subjectivities and labor market participation: Pessimism and older workers’ attitudes and narratives around retirement in the United Kingdom</td>
<td>United Kingdom</td>
<td>To explore the pertinence of health (in a subjective as well as objective sense) as a factor in the complex decision-making process around retirement planning. Sample: N = 96 (mixed) % of women: Not reported Mean age: 56.9 (women)</td>
<td>Qualitative study</td>
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<td></td>
<td></td>
<td>Brown, Patrick Vickerstaff, Sarah</td>
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<td>Analysis of semi-structured interviews and biographical timelines of work-life histories of individuals and couples.</td>
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<td>4</td>
<td>Using digital health technologies to manage the psychosocial symptoms of menopause in the workplace: A narrative literature review</td>
<td>United Kingdom &amp; Australia</td>
<td>To identify how mental health practitioners can adapt, utilise or recommend digital health strategies to support older women in occupational settings to manage their psychosocial symptoms of menopause. Sample: N/A</td>
<td>Literature review</td>
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<td></td>
<td></td>
<td>Cronin, Camille Hungerford, Catherine Wilson, Rhonda Lynne</td>
<td></td>
<td>Narrative synthesis of peer-reviewed research related to the digital health technologies that are utilised to meet the psychosocial needs of women during menopause</td>
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<tr>
<td>5</td>
<td>Social participation among older adults (55+): Results of a survey in the region of South Limburg in the Netherlands</td>
<td>The Netherlands</td>
<td>To investigate the level and forms of social participation among older adults in The Netherlands, and their association with socio-demographic and health-related characteristics. Sample: N = 16,291 (mixed) % of women: 52.5 Mean age: Not reported</td>
<td>Quantitative study</td>
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<td></td>
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<td>Curvers, Nicole Pavlova, Milena Hajema, KlaasJan Groot, Wim Angeli, Federica</td>
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<td>Analysis of cross-sectional survey data (Elderly Health Monitor Limburg) using descriptive statistics and logistic regression analysis</td>
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<tr>
<td>6</td>
<td>Gender differences in perceived workplace flexibility among older workers in the Netherlands: A brief report.</td>
<td>The Netherlands</td>
<td>To examine whether access to workplace flexibility differs between male and female older workers and how potential differences can be explained. Sample: N = 4813 (mixed) % of women: Not reported; in majority Mean age: 61.96 (women)</td>
<td>Quantitative study</td>
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<td></td>
<td></td>
<td>Damman, Marleen Henkens, Kène</td>
<td></td>
<td>Analysis of questionnaire data from the NIDI Pension Panel Study completed by employees in government, education, care, and welfare sectors using regression analyses.</td>
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<td>7</td>
<td>Work-family conflict as a mediator in the association between work stress and depressive symptoms: Cross-sectional evidence from the German liDA-cohort study.</td>
<td>Germany</td>
<td>To investigate the role of work-family conflict in the well-known association between work stress and depressive symptoms. Sample: N = 6339 (mixed) % of women: Not reported; in majority Mean age: 61.96 (women)</td>
<td>Quantitative study</td>
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<td></td>
<td></td>
<td>du Prel, Jean Baptist Peter, Richard</td>
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<td>Multiple linear regression analysis of survey data from the “Leben in der Arbeit” (life at work)-study (1st wave)</td>
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<td>8</td>
<td>Ill health-related job loss: A one-year follow-up of 54,026 employees</td>
<td>France</td>
<td>To analyse the one-year incidence of an unfit to work diagnosis aimed at prioritizing actions and targeting health promotion in the workplace. Sample: N = 54026 (mixed) % of women: Not reported Mean age: Not reported</td>
<td>Quantitative study</td>
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<td></td>
<td></td>
<td>Dutheil, Frederic Naughton, Geraldine Sindygia, Patricia Lesage, Francois Xavier</td>
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<td>Prospective analysis of medical records of employees.</td>
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<tr>
<td>9</td>
<td>Barriers and facilitators to extended working life: A focus on a predominately female aging workforce</td>
<td>United Kingdom</td>
<td>To explore the factors that enable or inhibit people to extend working life in a large UK-based retail organisation. Sample: N = 30 (mixed) % of women: 70 Mean age: Not reported</td>
<td>Qualitative study</td>
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<tr>
<td></td>
<td></td>
<td>Edge, Clare Ellen Coffey, Margaret Cook, Penny A. Weinberg, Ashley</td>
<td></td>
<td>Framework analysis of semi-structured interviews with a purposive sample of older (&gt; 60) employees (N=15) and their supervisors.</td>
</tr>
<tr>
<td>10</td>
<td>Barriers and facilitators to extended working lives in Europe: A gender focus.</td>
<td>United Kingdom</td>
<td>To explore the barriers and facilitators to extended working lives in Europe, particularly those that impact on</td>
<td>Literature review</td>
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<tr>
<td></td>
<td></td>
<td>Edge, Clare Ellen</td>
<td></td>
<td>Systematic mapping review process using electronic</td>
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<table>
<thead>
<tr>
<th>Year</th>
<th>Title</th>
<th>Country</th>
<th>Authors</th>
<th>Methodology</th>
<th>Sample Description</th>
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<tbody>
<tr>
<td>2017</td>
<td>Linked work lives: The interrelation of own and partner's employment history and their relationship with mental health in older European couples</td>
<td>Germany</td>
<td>Engels, Miriam de Moortel, Deborah Weyers, Simone Dragano, Nico Wahrendorf, Morten</td>
<td>To test the interdependence of own and partner’s employment history and their relationship with depressive symptoms among older couples.</td>
<td>Sample: N = 11328 (5664 couples; mixed) % of women: Not reported Mean age: 63.1 (women)</td>
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<td>Quantitative study</td>
<td>Analysis of retrospective data from SHARE using sequence analysis (to describe individual employment histories and to identify distinct clusters of employment histories) and regression models to test the associations between own and partner’s employment histories with depressive symptoms at older age.</td>
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<tr>
<td>2018</td>
<td>Exploring the concept of 'positive aging' in the UK workplace - A literature review</td>
<td>United Kingdom</td>
<td>Keeble-Ramsay, D</td>
<td>To address questions of what is currently identified as positive aging, and to consider what contributions can be found in the current literature that may represent these changes in the UK.</td>
