

## **Assessment of Preparedness among Nurses Approaching Retirement in a Tertiary Institution, North-Central, Nigeria**

**Elizabeth Olufunke Abore**

Department of Nursing Sciences, University of Ilorin Teaching Hospital, Ilorin, Nigeria

**Nda Jibril Umar**

Department of Nursing Sciences, Faculty of Clinical Sciences, University of Ilorin, Nigeria

**Oyenike I. Adewara**

Department of Nursing Sciences, University of Ilorin Teaching Hospital, Ilorin, Nigeria

**Mariyam A. Abdul-Baki**

University of Ilorin Health Services, Ilorin, Nigeria

**Muslimat F. Salami**

College of Nursing Sciences, Accident and Emergency Nursing Programme, University of Ilorin Teaching Hospital

**Oluwatope A Obe**

LAUTECH Teaching Hospital, Ogbomoso, Nigeria

**Ahmed Orelope Ibrahim**

Main Operating Theatre, Department of Nursing Sciences, University of Ilorin Teaching Hospital, Ilorin, Nigeria

**Ibrahim Opeyemi Abdulmumeen**

Department of Medical Surgical Nursing, Faculty of Nursing Sciences, College of Health Sciences, Al-Hikmah University, Ilorin, Nigeria

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**Abstract:** *Retirement is a challenging transition for many nurses, often involving loss of identity, reduced sense of value, and concerns about financial security, social isolation, and routine changes, especially for those who are inadequately prepared. This study assesses retirement preparedness among nurses at the University of Ilorin Teaching Hospital by examining their knowledge, level of preparedness, perceptions of retirement life, factors influencing preparedness, and plans for life after retirement. The descriptive survey design was adopted to gather data from 346 nurses aged 50 years and above who are within ten years of the mandatory retirement age. A structured questionnaire was used to collect information on socio-demographic characteristics, knowledge of retirement preparedness, level of preparedness, perceptions, influencing factors, and retirement plans. Findings of the study shows that most nurses, despite being experienced and educated, have limited knowledge of*

*retirement preparedness. While some plan financially, many lack clear strategies for health, well-being, and income. Perceptions are mixed, and preparedness is influenced by financial, personal, and institutional factors. Knowledge significantly affects preparedness, but gender does not. The study concludes that despite awareness of retirement planning; significant gaps remain among nurses. It recommends stronger institutional support through retirement education, financial literacy, and accessible pension advisory services to promote smoother transitions, improve well-being, and support sustainable workforce planning.*

**Keywords:** nurses, preparedness, retirement planning, perception, institutional support, pension scheme

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## INTRODUCTION

Life unfolds in stages, each presenting unique challenges and opportunities. Among these stages is retirement, which follows a period of active employment. To everything, there is a season: a time to be born, a time to die; a time to plant, and a time to harvest." Similarly, there is a time to work, a time to retire, a time to plan for retirement, and a time to reap the benefits of such planning. Retirement, whether in the public or private sector, signifies the formal conclusion of one's working life and marks the transition from active employment to a life of leisure (Ismaila, 2019). This phase follows years of employment and requires proper planning to navigate its challenges and opportunities. While some embrace retirement positively, others view it with fear, associating it with boredom, financial struggles, ill health, and loss of status. In Nigeria, many workers, especially in the public and private sectors, see retirement as a daunting challenge due to unpreparedness, leading to psychological and financial issues.

Retirement signifies a new beginning, akin to starting a new job, with personal, lifestyle, and financial adjustments to be made. Work provides purpose, financial stability, and structure, shaping one's identity and well-being (Nierobisz *et al.*, 2025). However, as aging is inevitable, retirement becomes a natural phase that requires adequate preparation to avoid its potential challenges. The growing population of retirees highlights the importance of prioritizing their welfare at a national level.

Retirement marks a significant life transition, and the preparations leading up to it can often be challenging and unpleasant for many individuals (Schwab, 2025), demanding comprehensive planning to secure financial security, psychological well-being, and a maintained quality of life. Because of the emotional involvement in patient care and the demanding nature of their work, nurses may find this adjustment especially difficult. Typically, nurses in Nigeria retire at age 60 or after 35 years of employment, whichever occurs first. However, study shows that a large number of Nigerian nurses are ill-prepared for retirement, dealing with concerns like unstable finances, poor retirement planning, and health problems (Ujoatuonu *et al.*, 2023).

Due to the demanding nature of nursing work, preparing for retirement presents unique challenges. Nurses often prioritize the needs of others over their own, which can leave them unprepared for the aging process. This may result in retiring with insufficient financial

resources, poorly managed health conditions, and limited plans for post-retirement activities (Afolabi *et al.*, 2023). Additionally, years of physical exhaustion, burnout, and accumulated stress can further complicate the transition into old age (World Health Organization, 2021). The aging nursing workforce has become a pressing concern in many healthcare systems worldwide. Nurses approaching retirement face significant challenges as they transition out of their professional careers, but this phase also presents opportunities for personal and professional growth. According to the World Health Organization (2020), the global nursing workforce is aging, with a substantial proportion of nurses nearing retirement age. This demographic shift creates potential gaps in healthcare delivery, exacerbating existing shortages in nursing staff.

