Military Healthcare Professionals' Experience of Transitioning into Civilian Employment: A Heuristic Inquiry

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This thesis is submitted in partial fulfilment of the requirements for the degree of Doctor of Philosophy. The candidate has already achieved 180 credits for assessment of taught modules within the blended learning PhD programme

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I declare that this thesis is my own work and has not been submitted for the award of a higher degree elsewhere

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Abstract

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Introduction: The aim of the thesis was to gain greater insight into how military healthcare professionals experience the transition into a civilian work role informed by the author's and other people's experience of transitioning.

Methods: Heuristic Inquiry was selected as an approach because it accounted for the researcher's experience as a veteran to be included in the study as an insider researcher. Both the researcher's diary and participant interviews (n = 10) were subject to thematic analysis. Following a period of reflection and illumination, a final creative synthesis of the researcher's understanding of the experience of transition from a military to a civilian work role was constructed.

Findings: The themes were about the tipping point for leaving, adjustment to a new role and progression in the new place of work. The process of transition was challenging, involving a triple whammy of uncertainty about leaving, insecurity in a new job and change of identity. Most people had adjusted to this and identified a niche for themselves in which they had the potential to flourish.

Discussion: Veterans who had served a long career experienced a divergence of values and skills away from the needs of the military service leading to a tipping point for leaving. The triple whammy may be a risk factor for increased mental distress within the Transtheoretical Model when applied to a midlife career change.

Conclusion: Healthcare professionals are recommended to prioritise obtaining civilian qualifications and work experience during their military careers. The UK armed forces might reduce attrition by focussing upon potential leavers who felt their qualifications or skills were not sufficiently valued. Veterans affinity for teamwork could be fostered within civilian organisations in order to support a shift towards new organisational goals, identity and values.

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1 Introduction

1.1 Introduction

I am a mental health nurse and a veteran of the UK armed forces. When military personnel join the navy, army or air force, they internalise values and adopt a lifestyle, and I was no different. In common with many of my peers, I found myself to be a good fit for the military and thrived. Little thought was given to life after the armed forces as the focus was upon meeting my military career milestones, being a good team player, and serving my country. Nevertheless, leaving the military and becoming a veteran is an inescapable part of the career journey for all service personnel. Due to the physical demands of military work, this cannot happen at the national retirement age, which means that a midlife career change is inevitable.

In my last few years of service, I noticed a shift in my values, my dedication to the military, and the importance upon military career courses versus civilian qualifications. Gradual at first, eventually it reached the point of no return, and I followed the same path as all those who served before me and left the military for civilian employment. I have previously written an autoethnography about my experience as a mental health nurse in a combat zone, which attuned me to the idea that research can be centred around the researcher's personal experience (Whybrow, 2013). Leaving the forces was a big deal for me. Most people join the forces with far fewer commitments than when they leave, and I was no different. I was a sailor, nurse, academic, father, husband, and main breadwinner, which meant that I was responsible for a decision that would affect not only my life but also every other member of my family. I felt scared and anxious, yet hopeful for the future. I saw myself as responsible for making this career change work. I wanted to capture the experience, to learn from it and to share my knowledge with others.

I began this PhD in organisational health and wellbeing in 2012, which was before I decided to leave the armed forces. I self-funded my studies by making use of a universal credit within the armed forces, that is available to all military personnel for up to three years, and then

self-funded for the remainder of my studies. My motivation for this further academic study was threefold. Firstly, my previous academic study had led to personal growth and career development. Therefore, I hoped that further academic study would be equally as rewarding. Secondly, I was interested in research and wanted to learn more about how to apply research within my professional role. Finally, my military role was focussed upon promoting health, and I considered that the taught component to the PhD programme would improve my knowledge about organisational health and wellbeing. My decision to leave the military coincided with the stage within my PhD programme where it changed from taught courses to a research phase. This thesis captures my journey and that of some of my peers and what I think it meant to us to leave the military healthcare services and to forge civilian careers. Because I am an insider researcher simultaneously living and reflecting upon this experience of career transition, this thesis offers a unique perspective that would otherwise be difficult to capture.

1.2 Background

A veteran in the United Kingdom can be defined as somebody who has served for a minimum of one day in the armed forces (Burdett et al., 2012). However, not all countries define veterans using the same parameters and definitions range from completing basic training to completing a combat tour (Dandeker, Wessely, Iversen, & Ross, 2006). Dandeker et al (2006) suggest the advantage to the UK position may be that it is inclusive and clear-cut. Interestingly, not all service leavers may identify with the term veteran, even after deploying on combat operations or a significant length of service (Burdett et al., 2012). This would suggest that the term veteran might have different meanings for different groups. I hold a neutral view about the term, and within this thesis, either service leaver or veteran shall be used interchangeably to define an individual who has left employment with the armed forces.

Iversen et al. (2005) reported ~18000 service leavers in 2005 and suggested that most go on to integrate successfully into civilian communities. By comparison, ~15000 people left in 2019 and ~13000 to ~23000 in the interim years (Defence Statistics (Tri-Service), 2012,

2013, 2014, 2016, 2017a, 2017b). While the total number of service leavers may fluctuate year on year, it remains clear that a relatively large group of people will leave and become veterans each year. These new service leavers then join the two and a half million working-age veterans within the United Kingdom, a total figure that has remained constant over the past decade (Defence Statistics Health, 2017; Woodhead et al., 2009).

The minimum length of service in the armed forces is typically three to four years depending upon the job role (Forces Watch, 2011). Early service leavers can be defined as personnel who leave the armed forces before completing their contractually agreed minimum length of service (Buckman et al., 2013). Rather than being due to operational tours, leaving the military as an early service leaver may be associated with younger age, gender, low rank, and coming from pre-existing disadvantaged backgrounds (Buckman et al., 2013). By comparison, the time required by a service leaver to more fully internalise a military work identity has previously been estimated as completing their initial minimum length of service (Bergman, Burdett, & Greenberg, 2014) and also as serving greater than 10 years (Walker, 2013). It is this latter group that form the focus of this thesis because both the other participants and I served greater than 12 years in the military before undertaking a midlife career change.

To better understand the concept of a midlife career change, it may be helpful to consider what is meant by work and career. Work is one role that people perform during their lifespan, along with others such as student, citizen, spouse, homemaker, and parent that are performed concurrently and in different spaces or theatres, for example, home, work, community or leisure (Super, 1980). It could be argued that work is a central component to life that can influence social-economic status, identity, and engagement with communities or wider society across the lifespan (Vondracek, 1998). Work can be defined as those manual or intellectual activities that people engage in to earn money (Ivanovic & Collin, 2006). A job involves work that is related to a person's occupation or role and forms the basis of their employment (Statt & Statt, 1999). A career can be defined as the work that a person is trained to carry out and then aims to be employed in throughout their working life (Ivanovic & Collin,

2006). Traditionally, a career would involve a single occupation, such as teacher or driver, but there has been a shift in modern society towards a career that can include multiple occupations (Torrington, Hall, Atkinson, & Taylor, 2017). This may represent a change from more traditional linear careers within one organisation to a career pathway that can involve increased job mobility and moves across multiple organisations and different job roles (Lyons, Linda, & Ng, 2015).