<td>Sample: N/A</td>
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<td>Structured Literature Review (SLR) of a scoping review</td>
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<td></td>
<td>Near retirement age (≥55 years) self-reported physical symptoms and use of computers/mobile phones at work and at leisure.</td>
<td>Finland</td>
<td>Korpinnen, Leena, Pääkkönen, Rauno Gobba, Fabriziomania</td>
<td>To study the symptoms and use of computers/mobile phones of individuals nearing retirement age (≥55 years).</td>
<td>Sample: N = 1226 (older respondents, mixed) % of women: 25 (55 years), 11 (60 years) Mean age: Not reported</td>
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<td>Quantitative study</td>
<td>Analysis of survey data using Mann-Whitney U-tests to compare independent samples</td>
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<td></td>
<td>Sleep complaints in middle-aged women and men: The contribution of working conditions and work-family conflicts.</td>
<td>Finland</td>
<td>Lallukka, Tea Rahkonen, Ossi Lahelma, Eero Arber, Sara</td>
<td>To examine how physical working conditions, psychosocial working conditions and work-family conflicts are associated with sleep complaints, and whether health behaviours explain these associations.</td>
<td>Sample: N = 5819 (mixed) % of women: 53.5 Mean age: Not reported</td>
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<td>Quantitative study</td>
<td>Analysis of postal questionnaire surveys using logistic regression with age as a covariate in all analyses</td>
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<td></td>
<td>Gendered variations in the experience of aging at work in Switzerland</td>
<td>Switzerland</td>
<td>Le Feuvre, Nicky Kuehni, Morgane Rosende, Magdalena Schoeni, Céline</td>
<td>To examine the ‘gendered’ process of aging at work by illustrating the mechanisms through which men and women accumulate dis-/advantage across the life course, and the influence that critical events in different life domains have on the conditions under which they prepare the transition to retirement.</td>
<td>Sample: N = 63 (biographical interviews; mixed) % of women: Not reported Mean age: Not reported</td>
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<td></td>
<td>Mixed methods</td>
<td>Statistical analysis of secondary data, expert interviews, company case studies and biographical interviews.</td>
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<td>Number</td>
<td>Title</td>
<td>Country(s)</td>
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<td>Methodology</td>
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<tr>
<td>16</td>
<td>The domestic and gendered context for retirement</td>
<td>United Kingdom</td>
<td>To explore how the timing, nature and meaning of retirement and retirement planning are played out in specific domestic contexts with a specific focus on gender. Sample: N = 96 (mixed) % of women: Not reported Mean age: 56.9 (women)</td>
<td>Qualitative study</td>
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<td>17</td>
<td>Gender, age and flexible working in later life</td>
<td>United Kingdom</td>
<td>To explore the pertinence of health (in a subjective as well as objective sense) as a factor in the complex decision-making process around retirement planning. Sample: N = 96 (mixed) % of women: Not reported Mean age: 56.9 (women)</td>
<td>Brief overview of literature and qualitative study</td>
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<tr>
<td>18</td>
<td>Associations between work-related stress in late midlife, educational attainment, and serious health problems in old age: A longitudinal study with over 20 years of follow-up</td>
<td>Sweden</td>
<td>To explore the associations and sex differences between self-reported measures of work-related stress in midlife and serious health problems in old age. Sample: N = 1502 (mixed) % of women: 52.3 Mean age (total): 55.6 (baseline), 80.6 (follow-up)</td>
<td>Quantitative study</td>
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<td>19</td>
<td>Older women, work and health</td>
<td>United Kingdom</td>
<td>To review the various influences on older women's health and the ways in which paid and unpaid work impact on physical and mental wellbeing</td>
<td>Literature review</td>
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<td>20</td>
<td>Work participation and risk factors for health-related job loss among older workers in the Health and Employment after Fifty (HEAF) study: Evidence from a 2-year follow-up period</td>
<td>United Kingdom</td>
<td>To investigate the risk factors for health-related job-loss over 2 years of follow-up. Sample: N = 8134 (mixed) % of women: Not reported Mean age: 61.7 (women, no work) 57.2 (women, any work)</td>
<td>Quantitative study</td>
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<tr>
<td>21</td>
<td>Fostering work ability among menopausal women. Does any work-related psychosocial factor help?</td>
<td>Italy</td>
<td>To identify work-related psychological factors associated with work ability in a sample of menopausal working women. Sample: N = 1069 % of women: 100 Mean age: 56.24</td>
<td>Quantitative study</td>
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<tr>
<td>22</td>
<td>Stress, work ability, and an aging workforce: A study among women aged 50 and over.</td>
<td>Italy</td>
<td>To understand the role of work ability in the Job Demands–Resources model and, specifically, to establish whether and through which mechanisms it operates as a personal resource in the health-impairment process. Sample: N = 202 % of women: 100 Mean age: 55.89</td>
<td>Quantitative study</td>
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<td>23</td>
<td>Gender differences in paid employment after retirement: Psychosocial working conditions and well-being</td>
<td>The Netherlands</td>
<td>To examine gender differences in working conditions and well-being of workers in paid employment after retirement (PEAR) Sample: N = 784 (mixed) % of women: 25.2 Mean age: 69.7 (total)</td>
<td>Prospective analysis with 1-year follow-up of standardized online questionnaire data using Chi2, repeated measures ANOVA, and ANCOVA.</td>
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The study designs of included papers were predominantly quantitative (N=16). This included analyses of publicly available cross-sectional and longitudinal survey data (e.g., Survey of Health, Ageing and Retirement in Europe; SHARE) and questionnaire data. Four papers were literature reviews and two papers used qualitative methods to analyse interview and case study data. Two papers were mixed methods studies, one of which used both quantitative and qualitative methods and analyses, and the other used review methods and a qualitative design. The included papers had varying foci of interest, including but not limited to the gendered process of aging and positive aging at work, the effects of unpaid and paid work on physical and mental well-being of women, the impact of job demands, job strain and job resources on older women’s health and well-being, work-related psychological factors associated with work ability in menopausal women, workplace flexibility and access to workspace, and barriers and facilitators to extended working lives for women.