Retirement in the nursing profession in Nigeria comes with a range of challenges that nurses often face as they transition from their active years of service to retirement. These challenges include financial insecurity, insufficient retirement planning, limited social support, and health-related problems (Ojo & Akinwale, 2019; Oyewole & Olaolorunpo, 2019). According to Ajayi and Ojo's (2020) hypothesis, factors such as inadequate retirement preparation, financial concerns, and difficulties adapting to retirement contribute to preretirement anxiety among nurses in Nigeria.

Retirement is a universal phase that marks a significant life transition from active employment to a period of rest. Globally, research shows that retirement planning is crucial to ensure financial stability, psychological well-being, and overall quality of life after active service. According to the World Health Organization (2020), a large proportion of the global nursing workforce is aging, which poses challenges for both workforce sustainability and individual well-being. Studies have shown that inadequate retirement preparation can lead to emotional distress, financial insecurity, and health problems among retirees.

In many developing countries, including across Sub-Saharan Africa, the situation is more critical. Retirement planning is often not prioritized, and institutional support is weak. Nurses, who are key frontline healthcare workers, frequently lack access to structured pension schemes, retirement counseling, and health support systems. This results in increased vulnerability to poverty, depression, and social isolation after retirement.

In Nigeria, nurses typically retire at age 60 or after 35 years of service. However, studies (Afolabi *et al.*, 2023) show that many nurses are ill-prepared for retirement. Factors such as irregular pension payments, lack of retirement education, financial illiteracy, and heavy workloads contribute to this problem. Although government policies like the Pension Reform Act (2014) exist, issues such as corruption, delayed payments, and inadequate implementation limit their effectiveness.

A 3% increase in enrollment into the Nigerian Pension Scheme, from 9.2 million to 9.5 million in 2021, reflects the growing number of individuals to be supported by the government. This growth highlights the ageing population, which will continue to encounter challenges such as the ageing process, reduced financial security, and extended family dynamics (Nigerian Pension Industry Report, 2022). Additionally, Nigeria's older population is expected to grow

due to declining fertility rates, increasing life expectancy, and slower population growth (National Bureau of Statistics, 2022).

Nigerian retirement policies are governed by the Pension Reform Act of 2014, which specifies the retirement age, benefits, and procedures for all employees, including nurses (Ujoatuonu *et al.*, 2023). Despite this structure, problems like corruption, misappropriation of finances, and delays in pension payments have been documented; these could have an impact on nurses' financial security and retirement transition.

Older nurses, with their valuable experience, are crucial to maintaining care quality and mentorship. However, factors such as pension structures and lack of flexibility may discourage them from staying in the workforce beyond retirement age. This study aims to explore the assessment of preparedness level among nurses approaching retirement. It focused on the "push" and "pull" factors, such as work conditions, health, family, and financial considerations, to help healthcare systems better manage an ageing nursing workforce and retain experienced nurses.

Despite growing awareness of retirement challenges, there is limited empirical evidence focusing specifically on nurses in Nigeria, especially within tertiary institutions like UITH. Most existing studies are general and not tailored to healthcare professionals who have unique stressors and caregiving roles. This study therefore exists to assess the knowledge, perception, and level of preparedness among nurses at UITH.

## MATERIALS AND METHODS

This study adopted descriptive cross-sectional research design of survey type. The descriptive survey design method was considered necessary for this study as it helps the researcher to collect and analyse data from a sample of respondents. The design also helped to gain insights into respondents' attitudes, behaviours and opinions as relates to their preparedness level for retirement. University of Ilorin Teaching Hospital (UITH) Ilorin, Kwara State, Nigeria. was the setting used for this study. The population for the study comprised all nurses at the University of Ilorin Teaching Hospital while the target population for the study were all nurses in Ilorin campus who falls within 10 years of retirement age i.e. 50 - 60 years. A non-probability sampling technique in form of purposive sampling technique was employed to select three hundred and forty-six (346) nurses out of five hundred and eighty-nine (589) nurses in Ilorin campus whose cadres falls within DN, HNS, DDN, ADN and CNO. Thus, a total number of three hundred and forty-six (346) nurses were selected as sample for the study.

A questionnaire on Assessing Preparedness for Retirement among Nurses Approaching Retirement at University of Ilorin Teaching Hospital was constructed by the researcher to elicit information from the respondents as it consists four sections. **Section A** focused on social demographic characteristics of the respondent, **Section B** centered on level of knowledge of retirement preparedness, **Section C** focused on the level of preparedness toward Retirement, **Section D** centred on perception of nurses towards planning for old age, while section E focused on factors influencing preparedness for retirement. Content as well as face validity

were used to ascertain the validity of the instrument as experts in the field of nursing together with the supervisor were given a copy of the instrument each to check and make corrections where necessary.

