

Retirement or Semi-Retirement: Implications for Health...Some Food for Thought

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Abstract

Dr. Earl Shive, Professor Emeritus, East Stroudsburg University, reflects on his career as an educator and his experiences with the process of retirement or “semi-retirement.”

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I never really thought about retirement. I loved teaching and the field of education so much I thought I would teach forever. Also, I never thought about the health implications until I prepared this article. So what I thought I would do is take my field of education in general and the field of health education in particular and draw an analogy for what I learned about myself from these fields and how it helped me manage this potentially difficult life situation of retirement. Looking at this introspectively, being involved in the health and substance abuse prevention education fields had a profound positive influence in this critical stage of my life.

Just like a drug dependent (addict) individual who has to take a substance on a regular basis and goes through withdrawal if he abruptly ceases (cold turkey) to take the substance, I could have found myself in that same situation except under different circumstances.

I was an individual who professionally either taught or engaged in programs related to teaching for over forty two and a half years. The classroom had always provided me with an anxiety free moment. I taught a full load at the high school level for eight and a half years. I taught a full load or overload for 34 years at the university level. I taught 9 and sometimes 12 weeks every summer. In addition, I ran hundreds of courses in Emergency Care and CPR at the local, regional, state and national levels. I thrived on teaching. Then, it seemed

like out of the clear blue sky or all of a sudden, I arrived at that stage in life where retirement became at least somewhat of an issue. Now, what do I do? Well, I drew on the knowledge and understanding which I internalized from the very fields in which I believed and was involved for most of my life.

Being involved in substance abuse prevention education, I was initially trained by a Dr. Jerry Edwards, a prevention education specialist, whose philosophy of substance abuse prevention and education provided the foundation which profoundly influenced my life and career. From him I learned the following operational definition of prevention: “Operationally, prevention activities are proactive experiences that increase the capabilities of people to successfully manage potentially difficult life situations.” Of course, the key words are *proactive* and *manage* as opposed to *reactive* and *cope*; the reason being that if you have to react or cope, you already have the problem. Therefore, it is not prevention. Some form of intervention may be needed. I also learned from Dr. Edwards a problem solving model and was trained how to use it. Without going into great detail, the model involves looking at potentially difficult life situations and listing the potential problems those situations can create along with a list of potential solutions and strategies for best being able to manage those problems. The one potentially difficult life situation I used to share with my classes for an example as to how to

practically use this problem solving model was retirement for me. The one thing I emphasized most about retirement was that as much as I taught, I could have a very difficult time unless I really planned for it and not go cold turkey. I also emphasized that if you get a job in life that you enjoy as much as I enjoy teaching, you want to hang on to it as long as possible. Then in the face of various extenuating circumstances, I found myself in a kind of predicament, especially since I never thought of retirement. I reached back to the problem solving model.

What would be some potential problems? What would be some possible solutions to those problems? What would be some specific strategies in dealing with those problems? How would I fill my time? How could I satisfy my continuing thirst for my life long career of teaching? For answers to these questions, I looked to my field of health education to come to my aid. Having taught such a variety of courses and being involved with many community organizations over the years helped

to quiet my concerns. For example, I continue to be involved in Emergency Medical Services, American Red Cross and the American Heart Association and continue to teach emergency care and basic life support (CPR), conduct CPR Instructor Training courses and serve as a member of an education working group for basic life support instruction and director of a Basic Life Support Training Center. I work with developing instructor courses, and programs for quality control of instruction in CPR and Emergency Care. I am reflecting on and writing in the area of what constitutes effective substance use and abuse prevention education. I also get the opportunity from time to time to be a substitute professor in college classes. This helps me stay involved in education and teaching.

All this results in a healthier and more satisfying retirement or at least semi-retirement. I will be forever grateful to the field of Health Education for providing the possibilities for such life fulfilling benefits.

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