Key themes

A review of the data synthesis was followed by a discussion between the authors to produce a narrative summary of the literature. Through further discussion among the authors, the narrative summary was organised across three main themes to encapsulate the experiences of older female workers in the European labour market with a focus on their experience of retirement and retirement-related decision-making, as well as extended working lives. Each main theme was further divided into sub-themes. This is illustrated in Table 2 and is presented in detail in the following section.

Table 2 Experiences of older female workers in Europe: key themes and sub-themes

<table>
<thead>
<tr>
<th>Main theme</th>
<th>Sub-themes</th>
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<tbody>
<tr>
<td>Experiences of gender inequalities</td>
<td>Gendered inequalities and employment</td>
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<td>Heterogeneous employment histories</td>
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<td>Work-life conflict and unpaid caring roles</td>
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<td>Sexism, ageism and isolation</td>
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<td>Older women’s workplace health and well being</td>
<td>Job demands and work-related stress</td>
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<td>Health impairments</td>
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<td>Menopause</td>
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<td>Sustainable workplaces for older female workers</td>
<td>Autonomy and job control</td>
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<td>Choice and flexibility</td>
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<td>Training and development opportunities</td>
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</table>
Theme 1: Experiences of gender inequalities

In this theme, experiences of gender inequalities documented in the work lives of older women in the European labour market is presented across four sub-themes.

Subtheme 1: Gendered inequalities and employment

Although growth in numbers of women in the workforce aged 55-64 has been more rapid than for men since 2002 (Eurostat, 2015), older women are still underrepresented in the workforce (Edge, Cooper and Coffey, 2017). Engels et al. (2020) found that on an average, women spent about half as many years in full-time employment than men, while spending more time in part-time or domestic work. The gender employment gap could also be attributed to the fact that women tend to retire earlier than their male counterparts (Edge, Cooper and Coffey, 2017; Diane Keeble-Ramsay, 2018). In their longitudinal study, Weber et al. (2019) found that men are more likely to participate in paid employment after retirement compared to women, despite equivalent baseline educational levels.

Women were found to have a lower gross income compared to men (Payne and Doyal, 2010; Edge, Cooper and Coffey, 2017; Weber, de Lange and Müller, 2019). Edge et al. (2017) used Eurostat data to demonstrate an average gender pay gap of 16.1% in EU-28, which takes into account factors such as lower hourly earnings, lower paid employment and lower employment rates in its calculation of gaps (Eurostat, 2016; as cited in Edge et al., 2017).

Older women were found to be less likely to occupy managerial positions when compared to men of the same age. In a survey on the job strain and coping of baby boomers, Wanka et al. (2015) found only 12% of female baby boomers occupied a managerial position compared to 34.4% of males in the study. They also found significant social disadvantages among female baby boomers compared to males, including lower educational status, fewer cumulative hours of work and lower wages. In another study, managerial levels of men and women in the workplace seemed to affect their health and work-related stress (Björklund et al., 2013). Women in lower managerial positions were found to report significantly increased risk of poor health and exhaustion, and women in general reported a higher likelihood of experiencing work-related stress when compared with higher-level male managers. This highlights the that women are more vulnerable to ill health and work-related stress, even when they don’t reap the benefits of managerial status and position in the workplace. The study also found that the reverse was not true, in that women in higher level managerial positions were not better off in terms of their health status and work-related stress levels when compared to lower-level male managers. In fact, they reported similar health and stress-related patterns compared to men in lower-level managerial positions, suggesting that women, regardless of their managerial position were vulnerable to the negative health-related impacts of work, whereas men reported relatively lower work-related stress and ill health as they progressed in their managerial status.
A mixed methods study found that women were more likely than men to experience unequal returns for elevated levels of effort and commitment to their jobs, resulting in feelings of frustration and perceived discrimination (Le Feuvre et al., 2015). The authors argued that the experience of aging at work was marked by gendered variations between men and women and that the dis-/advantages experienced accorded by gender had a cumulative effect on employees’ wellbeing over the life course. The authors developed a typology of four deal-types to describe the experience of ageing at work, i.e., confident, resentful, determined and distressed. They found that women who were ‘aging with resentment’ perceived poor returns at work, such as a lack of guarantee that they will be rewarded for their continued commitment to their work as they move towards retirement. This ideal-type was also characterised by women’s low satisfaction with both professional and personal lives, and poor health and work-life balance. In comparison, men were found to be ‘aging with confidence’, in conformity with the gender-normative script of the ‘male breadwinner’ who is well-qualified, has achieved managerial status, has a typically upward career trajectory and secure financial status to support a smooth transition to retirement.

Subtheme 2: Heterogeneous employment histories

The reports reviewed showed that women had more heterogeneous and non-continuous employment histories when compared to men, as a result of enforced choices around work and retirement. In this context, ‘heterogeneous’ is used to illustrate employment histories that are marked by part-time work, fewer hours of work, more contract jobs and voluntary positions, all of which women in this review were more likely to have reported compared to men (Payne and Doyal, 2010; Curvers et al., 2018; Weber, de Lange and Müller, 2019). For instance, Engels et al. (2020) found that women in their sample (using SHARE data) were more likely to be engaged in domestic work, be working part-time or not working at all when compared to men, and almost half as likely as men to be engaged in continuous full-time employment. There may be several reasons for this. One study found that negative workplace experiences such as lower than average wage levels, isolation and experiences of sexism in the workplace and fewer training opportunities were likely to drive women out of employment, resulting in long-term unemployment and gaps in employment history (Keeble-Ramsay, 2018). Edge et al., (2017) found evidence of employers’ holding stereotypical beliefs that women preferred part-time work, which may explain the likelihood of women adopting this working pattern.