In addition to a shift towards a career pathway with increased job mobility, the structure of employment may also have become more flexible. Job flexibility might include job sharing, part-time work, condensed hours or zero-hours contracts (Torrington et al., 2017). From a feminist perspective, gender inequality may arise when there are organisational barriers to maintaining meaningful employment and participating fully in family life (Schultz, 2010). Job flexibility may represent an opportunity to reduce these barriers, although this may remain an aspiration as opposed to reality for many organisations (Torrington et al., 2017). While job flexibility has the potential to enrich an employee's work-life balance or quality of life (Bulger & Fisher, 2012), some forms of flexible working are more advantageous to the employer than the employee (Statt & Statt, 1999). Zero-hours contracts are one such example where the employee is obliged to remain available but may not be asked to work and hence may not receive any payment. Finally, some organisations may be less suited to flexible working practices compared to a traditional organisational employment structure (Bulger & Fisher, 2012). On balance, in my experience, the armed forces are one example of a traditional organisational employment structure and reflect a masculinised, linear, single organisation career pathway with limited scope for flexible employment structures. This means that veterans are potentially making a midlife career change into a different type of organisational structure and career pathway than they would have experienced within the armed forces.

A general definition of career change is shifting into a different type of job with different skill sets, practices and routines (Barclay, Stoltz, & Chung, 2011). Walker (2013) suggests that people reaching the end of their military service remain relatively young and will

need to seek out a second career in midlife to remain financially solvent. Although most UK veterans gain employment, it is unclear whether they are working in a similar form of civilian employment to that of their previous military role (Iversen et al., 2005). This thesis focusses upon military healthcare professionals who seem likely to seek out similar civilian employment. However, military service itself could be considered a unique form of employment in which personnel are integrated into a distinct cultural group that has different skills, practices, and routines to civilian work roles, for example, saluting, weapons training, clothing, and the military hierarchy (Bergman et al., 2014). While military healthcare professionals have unique characteristics that distinguish them from other military personnel (see pages 8 and 10), they remain part of a broader military culture and identity. In addition, leaving the military leads to recognition as a veteran which also implies that service in the armed forces is a unique type of employment from which people will need to adjust and to adapt to new civilian work environments. This concept is supported by Barclay et al. (2011), who describe midlife career changers as needing to redefine their work identity in relation to a new work role. Therefore, midlife career change within this thesis means moving from military to civilian employment that may or may not involve similar skills but does represent a shift to a non-military culture, environment, and organisational structure.

Career change also occurs within the context of a working life or lifespan that might include a series of phases such as: acquiring relevant work skills and exploring job opportunities; establishing and maintaining work roles including preparing for and managing job changes; and transition from work to retirement or some form of bridging employment prior to retirement (Lent & Brown, 2013). It has been suggested that age ranges might be associated with these phases, with ages 25-44 years quoted as the career establishment phase, ages 45-65 years the maintenance phase, and ages 65 years or older the decline/disengagement phase (Katz, Rudolph, & Zacher, 2019). However, it may be that such career phases do not always match these age ranges, for example, people might embark upon training for new careers in later years (Feldman, 2007). Work roles can also increase or decrease in their importance, that is, the

amount of time and emotional commitment to that work role can change. This may depend upon factors such as shifting commitment to other roles, available opportunities for promotion or further personal development (Super, 1980). A meta-analysis of age and career commitment identified that career commitment and engagement increases over the lifespan but then plateaus or declines in later years (Katz et al., 2019).

The concept of a positive relationship between increasing career commitment and more years of work experience is relevant to veterans because military careers tend to end in the early forties. Arguably, this is well before any potential decline in commitment but at a period within the lifespan when people may transition from career establishment to a career maintenance phase (Katz et al., 2019). This career change is because a military contract typically lasts between 18-22 years with the option to leave with a half pension available to many veterans after 12 years' service. Dependent upon the needs of the service and medical fitness, it is sometimes possible to extend a military contract in small increments of one, two or five years. Other points where a service person can voluntarily leave the armed forces are within the first three to six months but, following this period, personnel must then serve a minimum employment contract length of three to four years, after which they are free to leave voluntarily at any point up to completion of their contract subject to a 12 month notice period (Forces Watch, 2011). In addition, personnel might be discharged by the service for temperamental unsuitability early in their career or on medical or disciplinary grounds at any point within their military contract. Upon completion of a military contract, or voluntary discharge, military personnel remain subject to mandatory reactivation for up to six years (MOD, 2014). This is different from becoming a reservist, which is a voluntary commitment to join a different part of the armed forces.

This thesis focusses upon veterans who served long careers and would have been required to either provide 12 months' notice to leave before the end of their military contract or to have completed their full military contract. As previously stated, this is a group who are likely to have fully internalised a military work identity prior to leaving (Walker, 2013). Consistent

with Katz et al.'s (2019) findings about career commitment in the previous paragraph, they seem likely to have been committed to their military career but are leaving the forces to establish new careers at a point in the lifespan when other workers may typically shift from a career establishment to a career maintenance phase. This seems to represent a period of increased instability or insecurity that resonates with my personal experience as a service person who was leaving the armed forces at this precise moment in their military career and therefore was in a unique position to learn more about the experience of midlife career transition from the perspective of an insider researcher.

Military service encourages selfless commitment and loyalty to the organisation (Director General Leadership, 2014), which means that it has the feel of permanent employment and it continues for an extended period of time, for example, a full contract is 18-22 years in duration. While such job permanency may be uncommon in the civilian labour market as multiple job changes over shorter periods of time are the norm (Macaulay, 2003). When civilians are able to remain in the same employment, they often choose to do so for greater stability and financial security during their working lives (Howes & Goodman-Delahunty, 2015). Similar to other uniformed services, military personnel are generally not afforded this option beyond the age of 55, and most initial contracts end when people are in their forties. This means that military employment holds the illusion of a long-term career and stability with the same employer across the lifespan but, in reality, employability within the military typically ends mid-career necessitating a midlife career change.

Employability is about the ability to sustain a job and also the ability to find new work (Fabio, 2017). It represents a shift from the concept of remaining in the same job for life towards the individual having the resources to be employable throughout their lifetime (Duarte, Silva, & Paixao, 2017). As previously suggested, military employment may be viewed as a highly masculinised, linear, single organisation career pathway with limited scope for flexible employment structures. By comparison, civilian employment can involve increased job mobility and moves across multiple organisations and different job roles (Lyons et al., 2015).

Military personnel are destined for a midlife career change but, due to extended employment with a single employer, may be more focused upon the job establishment and maintenance aspect to a career within the armed forces and less focused upon preparedness for a midlife career change. As a result, at the point of transition from military to civilian employment, they may, initially, feel less well-resourced to maintain employability throughout their lifetime.