A pilot study was conducted to test the clarity, validity, and reliability of the research instrument before the main data collection. The pilot study involved administering the questionnaire to 50 nurses at a Kwara State University Teaching Hospital who had the same characteristics with the target population. These nurses were within range of 50 and 60 years, had at least 10 years' experience and held clinical or administrative roles. Feedback from the pilot helped identify ambiguous questions, check the average time needed to complete the questionnaire, and refine the instructions to ensure respondents' understanding. The responses were analyzed to determine the reliability coefficient using Cronbach's Alpha, which yielded a value of 0.83, indicating that the instrument was reliable and suitable for the main study. Necessary adjustments were made based on the pilot results to enhance the quality and effectiveness of the questionnaire

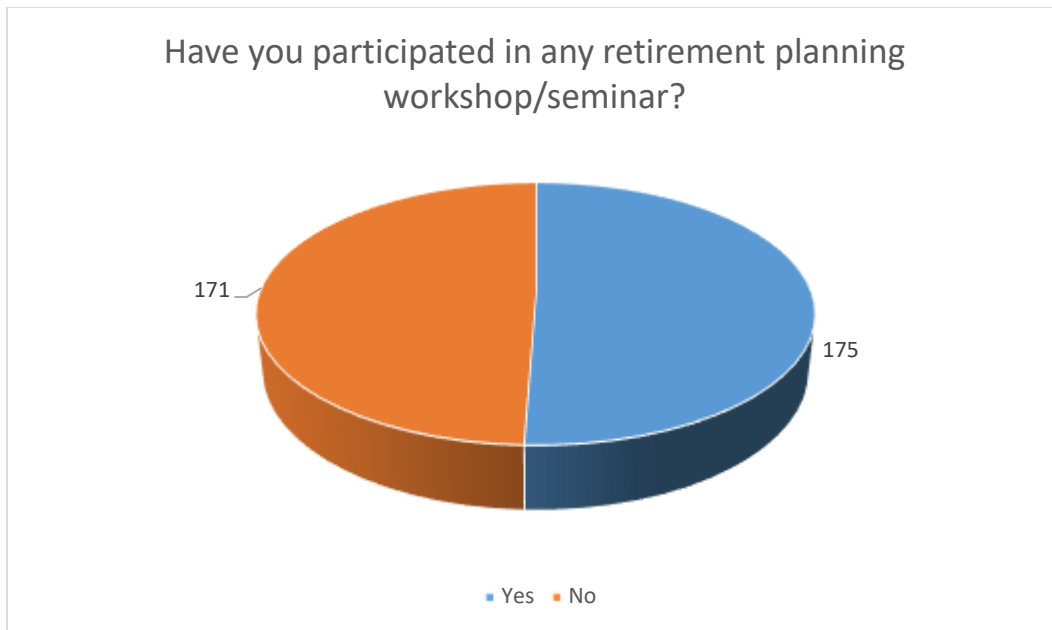
An introductory letter duly signed was collected by the researcher from the Head of Department of Nursing Sciences University of Ilorin and this letter was presented for introduction and permission to collect the needed data to facilitate the smooth conduct of this study. The researcher personally administered the instrument with the assistance of two researchers at University of Ilorin Teaching Hospital. The researcher provided detail explanations on how to fill out the questionnaire, and the respondents were given the opportunity to participate voluntarily. Descriptive statistics was used in describing the demographic characteristics of the respondents as well as to answer the research questions raised, findings were presented in tables and chart. Also, Chi-Square test of independence was equally used to test for the two formulated hypotheses at 0.05 level of significance.

Ethical approval was obtained from the Ethical Review Committee of Faculty of clinical Sciences through the Department of Nursing Science with UERC Approval Number: UERC/ASN/2025/3272 and University of Ilorin Teaching Hospital with Approved Number: NHREC 02/05/2010. The research was conducted in line with the ethical principles of research; Autonomy, beneficence, non-maleficence and justice. The consent of the respondents was sought and the researcher also informed them that whatever information provided was for this study only and was treated with utmost confidentiality. Furthermore, no respondents was compelled to give response to the instrument, and the answers to the questions was determined by the willingness of the respondents.