Several studies reported that women shoulder the burden of caring and domestic responsibilities such as raising children or looking after elderly relatives; all of which contribute to them ‘fitting’ work around these unpaid responsibilities, resulting in more heterogeneous career trajectories, career breaks, and in some cases, early retirement (Edge et al., 2017; Keeble-Ramsay, 2018; Loretto & Vickerstaff, 2013, 2015). Conversely, some studies found evidence of women returning to full-time employment after years of un-/part-time employment for due to the financial pressures of bearing caring responsibilities (i.e., children or elderly parents) (Loretto and Vickerstaff, 2013; Edge et al., 2021). For instance, Le Feuvre et al’s. (2019) ideal-
type ‘aging with determination’ refers to women whose choice of having a family-centred life was thwarted due to financial and other pressures, forcing them to re-enter the labour market and extending their working lives to the extent possible. This highlights a finding from this review, in that older women’s work histories tend to be non-continuous, i.e., marked by a trajectory of labour market exits and re-entries, often as a result of enforced choice. As a result, women’s choices around extended working lives and early retirement are often complex and tenuous. The overall effect is that older women’s career trajectories are less linear and progressive, and more impacted by external economic, social, and domestic constraints when compared to the market-driven trajectory typically observed among older men (Loretto and Vickerstaff, 2013).

The review also highlighted the long-term impact of older women’s heterogeneous and non-continuous employment histories on their ability to make decisions around retirement or extended working lives. One of the reasons for older women’s enforced choice to extend their working lives is financial pressure. This financial pressure is induced by a lack of adequate personal pension rights, typically resulting from previously low-paid or insecure work (Edge et al., 2021; Le Feuvre et al., 2015). Since pension rights are determined by the number of years in employment as well as pre-retirement salaries, women with previously heterogeneous work histories, low pay, and non-continuous career trajectories are driven back into the labour market so that they can build up an adequate pension pot to secure their financial future in their old age. This demonstrates how previous flexible or non-continuous career trajectories often drive women back into the labour market in their later years. Damman & Henkens (2020) reported that older women close to retirement age are often in a more disadvantaged position compared to older men due to the lack of workplace flexibility. We augment this argument by highlighting that older women’s disadvantaged position approaching retirement may also be a result of their enforced choice for flexible work over their life course, for the reasons stated above.

Subtheme 3: Work-life conflict and unpaid caring roles

As noted above, older women are more likely to assume responsibility for caring, family, and domestic tasks when compared to men (Diane Keeble-Ramsay, 2018). Several studies reported on older women’s disproportionate share of domestic and caring responsibilities. In feminist research this has long been termed a ‘double burden’, faced by all women in the labour market. Studies show that the ‘double burden’ also affects older women’s experiences, as they are more likely to be undertaking paid work and unpaid caring roles simultaneously (Edge et al., 2017; Le Feuvre et al., 2015; Keeble-Ramsay, 2018; Payne & Doyal, 2010; Wanka et al., 2015). Interestingly, Loretto & Vickerstaff (2015) reported that the boundaries between paid work and unpaid domestic labour become less clear in later life for women, who made explicit choices around fitting their paid work commitments around their caring responsibilities, thereby opting for flexibility in their work. Furthermore, this study found that older working women’s unpaid caring responsibilities often extended beyond their own children to caring for their grandchildren, older relatives, neighbours and friends, which also prompted them to
opt for flexibility at work, the definition of which is wider than the standard labour market definition for these reasons (Loretto & Vickerstaff, 2015). The authors highlighted that the care responsibilities shouldered by older women are less visible compared to younger women in the workplace, because caring for elders or grandchildren may be viewed as less legitimate than caring for small children. This further reinforces the disproportionate impact of unpaid caring responsibilities on older women’s choices around working.

Caring responsibilities were found to lead to greater stress exposure (Payne and Doyal, 2010), as well as to deteriorating health, especially when remuneration and job satisfaction in their paid work were not perceived as being worth the stress experienced (Brown and Vickerstaff, 2011). As previously discussed, qualitative studies reviewed in this study also reported that the burden of caring responsibilities led some women to extend their working lives due to financial pressures (Brown and Vickerstaff, 2011; Loretto and Vickerstaff, 2013; Edge et al., 2021), which further underscores the impact of disproportionate care burden on women’s working lives.

In many cases, the dual role of paid work and unpaid, domestic labour in combination with ageing also led to work-family/life conflicts, with women being disproportionately impacted. For instance, Viotti et al., (2020), found that work ability was negatively associated with work-family conflicts in a sample of women experiencing menopause. Full-time older female employees in Baptist et al.’s, (2015) analysis of survey data reported higher scores on work-family conflicts due to a higher load of family obligations compared to men. Moreover, in this study, work-family conflicts played a major role as a mediator in the association between work-related stress and depressive symptoms among women sampled. Work-family conflicts were associated strongly with older workers’ sleep in an analysis of survey data by Lallukka et al. (2010), with women reporting a higher number of sleep-related complaints than men. Managing caring responsibilities and having a good work-life balance emerged as an important factor in older women’s decisions around extending their working lives in a literature review and a qualitative study by Edge and colleagues (2017, 2021). In fact, in Loretto & Vickerstaff’s (2013) study, women viewed retirement as an opportunity for freedom from one part of their gender contract; i.e., the dual commitments of paid work and unpaid domestic responsibilities (which they acknowledged they could never retire from). Loretto & Vickerstaff’s (2015) study highlighted the importance of viewing work-life conflicts as a societal issue and not a personal one, by drawing focus away from individual strategies used to resolve issues and highlighting how flexible work and affordable care (for children, partners or elderly family members) can improve the working lives of older women.

In an alternate perspective, Brown & Vickerstaff (2011) and Loretto & Vickerstaff (2013) reported that some older women made a conscious choice to invest time and resources in family life, while supporting the advancement of their male spouses’ careers, which is in conformity with the modified male breadwinner model. This aligns with Le Feuvre’s (2015) ‘aging with confidence’ ideal-type, and highlights the complex nature of older women’s choices around flexible working, unpaid labour, and paid work.
Subtheme 4: Sexism, ageism and isolation

Older women reported more incidents of discrimination in the form of sexism and ageism, in the workplace across reviews of studies compared to men (Payne and Doyal, 2010; Wilks and Neto, 2013; Edge, Cooper and Coffey, 2017; Diane Keeble-Ramsay, 2018; Edge et al., 2021). This was linked to perceptions of views held by others regarding older women’s incompetence and inability to cope with challenges and advancements in the workplace (Payne and Doyal, 2010). The negative consequences of these misperceptions are that women seek early retirement as their aspirations are diminished by views about their abilities to work, learn and develop in the workplace (Keeble-Ramsay, 2018). Older women also reported feeling more isolated in the workplace, compared to both their younger as well as male counterparts. In a qualitative study with retail workers (Edge et al. (2021), older women reported higher instances of intergenerational conflicts due to negative and stereotypical perceptions of older women in the workplace held by peers and colleagues when compared to men. This was connected to feeling disconnected to their younger co-workers, poor communication and staffing problems. A cross-sectional analysis of SHARE data by Bjelajac et al. (2019) reported similar findings with women in their sample experiencing more symptoms of loneliness than men.