The UK armed forces consist of several different branches and job roles. One support function is the provision of a comprehensive medical service tasked with optimising the health of individuals and maximising the number of personnel fit for combat or other duties anywhere in the world (MOD, 2019). This service consists of a range of professionals from traditional roles such as doctors, nurses, radiographers, and physiotherapists, but also combat medical technicians/medical assistants (CMT/MA) which is a military-specific role. Those employed in traditional roles such as nursing will hold civilian qualifications and registrations, whereas the CMT/MA role does not always lead to transferable qualifications. In the UK, the medical service has a mixture of civilian and uniformed staff, such as nurses and doctors, who perform a similar core clinical function, except uniformed healthcare professionals deploy on combat operations, abide by military law, and can be geographically relocated or drafted. By comparison, civilians are not subject to these additional commitments. This means that military healthcare professionals, do not work in isolation from civilians, sometimes benefit from civilian training opportunities and many hold transferable qualifications that may be desirable in the civilian labour market. This is especially relevant as, given the shortage of personnel within the National Health Service, transferable qualifications may enhance their longer-term employability (The King's Fund, 2018). However, all military healthcare professionals remain members of the armed forces, obey military rules, commit to the needs of the service, and identify with the norms and practices of this distinct cultural group, for example, saluting, military uniform, and military discipline.

There are approximately 7500 serving healthcare professionals providing healthcare services to 147030 UK regular forces, which means that healthcare professionals represent 5%

of the current armed forces. (MOD, 2018). As previously stated, there are estimated to be approximately two and a half million working-age veterans within the United Kingdom (Defence Statistics Health, 2017; Woodhead et al., 2009). If 5% of these are healthcare professionals, then there are approximately 125000 working-age veterans who served as healthcare professionals. As one of these veterans, I previously served within the Defence Medical Services as both a Royal Navy medical assistant and later a Queen Alexandra's Royal Naval Nursing Service (QARNNS) mental health nurse. My membership of the armed forces, my role as a military nurse, and my status as a veteran form part of my identity.

Identity can be defined as a personal construct about the meaning or perception that people hold of themselves and others (Bernstein, Penner, Clarke-Stewart, & Roy, 2011). Identity can also be defined as a social construct that helps us to identify with others and to feel that we belong (Bernstein et al., 2011; Burke, 2009). However, making distinctions between the identity of one group and another can also lead to rivalry, prejudice, and conflict (Bernstein et al., 2011). People can identify with specific roles and are socialised into the cultural norms and values of that role identity, which can impact positively upon self-esteem as people then feel valued, competent, and fulfilled (Burke, 2009). Identity is typically perceived in relation to others and this social identity for each person can be found at the middle ground between personal (micro) and organisational or group identity (macro) (Simon, 2004). Finally, a person might be a composite of several identities that change with circumstances, situations, and across the lifespan. Therefore, different facets of identity such as personal, role or group, for example, being a veteran, healthcare professional, husband or father, may come to the fore dependent upon the situation (Burke, 2009).

Reinventive institutions are organisations or groups where an individual has the opportunity to take on new roles, experience a change of status and to construct a new social identity (Scott, 2015). Scott (2015) goes on to suggest that the military is one example of a reinventive institution that fosters group identity and that this includes institution-specific cultural norms and values. A professional identity involves the acquisition of skills or

knowledge and the adoption of the norms and values associated with that profession (Caza & Creary, 2016). It can be operationalised in the way we explain and perform our occupational roles to others and how we see ourselves within those roles (Neary, 2014). As military service involves socialisation to a distinct and unique cultural group that has different skills, knowledge, practices, and routines to civilian work roles, for example, saluting, warfighting, military hierarchy etc. (Bergman et al., 2014), it is perhaps understandable that the military can be viewed as a profession in its own right (Allen, 2011). It, therefore, seems likely that membership of an institution like the military contributes to identity as a whole and professional identity specifically. However, modern professional identity may be a flexible, amalgamation of a variety of work-based roles (Caza & Creary, 2016). Therefore, a military identity may only be one part of a professional identity, as many military healthcare professionals also hold a professional identity and legal status specific to their area of expertise, for example, a nursing registration.

Healthcare professionals are unusual in that they are uniformed non-combatants that serve alongside regular forces. Their uniqueness as a group has been recognised within a previous study that highlighted the potential difference in help-seeking behaviours compared to other veterans (Jones, Whybrow, & Coetzee, 2018). Further evidence that this is a distinct group is that many, but not all, healthcare professionals possess graduate-level qualifications as a requirement of their military role yet may be junior in military rank during their career. By comparison, within the wider military, graduate-level qualifications traditionally lead to military personnel seeking employment as commissioned officers. The reason for this difference with healthcare professionals may be due to a shift within civilian healthcare towards enhanced roles and associated civilian qualifications that are no longer a natural fit for traditional military hierarchies. Thus, characteristics such as non-combatant status and qualifications would suggest that military healthcare professionals are a unique group within the armed forces.

Veterans exiting the military following a longer period of service, who are arguably better adapted to military life, are reported to fare better than early service leavers (Bergman et al., 2014). However, not all service leavers experience a smooth transition, with those leaving the military more prone to mental health problems than those currently serving (Hatch et al., 2013). Mental distress in veterans may be associated with lower levels of education and reduced employment prospects (Horton et al., 2013). Interestingly, those who maintain a strong link with veterans' associations may experience a more problematic transition with reduced social integration within their civilian communities (Hatch et al., 2013). In addition, those leaving the service following a longer career may hold an idealised view about the value of their previous military work experience and a naive view of civilian work (Walker, 2013). Finally, military personnel are encouraged to hold values that include placing the needs of the military first by viewing their role as a service as opposed to a job (Director General Leadership, 2014). All this is indicative of a period of adjustment that may be turbulent at times but may need to be effectively navigated as a veteran. There is a universal resettlement service, designed to help with this transition process, that is available to personnel who have completed at least six months service and includes career counselling, training, and financial advice about pensions (MOD, 2014). While it is reported that most veterans view this service favourably (Defence Statistics Health, 2014), it remains unclear how service leavers from specialist areas, such as healthcare, experience adjustment during career transition or how they view the resettlement process.

The research design that will be introduced later in this thesis is Heuristic Inquiry which is an approach that calls for the researcher to hold a shared experience with the other participants (Moustakas, 1990). As a fellow veteran and healthcare professional, I identify with this group in a way that I do not with other parts of the armed forces. By comparison, I have never served on a submarine, rarely went to sea, and was attached to land-based combat operations as part of a separate but embedded entity called a field mental health team. My strongest connection is with the medical service, of which I formed a part. As with other parts of the forces, healthcare

professionals also transition into civilian life and achieve veteran status. Given that there is limited research about service leavers' transition to civilian employment in general, and no previous research has specifically explored the experience of the ~125000 veterans who served as UK military healthcare professionals. It could be argued that this thesis is likely to contribute to the general melee of knowledge about veterans' experience of career transition but also to provide greater insight into the experiences of healthcare professionals, a specific and unique group whose voices may otherwise go unheard.