**RESULTS****Table 1: Sociodemographic profile of respondents**

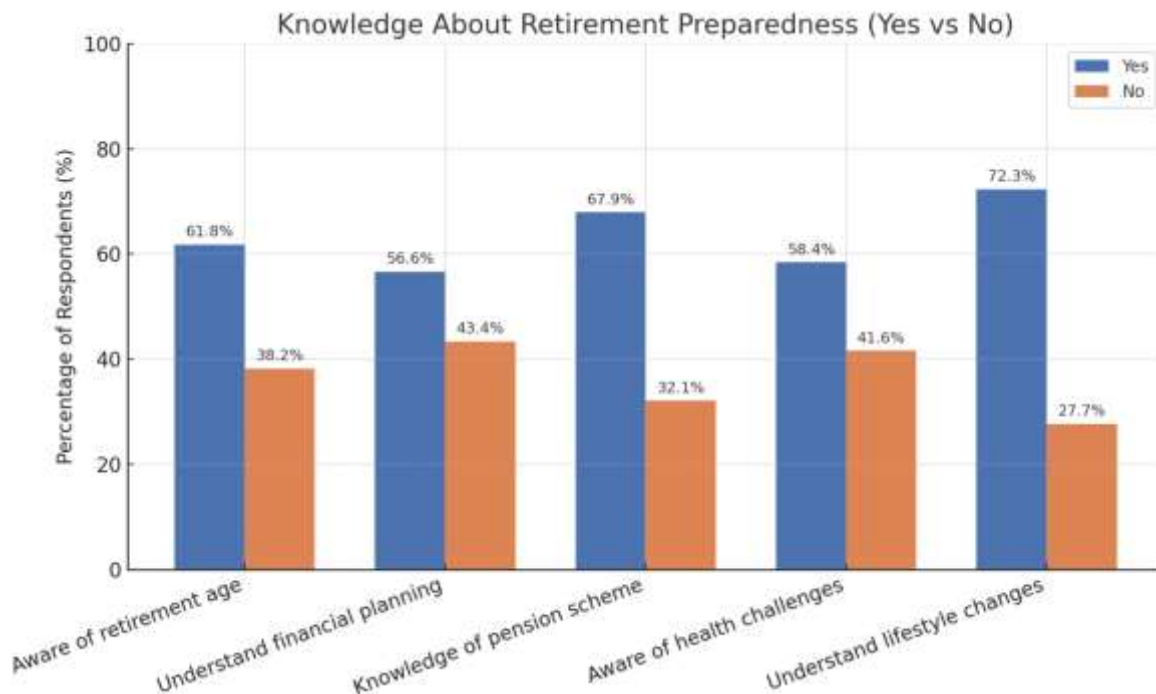
<b>Variable</b>	<b>Category</b>	<b>Frequency</b>	<b>Percentage</b>
<b>Age</b>	50–54 years	235	67.9
	55–59 years	100	28.9
	60 years and above	11	3.18
<b>Gender</b>	Male	43	12.4
	Female	303	87.6
<b>Marital Status</b>	Single	71	20.5
	Married	100	28.9
	Divorced	92	26.6
	Widowed	83	24.0
<b>Education Level</b>	Diploma	39	11.2
	Bachelor's Degree	214	61.8
	Master's Degree	67	19.4
	PhD	6	1.73
	Others	20	5.78
<b>Years of Experience</b>	Less than 20 years	105	30.3
	20–29 years	128	37.0
	30–35 years	113	32.7
<b>Department</b>	Medical-Surgical	71	20.5
	Obstetrics & Gynecology	48	13.9
	Pediatrics	61	17.6
	Intensive Care Unit	43	12.4
	Accident & Emergency	67	19.4
	Others	56	16.2

Table above presents the demographic profile of the nurses approaching retirement. The majority of respondents are aged 50–54 years (67.9%), with a substantial number 55-59 years and above (28.9%), confirming that the sample truly represents nurses nearing retirement. The dominance of females (87.6%) reflects the gendered nature of the nursing profession, which is consistent with national and global trends. In terms of marital status, a significant portion are married (28.9%), divorced (26.6%), or widowed (24.0%), which suggests varying levels of family support and possible differences in financial security. Education-wise, most hold a Bachelor's degree (61.8%) or higher, which indicates a well-educated workforce, although higher education does not always guarantee financial literacy or retirement readiness. Work experience data show that over two-thirds have at least 20 years in service, underscoring their long contribution to the profession and the importance of safeguarding their welfare in retirement. The departmental spread demonstrates diversity across clinical specialties, which means retirement programs should be adaptable to different work contexts. Lastly, the near-equal split between those who have and have not attended retirement seminars highlights the need for more consistent institutional support.



**Figure 1: Level of participation in retirement seminar/workshop**

The figure above shows that majority (50.6%) of respondents have been involved in retirement workshop/seminar.



**Figure 2: Knowledge about retirement preparedness**

Figure above presents findings related to the level of knowledge about retirement preparedness among nurses approaching retirement at the University of Ilorin Teaching Hospital. The data

reveal that knowledge levels are generally moderate, with some important areas showing gaps in awareness and understanding. Specifically, 61.8% of the respondents reported that they are aware of the retirement age for nurses in Nigeria, while 38.2% indicated they were not. This shows that although most respondents know when they are expected to retire, a sizeable number still lack this basic information. Furthermore, just 56.6% of nurses agreed that they understand the importance of financial planning for retirement, meaning nearly half of the respondents may not fully grasp how critical early and strategic financial preparation is for life after service. A slightly higher percentage, 67.9%, demonstrated knowledge of the Nigerian Pension Scheme, indicating a relatively better understanding in that area. However, awareness of healthcare challenges during retirement was slightly lower, with only 58.4% indicating they were aware. This is concerning, considering that health issues often become more prominent in retirement and require careful long-term planning. The highest knowledge level was seen in the area of lifestyle changes after retirement, where 72.3% of respondents acknowledged an understanding of the changes they are likely to experience, such as shifts in daily routine, social life, and professional identity. This suggests that many nurses are aware that retirement is more than just stopping work, it affects several aspects of life.