Theme 2: Older women’s workplace health and wellbeing

In this theme, the interactions between job demands, work-related stress, health impairments and menopause are presented as they impact on women’s working lives. Although presented as sub-themes, these factors are not mutually exclusive, but produce interrelated, cumulative effects in their impact on older women’s experiences of employment.

Subtheme 1: Job demands and work-related stress

Over 27% of older women in Wanka et al.’s (2015) study reported psychological stress in the workplace within the past week. Additionally, female respondents reported relatively higher physical complaints including pain in the past week, which was attributed to higher work-related stress than men. In Björklund et al. ’s (2013) study, female employees reported higher stress than male employees, particularly if the women were in low-managerial positions. The adverse effects of increased stress in paid work were found to have detrimental effects on older women’s health (Payne and Doyal, 2010). Work-related stress was found to be significantly associated with depressive symptoms for women in both full- and part-time employment, with an overall higher depression score reported by female workers compared to men, with women in the sample reporting more symptoms of depression (Bjelajac et al., 2019). In another study, work-related stress was significantly associated with sleep complaints among older women, with women reporting more sleep complaints when compared to men (Lallukka et al., 2010). Nilsen et al. (2014) found that high job demands were associated with
higher odds of serious health conditions among women when compared with men. Job demands such as long hours, shift work, and lack of breaks were barriers to older women’s extended working lives in a study with older retail workers (Edge et al., 2021). In Weber et al.’s (2019) study, emotional exhaustion was also seen to increase for women over time, but not for men, underlining the relatively unfavourable working conditions of older women.

Subtheme 2: Health impairments

Being employed was found to be a protective factor for good mental health in a study of older workers, half who were women, with a greater proportion of employed respondents rating their health positively compared to unemployed respondents (Bjelajac et al., 2019). But high job demands have been associated with relatively higher odds of serious health problems and exhaustion for older women (Payne and Doyal, 2010; Viotti et al., 2017), when compared with men (Nilsen et al., 2014).

Ill health as well as the negative impacts of work on health were found to be significant barriers to the extended working lives of older women (Edge et al., 2021), often prompting their early retirement (Edge, Cooper and Coffey, 2017). Often, this is related to perceptions about older women’s health, as opposed to their actual health-related barriers to extended working lives. For instance, perceptions about menopause have been found to limit older women’s career progress, resulting in early retirement (Keeble Ramsay, 2018).

On the other hand, there is a body of literature linking personal ill health to early withdrawal from the labour market, (Bound, 1991; Phillipson and Smith 2005; as cited in Brown & Vickerstaff, 2011), often overriding other determinants of early retirement such as financial factors and caring obligations. In a survey of employees across diverse sectors in France, older women were found to most frequently receive unfit-to-work diagnoses following occupational health evaluations (Dutheil et al., 2016), prompting the need to prioritise health promotion and workplace safeguarding for this group. A study on the risk factors for health-related job loss among older women found that occupations in the educational, health and social care sectors such as teaching, nursing, midwifery and caring personal services were most likely to lose employees due to health-related reasons (Syddall et al., 2020).

Studies also found that older women were more likely to suffer negative physical outcomes at the workplace such as physical pain compared to men (Formatting Citation). Nilsen et al. (2014) found that high job demands, specifically time pressures at work were associated with worse health in older women in terms of musculoskeletal pain but better health in older men. In Korpinen et al. (2017), the use of digital technology such as computers and mobile phones has been found to result in greater physical symptoms in their wrists, fingers, elbows, forearms, shoulders and feet, greater exhaustion as well as more sleep disorders and disturbances for individuals over 55 years (compared to those under 55 years). The same study also found that female daily occupational use of desktop computers reported more physical symptoms in the neck compared to non-users of digital technology (Korpinen, Päkkönen and Gobba, 2017).
As previously noted, two studies linked work-related stress to higher likelihood of depression in older women (du Prel and Peter, 2015; Bjelajac et al., 2019). In their qualitative study, Brown & Vickerstaff (2011) found that mental health problems were a barrier to continued labour participation. Women in their study reported the emotional toll experienced as a result of ‘caring’ work roles posed a threat to their health and wellbeing, such as witnessing bereavement at work.

These findings demonstrate the reciprocal relationship between physical and mental ill health, and older women’s decisions about retirement and extended working lives. While in some cases, ill health hindered older women’s participation in the labour market (i.e., their health affecting their work), in other cases work-related stress negatively impacted the health and wellbeing of older women.

**Subtheme 3: Menopause**

Keeble-Ramsay (2018) found that menopausal women have been identified as being placed on the “sticky floor”, which a discriminatory employment pattern that keeps a certain group of people at the bottom of the job scale. In the case of older, menopausal women, this is linked to the previously discussed issue around comparably lower and non-managerial roles that they are placed in. Understandably, the ‘sticky floor’ phenomenon is a perceived limitation to older women’s careers and has often led to them giving up full time employment prematurely.

The adverse effects of work-related stress on menopause health were documented by Payne & Doyal (2010) and were associated with detrimental effects on the physical health of older women. The health-orientation of the employing organisation was found to be significant to work ability among menopausal women, with higher managerial attention to employee health associated with higher levels of work ability (Viotti et al., 2020). There are guidelines and recommendations in place to support the introduction of menopause policies to support transitions in the workplace. Despite this, research and practice supporting menopausal women in the workplace is being addressed very slowly (Targett & Beck, 2022). For instance, in this review Cronin et al. (2021) reported a dearth of research on the use of digital health technologies to support older professional women in managing the symptoms of menopause in the workplace. This is supported by Beck et al. (2021) who through the implementation of a menopause policy at the University of Leicester found that menopause policies and academic activism, although vital, are insufficient when it comes to normalizing menopause at work and tackling the issues of gendered ageism.