Veterans in general, and healthcare veterans specifically, are a geographically disparate group who are difficult to identify and hard to reach as civilians. As a recent veteran and a fellow healthcare professional, I was able to access this group via social media networks. This afforded me an opportunity, as an insider researcher, to learn about midlife career change that was informed by both my personal experience and what I learnt from interviews with other veterans. This study is important because little is known about midlife career change for military healthcare personnel. This means that current knowledge about why military personnel leave the forces, as well as existing organisational and personal strategies for managing the transition process, may not fully account for their experience. This thesis will offer insight into healthcare professionals' experience of career transition, how they approached departure from the forces, and how organisations might support their integration into civilian workplaces.

1.3 Study Aim and Research Question

In the previous section, it was argued that military healthcare professionals are a unique group of non-combatants who can be highly qualified compared to their military rank. Given that there is limited previous research into their experiences, the aim is to gain greater insight into how military healthcare professionals experience the transition into a civilian work role. Because I am also a veteran and a healthcare professional, who has recently experienced a midlife career transition from the armed forces, I have adopted the position of an insider researcher. Therefore, the research question is: What do I understand about the experiences of

self and other military healthcare professionals' midlife career transition to civilian employment?

1.4 Research Objectives

The objectives are:

- 1. To identify themes from the researcher's own experience of transition from military to civilian employment.
- To explore these themes in relation to other veterans' experience of transition from military to civilian employment.
- 3. To present the data from self and others' experiences of transition from military to civilian employment within a creative synthesis that represents key aspects of the phenomenon.
- 4. To make recommendations for future research and workplace strategies to promote successful career transition for veterans.

1.5 Thesis Chapters

This thesis is divided into six chapters, including the above introduction. Chapter 2 is a literature review. The literature review aims to identify what is already known about how armed forces personnel experience the transition from military to civilian employment. The key themes are: the value of military experience; successful career transition; the difference between military and civilian employment; identity as a veteran. The chapter also includes a discussion of the Transtheoretical Model, which is the theoretical framework that underpins the thesis.

Chapter 3 is a research methods chapter that describes the research approach, the specific research methods, and the ethical considerations that are taken into account within this thesis. Heuristic Inquiry is the methodology identified to answer the research question, which focusses upon what I understand about the experiences of self and other military healthcare professionals' midlife career transition to civilian employment. This methodology was chosen because it accounts for the researcher's experience to be included in the study as an insider

researcher in addition to the other participants. This is important because the researcher is also a veteran who has transitioned to a civilian career.

Chapter 4 presents the findings from this Heuristic Inquiry. It starts with a depiction of other veterans and my experience shaped by the following themes: the value of military experience; successful career transition; the difference between military and civilian employment; identity as a veteran. A final creative synthesis of the information gathered about the transition to civilian employment reworks the experience of both the participants and myself into new themes about the tipping point for leaving, adjustment to a new role and progression in the new place of work.

Chapter 5 is a discussion chapter that aims to interpret the research findings. In order to achieve this aim, the findings are discussed in relation to the research question, previous research, and the theoretical framework before outlining the contribution to knowledge about career transition for veterans. Finally, the strengths and limitations of the research design are examined.

Chapter 6 concludes the thesis by drawing together key points from all the previous chapters. In addition, recommendations for the practical application of the findings and further research are outlined. These recommendations are aimed at individual military personnel and the organisations they are leaving or choosing to join. The thesis ends with a personal reflection about what I have learnt from carrying out this study as both a veteran and a researcher.

2 Literature Review and Theoretical Framework

2.1 Introduction

The aim of the following chapter is to consider the available evidence about military personnel's experience of civilian employment and a theoretical framework for a midlife career change. To achieve this aim, this chapter begins with a literature review about how armed forces personnel experience the transition from military to civilian employment. This is followed by an exploration of a theoretical framework that might provide insight into veterans' experiences of a midlife career transition from military to civilian workplaces.

2.2 Literature Review: Transition to Civilian Employment

In order to place the current research project into context, a narrative review of both quantitative and qualitative research was carried out (Polit & Beck, 2012). While this type of review can promote understanding about a topic (Bryman, 2012), a criticism of traditional narrative reviews is a lack of transparency when identifying relevant papers (Littell, Corcoran, & Pillai, 2008). To mitigate this risk, the search strategy is described in detail, followed by an appraisal of the quality of the included papers and, finally, the findings are presented within themes that emerged from the literature.

2.2.1 Search strategy

CINAHL, ProQuest Business, Scopus and Web of Science electronic databases were searched using the following Boolean operators and search terms: (veteran* OR service leaver*) AND (work OR job OR employ* OR career* OR reitir* OR transition*). The search was carried out up to November 2018, and there was no limit to the age of the studies. A military database of papers published by the King's Centre for Military Health Research and the reference lists of included papers were manually searched. Studies were included if the population was fulltime regular military veterans with a focus upon civilian employment. This was to increase the transferability of the findings to the current study which focussed upon a

full-time regular military population who had transitioned to civilian employment. Therefore, studies were excluded if the participants were primarily reservists, homeless or conscripts; there was no focus upon employment; the emphasis was upon mental ill health, physical illness or disability benefits; the study was testing out an intervention.

A flow diagram representing the process for identifying studies is in Fig 2.1. The flow diagram follows the PRISMA recommended structure for transparent reporting of the review process (Liberati et al., 2009). In total, 9061 papers were identified in the initial database trawl. Following removal of duplicates and a review of titles and abstracts, this was reduced to 114 studies. In-depth reading resulted in 91 of these articles being excluded because they did not meet the inclusion/exclusion criteria. In total, 23 studies were included in this review (Table 2.1). Of these, 11 applied quantitative research approaches which were predominately cohort studies using self-report measures repeated at different periods in time or cross-sectional studies that gathered data on one occasion. The remaining 12 studies adopted a qualitative approach that included general descriptive qualitative research, narrative research, and phenomenology, all of which involved in-depth interviews with service leavers. No studies applied Heuristic Inquiry which is the research methodology that informs this thesis.

Qualitative research methodologies aim to explore the meaning or in-depth experience of a phenomenon resulting in a less reductionist and more inductive process of inquiry that offers insight but not generalisability (Creswell, 2014). By comparison, quantitative research is focussed upon observing and measuring the relationship between predetermined variables (Creswell, 2014). This means that this review has identified a balance between quantitative research methodologies designed to measure the extent of a problem and those gathering rich data about the experience of civilian employment. No paper focused solely upon UK healthcare professionals which would indicate a potential gap in knowledge.

2.2.2 Quality appraisal

This review aimed to find out what is known about how armed forces personnel experience the transition from military to civilian employment. Consistent with the review aim,

methodological rigour was not an exclusion criterion. However, because quality appraisal can help understand how meaningfully the research findings are meeting the aim of the review (Petticrew & Roberts, 2006), the quality of the included studies was assessed with the aid of the Joanna Briggs Institute (JBI) critical appraisal tools for cross-sectional studies, quasi-experimental studies, cohort studies, and qualitative research (JBI, 2016a, 2016b, 2016c, 2016d). The studies were graded for the percentage of JBI criterion that they met and, for each study, the specific JBI appraisal tool and quality grading are presented in Table 2.2. Overall, the studies included most of the criterion relevant to their stated methodological approach and could, therefore, be graded as moderate to good quality.