**Table 1: Level of preparedness among nurses approaching retirement at the University of Ilorin Teaching Hospital**

Statement	SA (%)	A (%)	N (%)	D (%)	SD (%)
Started financial savings	76 (22.0%)	66 (19.1%)	60 (17.3%)	62 (17.9%)	82 (23.7%)
Post-retirement income plan	63 (18.2%)	67 (19.4%)	80 (23.1%)	52 (15.0%)	84 (24.3%)
Clear plan for health maintenance	57 (16.5%)	77 (22.3%)	62 (17.9%)	70 (20.2%)	80 (23.1%)
Considered alternative career paths	66 (19.1%)	61 (17.6%)	79 (22.8%)	75 (21.7%)	65 (18.8%)
Arranged for social/emotional well-being	70 (20.2%)	72 (20.8%)	87 (25.1%)	62 (17.9%)	55 (15.9%)

Table 3 above, reveals a concerning pattern of low to moderate preparedness. Only about 40% have started financial savings or have a post-retirement income plan. Many respondents remain neutral or disagree about having plans for health maintenance, social and emotional well-being, or alternative career paths. This demonstrates that even where basic awareness exists, practical preparedness remains weak. It also reflects barriers such as irregular income, family financial responsibilities, and the absence of structured support systems. Only a small proportion of respondents actively prepare financially or have health and emotional strategies in place. A significant number are either neutral or disagree, reflecting a low to moderate preparedness level.

**Table 2: Nurses' perception and emotional outlook toward the retirement phase**

Statement	SA (%)	A (%)	N (%)	D (%)	SD (%)
Retirement is a time of rest and fulfillment	70 (20.2%)	80 (23.1%)	73 (21.1%)	57 (16.5%)	66 (19.1%)
Fear of financial instability after retirement	69 (19.9%)	77 (22.3%)	74 (21.4%)	62 (17.9%)	64 (18.5%)
Belief that planning should start early	70 (20.2%)	64 (18.5%)	73 (21.1%)	63 (18.2%)	76 (22.0%)
Retirees face loneliness and social isolation	70 (20.2%)	69 (19.9%)	74 (21.4%)	53 (15.3%)	80 (23.1%)
Confidence in preparedness	59 (17.1%)	75 (21.7%)	84 (24.3%)	67 (19.4%)	61 (17.6%)

Table 4 indicates mixed perceptions. While about 43% see retirement as a time of rest and fulfillment, a substantial number fear financial instability and social isolation. Less than 40% feel confident about their preparedness. This shows that the emotional aspect of retirement is not adequately addressed for nurses who have spent decades in demanding roles. The fear of losing workplace social networks, status, and income security shapes their views negatively. The results confirm what Nguyen et al. (2023) described: that positive perception requires adequate preparation, peer support, and mental readiness. Perceptions were mixed, with many expressing financial concerns and emotional uncertainty. Less than 40% feel confident in their preparedness, underlining emotional vulnerability.

**Table 3: Showing the Factors Influencing Retirement Preparedness**

Factor	VH (%)	H (%)	M (%)	L (%)	VL (%)
Financial savings and pension planning	60 (17.3%)	69 (19.9%)	70 (20.2%)	73 (21.1%)	74 (21.4%)
Workplace support/retirement programs	68 (19.7%)	60 (17.3%)	67 (19.4%)	76 (22.0%)	75 (21.7%)
Health conditions and access to healthcare	71 (20.5%)	68 (19.7%)	74 (21.4%)	70 (20.2%)	63 (18.2%)
Family responsibilities and dependents	69 (19.9%)	77 (22.3%)	77 (22.3%)	59 (17.1%)	64 (18.5%)
Investment and alternative income knowledge	66 (19.1%)	64 (18.5%)	76 (22.0%)	55 (15.9%)	85 (24.6%)
Availability of government support	70 (20.2%)	67 (19.4%)	76 (22.0%)	60 (17.3%)	73 (21.1%)
Access to retirement education/counseling	67 (19.4%)	69 (19.9%)	71 (20.5%)	70 (20.2%)	69 (19.9%)
Peer influence/advice from retired colleagues	68 (19.7%)	85 (24.6%)	50 (14.5%)	73 (21.1%)	70 (20.2%)
Cultural/societal expectations	71 (20.5%)	72 (20.8%)	62 (17.9%)	70 (20.2%)	71 (20.5%)
Personal health and fitness	65 (18.8%)	73 (21.1%)	67 (19.4%)	55 (15.9%)	86 (24.9%)

Most factors showed a diverse spread of responses. Financial planning, workplace support, and health status emerged as the most influential factors, while knowledge gaps around investments and physical fitness were noted. Most respondents indicated that financial planning and workplace support are very high or high influences, echoing findings by Okeke et al. (2022). Peer advice and cultural expectations also play key roles, which suggests that interventions must consider social and cultural contexts, not just financial aspects.