**Theme 3: Sustainable workplaces for older femworkers**

Building a sustainable, productive and viable workplace is crucial to the overall profitability and success of the whole organisation, which can be hindered by negative workplace culture. Corporate sustainability covers not only the environmental and financial impacts of work
practices and culture, but its social impact as well. This is concerned with an organisation’s social responsibility to develop practices that prioritise its employee’s welfare in addition to consumers and the wider community. In this theme, we present research findings on some of the structural barriers to older women’s positive workplace experiences owing to harmful and unsustainable work cultures.

**Subtheme 1: Autonomy and job control**

Older women have reported a relative lack of autonomy and control in the workplace compared to older men, which could result in workplace stress. This may refer to the lack of opportunities to be involved in decision-making or the intensity and/or conditions of work (Payne and Doyal, 2010). In a sample of older men and women, high job strain and low job control were found to be associated with complex health problems, i.e., reporting serious health problems across multiple domains including diseases/symptoms in the last 12 months, problems with cognition and communication or mobility issues (Nilsen et al., 2014). When taking into account that women experience lower job control, this finding could be detrimental to their experience of work. The same study also found that high job demands were associated with higher odds of serious health problems among women but not men, suggesting that women may be more susceptible to psychological impacts of job demands than men. Weber et al. (2019) found that conditions for work after retirement in the form of job control and job demands seem more favourable to men when compared to women, with women in their study reporting significantly less job control and higher job stress.

**Subtheme 2: Choice & flexibility**

Previous literature has demonstrated the benefits of workplace flexibility for late-career employment and retirement. Damman & Henkens (2020) found that women report lower workplace flexibility in terms of their work schedule when compared to men, which led them to conclude that women approach retirement in less favourable conditions. In a similar vein, Edge et al. (2021) found that flexibility and choice were key facilitators to extended working lives for older women. This pertained mainly to decisions regarding shift patterns, hours of work and work-life balance. This study also highlighted the importance of older women’s choices regarding the kind of roles and tasks that they perform to ensure that these are aligned with their health and capacity.

Viotti et al. (2020) found that work hours flexibility did not have an impact on the work ability of older workers. However, flexibility and choice in the workplace can counteract the adverse effects of work-family/life conflicts which older women are disproportionately faced with (du Prel and Peter, 2015; Edge et al., 2021) and this can transform the experience of older female workers in a positive way.

Loretto & Vickerstaff (2015) offered a different perspective to the concept of flexibility by challenging some of the notions of flexible work for older women. Based on their qualitative
research with couples and individuals, they found that flexible work was highly gendered in later life. For men, flexible work such as self-employment was characterised by high skill, choice, autonomy and control. For women, especially those from financially and educationally disadvantaged backgrounds, flexible work was associated with low skilled work and a lack of job choice and autonomy. They also found that choice in their study typically meant women rejecting flexible working, who viewed their later lives as an opportunity to rebuild their careers or seek full-time employment. In contrast men viewed their later years as an opportunity to wind down and re-connect with their family. This was especially relevant to women, whose experience of flexible work comprised of less secure forms of work which were taken up in order to ‘fit’ employment around caring and domestic responsibilities. These findings reinforce the dangers around the stereotypical notions around women’s preferences for flexible working, often leaving them professionally and financially disadvantaged in their later working lives.

Finally, Loretto & Vickerstaff (2013) reported the need to recognise the limitations faced by older women when making choices around retirement and extended working lives. They suggested that choice regarding extended working lives or retirement may be constrained by a range of structural and contextual factors that determine the working lives of older people such as health, financial stability, gender roles, and partnerships.

Subtheme 3: Training and development opportunities

Previous reviews found that older women reported fewer opportunities for on-the-job learning and training activities when compared to men (Payne and Doyal, 2010; Diane Keeble-Ramsay, 2018). Wilks & Neto (2013) argued that implementing age-relevant training programmes for staff could be key to improving job-related subjective well-being. This was reiterated in Edge et al.’s (2021) study on facilitators of workplace health and wellbeing. Similarly, better opportunities for vocational training and enhanced roles at work were associated with extending the working lives of women and delaying retirement (Edge, Cooper and Coffey, 2017; Edge et al., 2021). Viotti et al. (2020) also discussed the need for implementing organizational policies, training and activities that were specifically targeted at improving the wellbeing of menopausal women in order to foster their job sustainability across the work-life span.

Discussion & recommendations for future research

The key aim of this review was to examine the current research on older women in the European labour market, with a specific interest in literature focusing on their extended working lives and retirement, in order to identify research gaps. The key themes identified in this paper represent the experiences shared by many women across different cultural, social and political and welfare contexts within Europe and offer an important starting point in identifying policy and practice gaps. We have synthesized and presented the results from a
pan-European perspective addressing the lack of comparative analyses of older women’s experiences. While such a comparative study loses some of the depth of engagement with the effects of welfare and labour market practices achieved through national-level studies, the comparative study points to the ubiquity of experiences despite these variations in context. In that regard it illuminates the specific challenges faced by older women that endure despite a variety of policies and practices. In the rapid review, we identified a number of themes representing the experiences of older women in the European labour market. These are summarized below describing experiences of gender inequalities, structural labour market barriers and workplace health and wellbeing, and organisational and cultural factors. The summary is followed by a section in which we highlight current research gaps and how research might support and improve older women’s working conditions in the future.

Overall, our findings support and extend the well documented disadvantaged position of women in employment, by incorporating the detrimental impacts associated with aging. The review found evidence for a continued gender wage gap as well as a lack of opportunities to assume higher-level positions available to women when compared to men of a similar age (European Commission, 2016). Older women are faced with age- and gender-based stereotypes, especially regarding assumed lack of competences in the workplace when compared to both men and younger women (Kornadt, Voss and Rothermund, 2013).

The review found that women have relatively discontinuous and heterogeneous employment histories marked by higher part-time work undertaken, more breaks in employment, and greater participation in unpaid and voluntary work. This is mainly attributed to their greater share of domestic labour and care responsibilities compared to men, which persists into older age with women undertaking caring tasks for older relatives, grandchildren, neighbours, and friends. High childcare or long-term care costs associated with these activities have been found to deter women’s continued employment (European Commission, 2016) so it is essential that policy to support older women recognise the knock-on effects of the wider social system. Accessible, affordable and high-quality care services can incentivise older women to stay in employment, pursue full-time paid work, utilise their expertise and experience, and extend their working lives. Currently low enrolment of young children in formal childcare and the lack of quality long-term care services in many EU member states present obstacles for older women’s participation in the labour market (European Commission, 2016).