Figure 2.1 Study Selection Flow Diagram

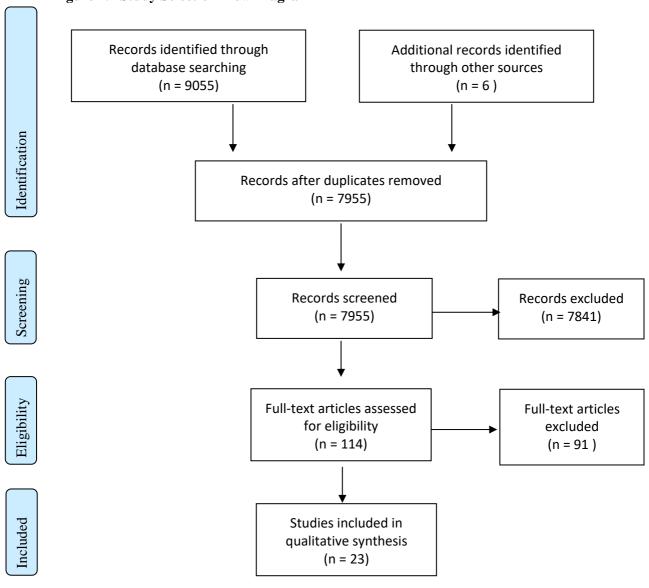


Table 2.1 Included Studies

Authors	Year	Country	Participants	n	Methodology	Focus	Findings
Mangum & Ball	1989	USA	General veterans	1697	Cohort	The relationship between in-service military training and post-service work experience	Skills transfer occurred for 47% of veterans and 50% of civilians; Amongst veterans, it was beneficial to have worked in a trade rather than combat branch of the military
Spiegel & Shultz	2003	USA	Naval officers	1015	Cohort	The association between pre-retirement planning and job role with retirement satisfaction and adjustment	Level of life satisfaction and adjustment to civilian life were associated with preparedness and skills transferability
Baruch & Quick	2007	USA	Naval officers	334	Cross- sectional	The transition from stable military to dynamic civilian workplaces	Those who focused upon feeling personally fulfilled or self-actualisation reported greater civilian career satisfaction and quality of life; They were also more satisfied with their career transition
Vigoda-Gadot, Baruch, & Grimland	2010	Israel	Senior officers	202	Cross- sectional	The antecedents for a successful career transition	Making preparations for retirement, social capital, view on organisational dynamics and work-family conflict may impact upon a service leaver's transition
Brock, Wick, Evans, & Gianola	2011	USA	Physician's assistants	412	Cross- sectional	Veterans' attitudes about the physician's assistant profession	Patients and colleagues valued their military background; They perceived their strengths as being able to manage stressful situations, work in teams and leadership
Zinn	2011	UK	General veterans	14	Narrative research	The impact of military culture upon an understanding of life course	Veterans adjust from a supportive environment of certainty and stability to a civilian environment that is less clear and leads to increased uncertainty
Walker	2013	UK	Army	28	Descriptive qualitative	Experience of leaving the army	It is difficult to project into a civilian other from the position of significant military employment experience; Veterans risked being ill-prepared because they held naive views about civilian employment
Baert & Balcaen	2013	Belgium	Job vacancies	348	Experiment	To find out if there was a bias towards or against selecting veterans for an interview for civilian jobs.	Overall there was no difference between the treatment of military and civilian job applications with regards to call back for the first interview
Herman & Yarwood	2014	UK	General veterans	27	Descriptive qualitative	Experience of post-military identity	The main themes were a feeling of loss, letting go and seeking out continuity between military and civilian identity
Burkhart & Hogan	2015	USA	Female veterans	20	Grounded theory	Experience of transitioning into and then out of the military	There was a period of adjustment where participants felt that they had different values to civilians and maintained a sense of separateness by identifying with other veterans
McAllister, Mackey, Hackney, & Perrewé	2015	USA	General veterans	251	Cross- sectional	Conflict between civilian and military work identities	Higher rank moderated the impact of conflicting identities; Political skill also moderated this conflict but more so for officers than lower ranks
McDermott, Boyd, & Weaver	2015	USA	Franchisees	1280	Cross- sectional	Veterans' satisfaction at owning a franchise compared to civilians	No difference between military and other franchisees in overall satisfaction which combined life satisfaction, career satisfaction and job satisfaction
Bennett, Wellman, & Mahmood	2015	USA	Pharmacists	276	Cross- sectional	To explore factors related to military pharmacists as they transition to civilian employment	Most found career transition as expected or easier than predicted; Those who went into similar civilian clinical roles found the transition easier;

							Those who found transition more difficult reported greater links or connection to the military
Maharajan & Krishnaveni	2016	India	Air force	400	Cross- sectional	Resettlement needs when transitioning to civilian life	Getting a job was ranked as the second most important socio-economic need after children's education and before finding a house
Schulker	2016	USA	General veterans	923507	Cross- sectional	The types of occupations where veterans gain employment	Veterans were overrepresented in roles such as protective services, maintenance, transportation, engineering, computing, production compared to civilians; Veterans were underrepresented in roles such as healthcare, arts, legal and office work
Suzuki & Kawakami	2016	USA	General veterans	11	Grounded theory	Experience of transition to civilian life	Internal aspects to military life that were maintained after leaving included: Action, discipline, leadership, structure, and respect for authority; Civilian life felt more individualistic, and there was less emphasis upon teamwork
Beech, Gold, & Beech	2017	UK	Infantry	5	Descriptive qualitative	To examine how veterans use narrative to form personal and social identities	Difference between the experience of teamwork and leadership in the military to civilian life; Difference between military skill set and a civilian role which resulted in a perception that skills were underused
Chargualaf, Elliott, & Patterson	2017	USA	Female nurse academics	13	Descriptive qualitative	Experience of work transition	Military values generated conflict amongst other faculty members; Limited interest in military experience by civilian peers; Expected to fit into norms of a new culture; It was difficult to explain military skillset to a civilian employer
Dirani	2017	USA	General veterans	10	Descriptive qualitative	The challenges veterans experience through the process of transfer of training from the military to civilian workplaces	Knowledge transfer involved: Personal capacity which was about identity, perceptions, reflection and resistance to change; Unlearning old processes and adopting new ones; Shifting values about work from 24/7 commitment to 7/24
Elliott, Chargualaf, & Patterson	2017	USA	Nursing	10	Descriptive qualitative	The transition from military to civilian nursing	Separation began when decided to leave forces; Civilian role was more different than had previously anticipated; Military nursing experience not understood or valued; Shift in identity as adjusted to a new role as a civilian nurse and let go of previous military culture
Binks & Cambridge	2018	UK	General veterans	7	Interpretative Phenomenolo gical Analysis	The effect of transition from military to civilian life upon identity	Some support staff had a transferable skill set which resulted in a smoother transition, possibly because the bond to the military identity seemed weaker, for example, nurses
Edelmann	2018	UK	General veterans	28	Descriptive qualitative	Why some service leavers do well and others do not	No difficulties with practicalities of new employment or with skills transfer; Veterans felt that they worked harder to achieve deadlines and were more committed; Veterans felt they were more team-orientated whereas civilians did not value collaboration towards a common team goal as highly; Distrust of civilians due to more demarcated boundaries between work and personal life compared to service personnel
Chargualaf, Elliott, & Patterson	2018	USA	Female nurse academics	13	Descriptive qualitative	Experience of work transition of veterans who became nurse academics	There was a period of adjustment that was difficult; Military leadership skills seemed useful for university leadership roles