**Table 4: Intended Primary Activity After Retirement**

Planned Activity	Frequency (n)	Percentage (%)
Start a personal business	73	21.1
Work part-time	63	18.2
Engage in volunteer work	64	18.5
Spend time with family	73	21.1
Others	73	21.1

Over half of the respondents do not have a clear financial plan for retirement. However, many are considering entrepreneurial, mentoring, and family-focused activities.

**Table 5: Retirement Life Planning (N = 346)**

Question	Yes (%)	No (%)
Clear financial plan for retirement	163 (47.1%)	183 (52.9%)
Considered relocating	176 (50.9%)	170 (49.1%)
Workplace provides retirement guidance	174 (50.3%)	172 (49.7%)
Discussed retirement with family	165 (47.7%)	181 (52.3%)
Plans to pursue further education	156 (45.1%)	190 (54.9%)
Would mentor younger nurses	182 (52.6%)	164 (47.4%)

The table above shows that many nurses plan to start small businesses (21.1%), spend more time with family (21.1%), or engage in volunteer work (18.5%). However, over half do not have a clear, realistic financial plan to make these plans actionable. The fact that about half considered relocating, further education, or mentoring shows that while some view retirement as an opportunity for growth, practical support is lacking. The gap between intention and action demonstrates the need for pre-retirement counseling that includes guidance on small business development, part-time work, and continuing engagement in professional or community roles (Ekpenyong *et al.*, 2023; Omotayo & Abiola, 2021).

### **Hypotheses**

**H<sub>0</sub>:1** There is no significant association between the level of knowledge on retirement and the level of preparedness for retirement among nurses approaching retirement at the University of Ilorin Teaching Hospital.

**H<sub>0</sub>:2.** There is no significant association between Nurses' gender and their perception towards preparedness for retirement at the University of Ilorin Teaching Hospital.

**Table 6: Hypothesis Testing Results**

Hypothesis	Variables Tested	Chi-Square ( $\chi^2$ )	df	p-value	Decision	Interpretation
Ho1	Level of Knowledge vs Preparedness Level	13.284	4	0.010	Reject Ho	Significant association exists between knowledge and preparedness
Ho2	Gender vs Perception of Preparedness	3.215	3	0.360	Fail to Reject Ho	No significant association between gender and perception of preparedness

Table 8 shows the association between the level of knowledge on retirement and the level of preparedness for retirement and also the association between the Nurses' gender and their perception towards preparedness for retirement among nurses approaching retirement at the University of Ilorin Teaching Hospital. Table 8 shows that the Chi-square test for Hypothesis One was significant at  $p < 0.05$ , hence the null hypothesis is rejected. This implies that there is a significant association between knowledge level and preparedness for retirement. For Hypothesis Two, the p-value was greater than 0.05, hence the null hypothesis is accepted. Therefore, there is no significant association between gender and preparedness for retirement.

## DISCUSSION OF FINDINGS

The findings revealed a moderate level of knowledge across most of the assessed areas. A little over half of the respondents (61.8%) indicated awareness of the statutory retirement age for nurses in Nigeria. While this suggests basic familiarity with retirement timelines, the remaining 38.2% who lacked this knowledge point to a significant gap that could hinder timely and effective retirement planning (Kofarmata et al., 2024). Additionally, only 56.6% of the nurses agreed that they understood the importance of financial planning for retirement, leaving approximately 43.4% with limited or no understanding in this critical area. This aligns with previous studies highlighting that financial literacy and planning remain weak points for many Nigerian healthcare workers. Knowledge of the Nigerian Pension Scheme was slightly higher, with 67.9% of nurses reporting that they had sufficient understanding of the system. Although this indicates some exposure to formal retirement structures, a notable 32.1% remained uninformed. Similarly, 58.4% of respondents stated they were aware of the potential healthcare challenges they may face during retirement. Given that health issues often become more pressing with age, the lack of awareness in over 40% of the respondents is worrisome and may contribute to poor health outcomes post-retirement if not addressed (Ujoatuonu et al., 2023). On a more positive note, the highest level of knowledge was recorded in the area of lifestyle changes post-retirement, where 72.3% of nurses indicated an understanding of expected shifts in daily routine, social status, and personal identity (Ghafoori et al., 2021). This suggests a general recognition among nurses that retirement affects more than just income it also impacts

psychological and social aspects of life. Overall, these findings indicate that while there is some degree of awareness among nurses regarding retirement preparedness, many still lack comprehensive knowledge, particularly in areas such as financial planning, pension structure, and health preparedness. These gaps may stem from limited access to pre-retirement education, lack of institutional training, and personal oversight (Inyang et al., 2023). Studies have shown that retirement education plays a vital role in improving workers' readiness and confidence during retirement transitions.