Older women’s role in providing care and undertaking unpaid, domestic labour presents the pertinent issue of work-life conflict. Work-life conflicts have a range of negative effects including poorer health and wellbeing and early retirement. They also deny older women the opportunity to pursue personal career ambitions, often leaving them with flexible working as the only option. This is especially relevant in a modern work context, where flexibility in the form of remote or hybrid working is viewed as an opportunity for accessible and inclusive employment for groups such as older women (Meagher, 2019). Findings indicate that women and men employ flexible working arrangements differently; while men use it to increase work commitments, women tend to use autonomy over working hours to resolve work-life conflicts.
There are concerns that work-life conflicts which are experienced disproportionately by women will worsen without a clear strategy in place to equitably support choices about flexible working for everyone (Chung et al., 2020; Hobbs, 2021).

The current review highlighted the relatively lower positions occupied by older women compared to men. We also found that women reported lower perceived flexibility in the workplace, therefore, flexible work has the potential to introduce novel inequalities, while widening existing ones. A 2019 Chartered Institute of Personnel and Development (CIPD) survey found that access to flexible work was not equitable, with employees in lower-level positions or occupations having fewer opportunities. Similarly, previous research has documented the over-representation of women in flexible work that is typically characterised by insecure and precarious employment conditions as opposed to the type of work that corresponds to the flexibility needs of women (Buchholz et al., 2009).

Mallett et al. (2021) have questioned abstract notions of flexibility at work, calling for greater representation of diverse perspectives on how flexible working should be designed to be equitable. Our findings, based on the limited qualitative research included in the review, reinforce this perspective and call for a re-examination of the needs and preferences for flexible work as perceived by older women, whose perceptions and experiences of flexibility (insecure, precarious or forced part-time work) may not align with the ideals of flexibility (secure, flexibly organised work that is characterised by choice).

Early retirement emerged as a key issue in this body of literature. The main factors associated with women’s early retirement include lower socio-economic status, negative impact of work-related stress and shift work on health, perceptions of, and the poor experiences associated with menopause, the physical and emotional impact of disproportionate caring responsibilities, and the lack of choice and flexibility in job roles to name a few. Women were also more likely to cite personal reasons for early retirement compared to men (Edge, Cooper and Coffey, 2017) which implies that they differ from the more ‘traditional’ career trajectory of their male counterparts, wherein end-of-career decisions typically tend to be for professional reasons (i.e., ‘winding down’). In many cases, the male partner’s retirement decisions determined or precipitated their female partner’s retirement decisions, leading to joint decisions around retirement (Loretto and Vickerstaff, 2013).

Our findings show that ill health, in many cases as a result of work-related factors such as stress and physical demands is one of the key reasons for women choosing to retire early. The lack of support available at work to manage menopause symptoms also forces women out of employment prematurely. Choice regarding extending older women’s working lives is required, in line with employment strategy targets.

Our review found a myriad of reasons why women retire or extend their working lives; often not borne out of choice. Demographic aging has prompted pension reform in several European countries in order to achieve sustainability of public pensions. Raising the retirement
Age has been one of the key reforms, which means individuals must work longer for their pension (Fric, 2015). However, the reasons for supporting extended working lives have been critiqued by Phillipson (2019), who also highlighted the increasingly fragmented nature of work in later life. This is supported by the findings in this review. Due to their heterogeneous employment histories, caring responsibilities and financial pressures in later life, women are professionally disadvantaged and forced to work longer to achieve an adequate pension. The possible financial ramifications of this disadvantaged position include a lower gross income, lower length of paid employment and a smaller pension pot before retirement. These factors have a detrimental impact on women’s working lives as they are often reasons that compel older women to accept jobs or contracts with unfavourable working conditions.

Future research topics

More qualitative research into first-person accounts of being an older woman in employment are needed to inform better policies, working closely with stakeholders who have policy and decision-making capability. Our review has identified a number of areas that warrant specific attention. Overall, we need a better understanding of why women make the choices they make and what needs to change to empower them.

We need a better understanding of what is meant by ‘flexible working’, its specific nature and the value attributed to it. As the review has demonstrated, it has the potential to be a support but also a detriment to career and health outcomes. Flexibility can enable autonomy or it can mean precarity, it is often associated with part-time work which is in turn linked to lower rates of pay. Flexibility at work has the potential to be a blunt tool unless the experience of it is fully understood. Better understanding of the realities of flexible working (and why it is chosen or not) will support policy and practice.

We need to understand the gendered differences in experiences of pain and stress at work, particularly in light of their role in shaping working patterns. Such research would need to consider factors beyond the workplace, to include work/family and other health or physical factors between and within welfare states. Work design, ergonomics, societal expectations as well as external factors and personal differences may all play a role. But the evidence points to consistent gendered differences that suggest that structural, political and social contexts and factors rather than just individual differences play a role here, in line with the ‘socio-ecological systems’ model of work, home and community (Pocock et al., 2012).

Without adequate support and intervention to improve working conditions for older women, their experience of labour market participation may become increasingly negative. Our review identified a lack of publications focussing on interventions or programmes targeted at improving the working lives of older women, despite the documented challenges they are faced with at work. Examples of support and intervention include giving women access to better training and development opportunities at work, facilitating their role progression, and
provision of appropriate and effective health and wellbeing support in the workplace. Understanding their effectiveness will inform improvements in practice.

For the purpose of this review, older women were defined as those 55 years and above. Several publications were excluded due to not meeting this age cut-off. We found a greater share of research on the labour market participation of ‘middle-aged’ individuals, i.e., between 45-60 years of age. Augner (2021) has highlighted the lack of research on the psychological and health issues in working ‘old-old’ population, i.e., 75 years and older). If extending the working lives of older people is a political, social and economic priority, more research on the labour market experiences of individuals 55 years and older is required.