The qualitative studies adopted a purposive sampling approach, which means that they sought out participants who were both likely to have experienced the phenomenon of interest and mirrored the features that may be found in a wider group of people (Lewis & Ritchie, 2003). This seemed consistent with the aim of sampling in qualitative research, which is to access people with experience of the phenomenon (Polit & Beck, 2012). While qualitative research cannot claim generalisability of its findings to a wider population; the findings can result in a case by case level of transferability to people with similar characteristics and the development of a theory about a wider population (Bryman, 2012). However, only one qualitative study reported why they stopped sampling, explaining that they had reached data saturation (Elliott, Chargualaf, & Patterson, 2017). Data saturation can be defined as the point when interviewing further participants no longer leads to new data (Creswell, 2014). There are other reasons to cease sampling, such as the depth of the data analysis from each interview and the resource or cost implications (Ritchie, Lewis, & Elam, 2003). Understanding the rationale for stopping sampling would have improved the transparency of the sampling methods. This would have increased confidence in the thoroughness of the sampling strategy and the transferability of the findings (Polit & Beck, 2012).

The quantitative studies used non-probability sampling methods which means that they did not randomly select participants (Bryman, 2012). This impacts upon their claim to represent a wider population because it is not possible to be as confident that all relevant population characteristics had a chance of being represented in the sample (Polit & Beck, 2012). However, all studies identified a sample frame that appeared to reflect participant characteristics relevant to the population of interest. The response rates varied across the studies, and lower response rates could increase the bias evident within the sampling strategy as it is more difficult to claim that the participants represent a wider population (Bryman, 2012). A high response rate would have been greater than 70% (Greenhalgh, 2010), and only two studies included within this review reported a high response rate (Maharajan & Krishnaveni, 2016; Mangum & Ball, 1989). This brings into question how representative the results were of the whole target population as

it is hard to understand who and why people opted not to participate (McCluskey, Burton, & Main, 2006). Overall, sampling bias may be inevitable within quantitative research with researchers aiming to develop strategies to minimise the impact (Bryman, 2012). The included papers have been transparent in their mechanisms for managing bias, but there remain limitations to any claims for generalisability of the findings to wider veteran populations.

Table 2.2 Quality Appraisal

Authors	Year	Methodology	JBI Appraisal Tool	Grading (%)*
Mangum & Ball	1989	Cohort	Cohort	64
Spiegel & Shultz	2003	Cohort	Cohort	67
Baruch & Quick	2007	Cross-sectional	Cross-sectional	75
Vigoda-Gadot, Baruch, &	2010	Cross-sectional	Cross-sectional	100
Grimland				
Brock, Wick, Evans, & Gianola	2011	Cross-sectional	Cross-sectional	63
Zinn	2011	Narrative research	Qualitative	60
Walker	2013	Descriptive qualitative	Qualitative	70
Baert & Balcaen	2013	Experiment	Quasi Experimental	100
Herman & Yarwood	2014	Descriptive qualitative	Qualitative	40
Burkhart & Hogan	2015	Grounded theory	Qualitative	80
McAllister, Mackey, Hackney, &	2015	Cross-sectional	Cross-sectional	88
Perrewé				
McDermott, Boyd, & Weaver	2015	Cross-sectional	Cross-sectional	63
Bennett, Wellman, & Mahmood	2015	Cross-sectional	Cross-sectional	80
Maharajan & Krishnaveni	2016	Cross-sectional	Cross-sectional	38
Schulker	2016	Cross-sectional	Cross-sectional	75
Suzuki & Kawakami	2016	Grounded theory	Qualitative	80
Beech, Gold, & Beech	2017	Descriptive qualitative	Qualitative	70
Chargualaf, Elliott, & Patterson	2017	Descriptive qualitative	Qualitative	80
Dirani	2017	Descriptive qualitative	Qualitative	70
Elliott, Chargualaf, & Patterson	2017	Descriptive qualitative	Qualitative	80
Binks & Cambridge	2018	Interpretative	Qualitative	70
_		phenomenological		
		analysis		
Edelmann	2018	Descriptive qualitative	Qualitative	30
Chargualaf, Elliott, & Patterson	2018	Descriptive qualitative	Qualitative	80

^{*}Percentage of appraisal tool criterion that were fully met

All the qualitative studies collected data via semi-structured interviews and analysed the data by identifying themes. Semi-structured interviews are a recognised approach to data collection within qualitative research that, similar to unstructured interviews, allow space for the participant to express themselves (Legard, Keegan, & Ward, 2003). Semi-structured interviews, also ensure a clear focus to the conversation informed by the study aim (Polit & Beck, 2012), which was evident within the included studies. In addition, thematic analysis is a common approach to making sense of qualitative data (Bryman, 2012). There was minimal or no evidence of reflexivity, which means that it was difficult to understand what impact the

researchers' backgrounds or experiences might have upon the way data was gathered, interpreted or placed into themes (Creswell, 2014).

A potential advantage to quantitative data collection and analysis is that measurement via counting is more objective and hence separates the researchers' backgrounds, values, and personal opinions from the analysis (Polit & Beck, 2012). However, it is important to be confident that the researchers measured that which they set out to, or validity (Bowling, 2009). Most of the included quantitative studies demonstrated validity by explaining how their measurement tools had previously been validated (Creswell, 2014). Where this was not possible, due to study design (Baert & Balcaen, 2013) or a new measure had been developed (Brock, Wick, Evans, & Gianola, 2011), there was sufficient detail provided or steps had been taken to establish face validity, which means that the measurement mechanism seemed likely to measure what it set out to (Bowling, 2009). Two studies also checked the internal consistency of their measurement tools (Baruch & Quick, 2007; Vigoda-Gadot, Baruch, & Grimland, 2010), this means they demonstrated that the tool reliably measured the main constructs of interest with their specific sample (Polit & Beck, 2012). Of note, one study made no reference to the measurement tool (Maharajan & Krishnaveni, 2016). However, in general, it is likely that most of the included quantitative papers carried out statistical analysis informed by data measurements that were relevant to their study focus, thus leading to meaningful findings. Due to the risk of bias within a non-probability sampling strategy and low response rates, there are limitations to the generalisability of these findings.

2.2.3 Findings

Following a thematic analysis of the included papers, four themes were identified that related to veterans' experiences of the transition from military to civilian employment and formed the focus of this evidence synthesis. These themes were: the value of military experience; successful career transition; the difference between military and civilian

employment; identity as a veteran. The findings from the included studies for each theme will be outlined below.