The findings revealed a generally low to moderate level of preparedness among nurses approaching retirement at the University of Ilorin Teaching Hospital. Although a small proportion of respondents indicated that they have started financial savings or have a clear plan for health maintenance, a considerable number either expressed neutrality or disagreed with statements related to financial, emotional, and career-related preparedness. This outcome is consistent with the findings of Adebayo and Adekunle (2022), who reported that retirement preparedness among healthcare workers in Nigeria remains inadequate, largely due to weak institutional structures and limited access to professional retirement counseling. The results also reflect global trends in low- and middle-income countries, where many nurses and other public-sector employees often lack formal plans for post-retirement income or health care due to competing daily financial demands, cultural reliance on extended family support, and insufficient pension systems (Ekpenyong *et al.*, 2023). Studies like that of Nguyen et al. (2023) have emphasized that emotional preparedness is equally important but frequently neglected. The fact that many respondents in this study showed uncertainty about their social and emotional plans for retirement mirrors this gap, suggesting potential risks of loneliness, mental stress, and social isolation during retirement years. Interestingly, although more than half of the respondents possess a Bachelor's degree or higher, only a minority have developed clear retirement strategies. This supports the assertion by Omotayo and Abiola (2021) that educational attainment does not automatically translate to financial literacy or readiness for retirement unless it is complemented by targeted institutional programs and personal initiative. Furthermore, workplace support emerged as a critical factor. Just over half of the respondents had attended retirement planning seminars, indicating that such interventions do exist but may not be widespread or effective enough to reach all employees. This highlights a crucial gap in organizational policy. Studies such as Okeke et al. (2022) and Adelokun et al. (2021) recommend that employers should implement mandatory retirement planning sessions, financial literacy workshops, and personalized pension advisory services to enhance preparedness. Another notable point is that many respondents had not arranged for alternative income sources or health maintenance plans. This resonates with findings by Ekpenyong et al. (2023) that many nurses in Nigeria rely solely on government pensions, which are often delayed or insufficient to meet post-retirement needs. In summary, the findings show that although some nurses take minimal steps toward financial and health preparedness, overall readiness is inadequate, putting many at risk of financial hardship and emotional challenges without stronger workplace education and policies. Retirement perceptions are mixed balancing optimism about rest and fulfillment with fears of financial instability, loneliness, and loss of social connections largely shaped by preparedness, financial security, and social support.

Preparedness was influenced by key factors such as savings, pension planning, workplace support, health status, family responsibilities, financial literacy, and access to retirement education, alongside cultural and peer influences. However, gaps in investment knowledge and institutional support remain significant barriers. Regarding future plans, many nurses intend to start businesses, work part-time, volunteer, or focus on family, but most lack clear financial or practical strategies to achieve these goals. Overall, the study highlights a gap between intentions and actionable planning, emphasizing the need for comprehensive, holistic retirement programs that address financial, emotional, social, and practical readiness.

## CONCLUSION

The study reveals major gaps in retirement knowledge, planning, and support among nurses, leaving many financially unprepared and unaware of post-retirement needs. It emphasizes the need for proactive policies and culturally relevant programs focused on financial literacy, education, emotional readiness, and support systems to improve both retirement outcomes and current job performance.

## Recommendations

Based on the findings, the following recommendations are made:

1. Hospitals should develop mandatory retirement planning workshops for nurses at mid-career and near-retirement stages.
2. Establish accessible pension advisory units within healthcare institutions to guide staff on savings and investment options.
3. Integrate financial management and investment education into professional nursing training and continuous education programs.
4. Support nurses to develop entrepreneurial skills and side businesses before retirement to reduce over-reliance on pensions.
5. Develop peer-support groups and social clubs for retirees to reduce loneliness and promote healthy aging.
6. Nursing associations should collaborate with policymakers to improve pension administration and timely payment of entitlements.

## REFERENCES

- Aboh, I. O., Eze, U. E., & Musa, R. (2021). Educational attainment and retirement preparedness among health workers in Nigeria. *African Journal of Economic Review*, 9(1), 123–135.
- Adebayo, A., & Adekunle, L. (2022). Institutional support and retirement readiness among public health nurses in Southwest Nigeria. *Nigerian Journal of Health and Biomedical Sciences*, 21(2), 45–52.
- Adelakun, A. O., Adeyemi, A. M., & Olaleye, O. A. (2021). Gender distribution and challenges of aging workforce in Nigerian nursing practice. *Journal of Nursing Management*, 29(4), 658–665. <https://doi.org/10.1111/jonm.13231>
- Afolabi, M. O., et al. (2023). *Retirement Planning Among Healthcare Workers in Nigeria: A Review of Trends and Challenges*. *Nigerian Journal of Health Economics*, 12(2), 45-60.