We also found a paucity of qualitative research on the experiences of older female workers in Europe. Most of the included publications employed quantitative statistical analyses of large, publicly available datasets, surveys and questionnaires. Considering the diverse needs of older women in the workplace, in-depth, first-person accounts can provide a more nuanced understanding of challenges and facilitators related to older women’s employment and may reveal important ideas for innovation and change.

Future research must consider the complex definitions around what constitutes an ‘older’ worker in the labour market. As Phillipson (2019) argues, the label of ‘older worker’ needs revisiting, as the experiences of sub-groups such as women, men, and individuals from different ethnic backgrounds, are highly unique and individualised. In light of the increased movement of political and economic refugees and migrants into Europe since 2015, as well as the outbreak of the war in Ukraine, older female migrants inevitably participate in the labour market and contribute to economic growth. There is a need to undertake research into employment needs and experiences of individuals at the intersections of race and ethnicity, in order to inform policy and practice that is generalizable and applicable to everyone who is economically active. The impact of COVID-19 and the role of digital and hybrid working should also be considered in future studies. This has longer-term impacts on perceptions of flexibility, work-life balance, and what constitutes and enables inclusion and equity in the workplace.

There are also policy implications. Firstly, many of the drivers of inequality for older women are cumulative over time. Career breaks and the burden of domestic and parental responsibilities at a younger age impact throughout the working life. Tackling barriers faced by older women at the point at which they face them is too late to remove the cause. Support for women during career breaks and their return to work, more support and encouragement of shared parental leave, tackling assumptions about who should take on domestic responsibilities and specific support for returning parents would address root causes. Secondly, and related, is the need identified above to recognise that older women are directly and immediately impacted by policies targeting younger women, such as childcare support. Taken together they point to complexity-based approaches to tackling these challenges.
The evidence also points to vicious circles. If women are paid less than men, it is unsurprising that they take on more of the childcare and domestic burden to enable the better paid partner to continue earning, which in turn leads to ongoing and long-term gender wage disparities. Bold policy is needed to break these cycles, including tackling the gender pay gap and its causes.

Organisations can also play a role in overcoming inequality. The limited support available in the workplace for women going through menopause is remarkable given the significant proportion of the population that will experience it during their working lifetime (Beck et al., 2020). Atkinson et al. (2020) have outlined the social responsibility of organisations, as well as the business and legal case for instituting menopause-related support for women in the workplace. Organisations can also play a substantial role in breaking the vicious cycles, through training, reviewing and tackling gender pay gaps, return to work support, childcare support, reviews of workplace design and wellbeing at work, career support and promoting equality at work (to name a few). Further research on the effectiveness of interventions would underpin these initiatives.

**Conclusion**

This rapid review identified a variety of complex issues impacting negatively on older women’s participation in the European workforce. Our findings highlight some key considerations for policy when considering extended working lives for older women: 1) the importance of a longitudinal perspective; the working lives of older women can only be fully understood in the context of their career and life history. Our review points to the compounding effects of disjointed careers that start from early in a woman’s employment. Policy intervention therefore needs to start early and should be focused on the longer term for sustained equality; 2) the importance of understanding working lives in the context of the demands placed on them outside of work and how policy aimed at supporting the lives of older women outside work impacts employment, including welfare state variations; 3) the need to give more attention to the experiences of women that impact their health and wellbeing (e.g. menopause) and shape attitudes towards them; 4) decisions and policies focused on extending older women’s working lives must not blindly address employment strategy targets, but instead consider the diverse and individualised needs of older women in the workplace across diverse cultural contexts by better understanding their experiences.

This review demonstrates that generalisations about the need to extend working lives of older people, or framing policies and interventions that aim to keep older women in the labour marker are not straightforward and require a more nuanced perspective that takes lived experience (of being an older female worker) into account. In-depth, first-person accounts in collaboration with key stakeholders are needed to inform better policies that are impactful.
Future research should address this, including studies using a range of methodologies to explore a diverse range of experiences, and focussing on innovation and improvement in policy and provision that will benefit older female workers, as well as all workers in Europe. The review had some limitations. Some of the studies were reviews of previously published literature or performed secondary analyses of available data. Although these studies met the criteria for our publication date (in or after 2010), some of them included research and data published or collected before 2010. While we have included these studies in this review, we acknowledge that some of this data should be interpreted with caution when it comes to informing current employment practices and policy directives. The review process was expedited in line with rapid review methods, therefore limiting the scope of the findings. Further, previous researchers have acknowledged the challenges with performing keyword searches in this area, due to the use of varying terminology (Granville and Evandrou, 2010; Payne and Doyal, 2010). As a result, it is likely that some relevant references and data may have been missed, despite our attempts to run multiple database searches to address this. Several of the included studies focused on a specific industry or profession such as education, nursing, or retail. This restricts the ability of the findings in informing policy development and services for older working women in general. Importantly, defining ‘older women’ is challenging. For instance, experiences such as menopause may also affect those younger than 55 years of age, but due to the definition of older women in this review as those above the age of 55 (or a mean sample age of over 55), we had to exclude several studies that did not meet these criteria. In excluding research on these populations, we might thereby omit those women’s experiences of wellbeing and aging at work. Future studies could adopt a life-course perspective when studying labour markets and the workforce, as opposed to a young-old dichotomy to define age brackets. A pan-Europe literature review could have potentially excluded some contextualised specifics in terms of challenges, barriers and facilitators to older women’s employment such as a detailed analysis of welfare systems, their similarities and differences. This prevents us from making country-specific policy or practice recommendations from the findings. Finally, by narrowing the scope to ‘women’ in our search criteria, we may have excluded research on diverse sub-group populations with different sexual and gender identities. Individuals who identify as non-binary or are from LGBTQ+ communities make up a significant proportion of the labour market, and their views, perspectives and experiences are crucial in informing policy innovations or interventions that could improve their working lives.
Statement of ethical approval

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Declaration of contribution of authors

The authors confirm contribution to the paper as follows: study conception and design: V.T., S.G.R., A.L., E.J.; data collection: S.R, L.T.; analysis and interpretation of results: S.R., L.T., S.G.R, V.T. A.L., E.J.; draft manuscript preparation: S.R. All authors reviewed the results, edited and approved the final version of the manuscript.
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