2.2.3.1 Value of military experience

The value of military experience can be divided into two different phases which are the value of military experience when preparing to leave and how military experience was valued in the civilian workplace. Two studies considered the value of military experience when preparing to leave. The first was a descriptive qualitative study focused upon the perceptions of British Army personnel who were leaving the military (Walker, 2013). The author reported that participants generally described a naive attitude to civilian employment that was grounded in unrealistic or poorly informed assumptions about the superiority and usefulness of military experience in future civilian workplaces. The second was a Belgian experimental study that involved sending two identical job applications, apart from one describing relevant military experience and one comparable civilian experience (Baert & Balcaen, 2013). This study found no difference in the frequency of call back for the first interview. While acknowledging that there might be differences in employer attitudes in the UK compared to Belgium and the range of jobs applied for was limited to a restricted range of low skilled job roles. This would offer some support for the idea that veterans' assumptions about the superiority of military experience were naive and suggest that military experience neither advantaged or disadvantaged them when job seeking.

The remaining studies focussed on veterans' experiences once they had gained employment. The findings were mixed with some studies reporting positively and others more negatively about the value of previous military experience. Examining the evidence that reported positively about the value of military experience, a cross-sectional study of physician's assistants in the USA reported that veterans perceived that their military background was valued by both colleagues and patients (Brock et al., 2011). More specifically, they considered stress management, teamwork, and leadership as positive military characteristics. This was supported

by a qualitative study of American nurse academics, which also added a strong work ethic and willingness to take risks and to innovate when in leadership roles (Chargualaf, Elliott, & Patterson, 2017). A final mixed methods study observed no difficulties were encountered with skills transfer to civilian employment amongst UK veterans and related this to a "can-do-attitude" (Edelmann, 2018). While these studies do suggest the potential positive benefits to military experience, it remains unclear if veterans' perceptions of the value of such characteristics were shared by their employer or work colleagues,

By comparison, the remaining studies were more negative about the value of military experience in a civilian work environment. Two qualitative studies reported upon nurses' experiences in the USA. The first was of nurses in practice who reported that their military experience was neither understood nor valued (Elliott et al., 2017). The authors related this to a difference in role descriptions that meant that military nurses perceived that they had a broader scope of practice than their civilian counterparts. The narrower focus in the civilian workplace meant that wider skills, knowledge or experience were not utilised. It is unlikely that there were any differences in the initial training, as all nurse training is to civilian competencies. It may be that the work culture and way that nurses were utilised in the military compared to civilian workplaces was different. Indeed, differences did not seem specific to research in clinical areas, as nurse academics also indicated that applying military skills generated conflict and it was challenging to explain the intrinsic value of military training to civilian employers (Chargualaf et al., 2017). In a later study, the authors went on to suggest that, despite finding it challenging to communicate with civilian employers, participants perceived military skills as a strength (Chargualaf, Elliott, & Patterson, 2018). The difficulties in relating military experience to civilian workplaces were not solely reported amongst US military nurses. A qualitative study of UK general veterans reported that current employment was not grounded in the same level of expertise or skill as previous military roles (Herman & Yarwood, 2014). This was supported by a final study of UK infantry that highlighted a perceived difference between military and civilian roles and a feeling that skills were underused in the new workplace (Beech, Gold, & Beech, 2017).

2.2.3.2 Successful career transition

The focus of this theme is the factors or strategies that may lead to a successful career transition. This is important because maintaining civilian employment may lead to socioeconomic stability. Indeed a survey of Indian air force veterans ranked employment as the second most important socio-economic need after children's education (Maharajan & Krishnaveni, 2016). One factor that may have influenced a successful career transition and hence job security was skills transfer. An American cohort study reported that skills transfer from military to civilian employment occurred in 47% of cases but that there were gender and role differences, with females favouring roles such as healthcare (Mangum & Ball, 1989). A more recent, large cross-sectional study comparing US veterans to civilians reported that, in general, they were overrepresented in roles such as security, engineering and factory work but under-represented in healthcare, creative jobs and clerical work (Schulker, 2016). This suggests that veterans may seek out future careers that relate to their previous military work experience, which seems a logical strategy for optimising skills transferability. Indeed, Israeli and US quantitative studies suggest that preparing to leave and developing transferable skills were important strategies for successful career transition (Baruch & Quick, 2007; Elliott et al., 2017; Spiegel & Shultz, 2003; Vigoda-Gadot et al., 2010). This is supported by a survey of US pharmacists that reported transitioning to a similar civilian role might be associated with a smoother transition (Bennett, Wellman, & Mahmood, 2015). However, this may not always be about a specific job role, as US veterans who became franchisees reported a higher degree of job satisfaction than a civilian comparison group (McDermott, Boyd, & Weaver, 2015).

A UK qualitative study suggested that the lived experience of transition may be dependent upon the strength of military ties (Binks & Cambridge, 2018). This view was supported by earlier British narrative research that identified some people might be more

assimilated to military culture than others (Zinn, 2011). This latter study suggested that both groups were generally able to readjust to civilian life and to make career choices that fitted with their occupational skill set. However, for those who were more closely wedded to military culture, this may involve a period of disillusionment and change of perspective about the military. Thus, how strongly a veteran holds on to a military culture may be a factor in a successful career transition.

A final component to a successful career transition identified within this review was strategies to manage the transition process within the civilian place of work. This was described by US nurse academics as a challenge to be met and that there was a need to learn about a different work culture (Chargualaf et al., 2018). Meeting this challenge involved asking questions, joining working groups focused upon achieving specific tasks or roles, and networking (Chargualaf et al., 2017). Interestingly, finding a work-life balance was also about learning to say no to new tasks, which was perceived as less acceptable within military culture. This seems consistent with a final qualitative study of US veterans that described the need to learn new processes combined with a personal capacity to reflect upon and to accept change (Dirani, 2017).

2.2.3.3 Difference between military and civilian employment

Camaraderie and communication were two areas where veterans observed a difference between military and civilian employment. Camaraderie seemed to be a factor in maintaining trusting relationships and team ethos that many veterans reported less evident within their civilian work environment. Trust in colleagues and teamwork are highly valued within military settings, possibly to promote resilience to arduous and dangerous situations. Less camaraderie was reported in one US cross-sectional study (Bennett et al., 2015) but also in a variety of qualitative papers from both the USA and the UK. For nurse academics, less camaraderie meant less teamwork and individualised instead of collective goals (Chargualaf et al., 2017). This seems consistent with the perception of civilian work as a job, whereas military service was a

lifestyle where the focus was upon the group and not the individual (Elliott et al., 2017). UK veterans also described a distrust of civilians that resulted from a perceived barrier between work and personal life, supporting the idea of work as a job rather than a lifestyle (Edelmann, 2018). Similar views were expressed by US veterans, who stated that the camaraderie experienced in military work settings was perceived to build trust and a collective purpose or goal that was more important than individual goals and this was less evident than previously anticipated within civilian work environments (Suzuki & Kawakami, 2016). While it is difficult to be certain why, what is clear is that there seemed to be a perceived difference in work culture and that this was felt by veterans from different countries and different military backgrounds.