- Ajayi, V. O., & Ojo, O. A. (2020). Influence of retirement preparation on the adjustment of retired nurses in Lagos State, Nigeria. *Journal of Health and Medical Sciences*, 3(1), 10–20.
- Ekpenyong, B., Okon, I., & Udoh, I. (2023). Retirement planning needs of the aging nursing workforce in tertiary health institutions in Nigeria. *International Journal of Nursing Studies*, 135, 104339.
- Ghafoori, E., Mata, F., Borg, K., Smith, L., & Ralston, D. (2021). Retirement confidence: development of an index. *INQUIRY the Journal of Health Care Organization Provision and Financing*, 58.
- Inyang, A. B., & Akpan, A. P. (2023). Retirement Preparedness and Retirement Confidence among Civil Servants in South-South Nigeria. *International Journal of Scientific and Research Publications*, 13(3). <https://doi.org/10.29322/ijsrp.13.03.2023.p13524>
- Ismaila, A.B., (2019), An assessment of Retirement challenges in Nigeria public sectors. *Teras.ng*.<https://teras.ng/api/asset/document/1c061762-da06-411c-a2a3-12a92347babc>
- Kagan, J. (2025). What is retirement planning? steps, stages, and what to consider. *Investopedia*. <https://www.investopedia.com/terms/r/retirement-planning.asp>
- Kofarmata, Y. I., & Adhama, H. D. (2024). Financial literacy, pension awareness and retirement planning in Nigeria. *Cognizance Journal of Multidisciplinary Studies*, 4(2), 377–391. <https://doi.org/10.47760/cognizance.2024.v04i02.031>
- National Education Association. (2020). *Retirement Security Challenges | NEA*. <https://www.nea.org/professional-excellence/student-engagement/tools-tips/retirement-security-challenges>
- Nguyen, T., Jones, A., & Osei, E. (2023). Marital status and retirement well-being: A review of social support dynamics. *BMC Geriatrics*, 23(1), 79. <https://doi.org/10.1186/s12877-023-03894-w>
- Nierobisz, A., Sawchuk, D., Sawchuck, D., & Nierobisz, A. M. (2025). *American Idle: Late-Career Job Loss in a Neoliberal Era*. Rutgers University Press.
- Nigerian Pension Industry Report. 2022.
- Ojo, O. O., & Akinwale, A. T. (2019). Retirement challenges and health status of retired civil servants in Ondo State, Nigeria. *International Journal of Applied Sociology*, 9(1), 15–26.
- Okeke, O., Chukwuma, C., & Iheanacho, T. (2022). The challenges of an aging nursing workforce in Nigeria: Implications for health policy. *Journal of Global Health Reports*, 6, e2022042. <https://doi.org/10.29392/001c.34287>
- Omotayo, A., & Abiola, O. (2021). Awareness and attitude towards retirement planning among healthcare workers in Southwest Nigeria. *African Journal of Social Work*, 11(1), 55–63.
- Oyewole, B. K., & Olaolorunpo, F. O. (2019). Pre-retirement planning among nurses in Southwestern Nigeria: A qualitative study. *African Journal of Nursing and Midwifery*, 2(1), 6–18.
- Ujoatuonu, I. V. N., Ike, O. O., Amazue, L. O., & Kanu, G. C. (2023). Financial Self-Efficacy, Retirement Goal Clarity, and Pre-retirement Anxiety among Nurses in Southeast, Nigeria: The Mediating Role of Job Embeddedness. *Innovation in Aging*. <https://doi.org/10.1093/geroni/igad067>

- Schwab, K. (2025). *Longevity and Retirement in the Intelligent Age: Opening New Horizons in Later Life*. Schwab Academy
- World Health Organization (2021). *Burnout and Retirement: Addressing Health Challenges in Aging Populations*. WHO Press.
- World Health Organization. (2016). Global strategic directions for strengthening nursing and midwifery 2016–2020. [https://www.who.int/hrh/nursing\\_midwifery/global-strategic-midwifery2016-2020.pdf](https://www.who.int/hrh/nursing_midwifery/global-strategic-midwifery2016-2020.pdf).
- World Health Organization. (2020). Social determinants of health. WHO
- World Health Organization. (2022). World Mental Health Report: Transforming Mental Health for All. Available online: <https://apps.who.int/iris/handle/10665/356119>
- World Health Organization: WHO. (2024). Ageing and health. [https://www.who.int/news-room/fact-sheets/detail/ageing-and-health?utm\\_source](https://www.who.int/news-room/fact-sheets/detail/ageing-and-health?utm_source)
- Zewdie, T. H., Letebo, M., & Tsegaye, T. (2020). Gender and retirement security: Evidence from African healthcare workers. *African Journal of Social Work*, 10(1), 44–53.