A second difference that was described was communication. Interpersonal communication at civilian places of work felt unfocused to veterans rather than a mechanism to discuss how to achieve a task or to gain consensus (Suzuki & Kawakami, 2016). This was supported by UK veterans who felt there were lots of meetings but very little action, and that direct communication was not the norm (Beech et al., 2017; Edelmann, 2018). American nurse academics elaborated upon this difference by suggesting that direct communication was met with resistance and the approach needed to be tempered to facilitate effective communication (Chargualaf et al., 2017). The idea of resistance is of interest and may indicate a cultural difference in how people shift from discussion to delegating tasks or communicating a plan of action. This may also be evident within non-verbal communication, where it was observed that leadership and the organisational hierarchy was more obvious within the military compared to a civilian work environment (Elliott et al., 2017). This may be the result of how the command structure is represented through non-verbal cues such as uniform, rank slides, and military gestures of respect, for example, saluting more senior ranks, that may facilitate and reinforce the more direct form of communication that was acceptable within the armed forces. In summary, it seems that veterans trusted civilian work colleagues less, had weaker relationships, and might need to adjust to differences in both how leaders present themselves and how people communicate with each other.

2.2.3.4 Identity as a veteran

A final theme that emerged from the literature was about an adjustment in work identity as a veteran. This adjustment was affected by two factors which were the strength of previous military ties and flexibility to change. The impact of the strength of previous military ties was reported in four qualitative studies. One study described cutting those ties as a loss that was compounded by geographical or spatial separation, for example, losing access to military bases (Herman & Yarwood, 2014). This loss seemed worse for those who did not choose to leave the military, but all reported missing their previous support networks. Two UK studies suggested that this loss was moderated by the degree of immersion by the veteran in their previous military way of life or culture, more specifically, the strength or dominance of their previous military identity (Binks & Cambridge, 2018; Zinn, 2011). The studies concluded that those veterans with more transferable skills, or greater contact with civilians and civilian workplaces while still serving, might have been less immersed and found the process of adjusting to a civilian work identity easier. Despite this, a final UK study indicated that veterans generally felt drawn to other veterans and the reason described was sharing a common set of cultural norms and values (Edelmann, 2018). This suggests that veterans may experience a shift in their work identity when they leave and that this process may be more difficult for some. However, all may still identify as military and feel a connection with other veterans. Therefore, previous military culture, values, and norms may shape how they construct their new sense of work self.

Individual flexibility to change, or to adjust to a new work identity as a veteran, is the final component of this theme. Holding on to some elements of previously held military workplace values was reported as continuing to shape people's identity as veterans (Suzuki & Kawakami, 2016). Those elements were taking action, being disciplined, leadership skills, and respect for authority. However, the importance of letting go and recognising the military as one part of a person's working life, as opposed to the defining feature, was also reported as being a way of enabling people to open up to new opportunities (Herman & Yarwood, 2014). It may be that some veterans are better placed to negotiate which aspects of their previous identity they

need to let go of, which they should hold onto, and what new values they need to adopt. Indeed, one cross-sectional study identified that both more senior military rank and political skill moderated the degree of conflict or strain experienced in constructing a civilian identity as a veteran (McAllister, Mackey, Hackney, & Perrewé, 2015). The process of opening up to new opportunities was also reported in nurse focused US qualitative studies. More specifically, this was about accepting the differences between previous military environments and civilian workplaces (Elliott et al., 2017). In addition, while holding on to some values remained relevant, what was also important was the flexibility to unlearn old processes, to adopt new processes, to adapt skills, and to think strategically about how best to contribute to the new working environment (Chargualaf et al., 2017). This suggests that forming a civilian workplace identity involved a period of adjustment, and a willingness to let go of some elements of a previously held military identity, in order to learn or adopt the values, norms, and behaviours of the new workplace culture.

2.2.3.5 Summary of Literature Review Findings

This narrative review has focussed upon well populations of veterans, as opposed to those medically discharged from the military, in receipt of disability benefits, homeless or struggling with a current mental health problem that might impact upon their ability to work. This is consistent with the focus of this research project and means that the findings may be transferable to the current study. The themes that emerged from the review were: the value of military experience; successful career transition; the difference between military and civilian employment; identity as a veteran. The key points were that veterans might hold a naive view of the enhanced value of their military experience when seeking civilian employment. In addition, the perceived value of military experience once in employment was mixed. However, being able to transfer job skills to civilian employment may be an advantage, and such skills could be developed while still serving. Most studies identified distinct differences between the military and civilian workplace, for example, camaraderie, trust, and teamwork. Constructing a

civilian workplace identity involved opening up to new ways of working and adjusting to different workplace values.

The current project focusses upon UK military healthcare professionals, who are a unique group of uniformed non-combatants, that serve alongside regular UK forces. Several gaps in knowledge about veterans in general and UK healthcare professionals specifically have been identified. No study has previously focussed solely upon UK healthcare professionals, midlife career transition or considered how veterans experience the beginning of the transition process, that is, how they reach the point of deciding when to leave the forces for civilian employment. Finally, there is a methodological gap, as no other study has adopted an insider researcher approach, which has the potential to offer a different perspective on career transition. The next section presents a theoretical framework that seeks to encompass what is currently known about adjustment to civilian employment and the decision of when to make a midlife career change.

2.3 Theoretical framework

This section aims to identify a theoretical framework that might underpin the research question, "What do I understand about the experiences of self and other military healthcare professionals' midlife career transition to civilian employment?". To achieve this aim, the Identities-Of-Becoming, Reverse Culture Shock, Work Adjustment Theory, and the Transtheoretical Model for Midlife Career Change theoretical frameworks will be described and their relevance to the transition from the UK military to civilian employment discussed.

Identities-Of-Becoming is a framework within the UK military literature that considers shifting identities when moving from military to civilian employment (Walker, 2013). The Identities-of Becoming model underpins one empirical study that emphasises the interaction between the career changer and the different roles they perform over time and how this affects self-identity (Walker, 2013). More specifically, the meaning attached to past military work experiences underpins how people anticipate and make sense of their future civilian work

identity. While it is important to recognise that other factors such as socio-economic status, gender and ethnicity are key features of identity formation (Munro, 2010), people may also identify with specific groups, such as the military, because they share beliefs, values, and behaviours (Nolen-Hoeksema, 2014). Walker's (2013) contribution is to describe a period in time when choices and anticipation about civilian employment are beginning to shape future identity but are informed by identification with the norms associated with a military as opposed to a civilian workplace leading to naive assumptions about future identity. It does not, however, offer insight into veterans' decision to leave or how they might adjust to their new civilian work environments.

The Reverse Culture Shock model considers transition as a process of reintegration to civilian culture following a period of integration into the military, whereby there may be an initial period of distress and difficulty followed by adjustment and recovery (Bergman et al., 2014). This seems consistent with the idea that people seek to identify with groups by developing common values, beliefs, and behaviours (Nolen-Hoeksema, 2014). Bergman et al. (2014) go on to suggest that longer service leads to a smoother transition because people will have a stable, positive foundation upon which to carry out a career change. However, Walker (2013) found that people at all career stages seemed naive to what their future civilian role might entail, hence constructed unrealistic future civilian identities. Therefore, the potential for Reverse Culture Shock might exist for all service leavers despite the length of their career. While this model explains why people might need to reintegrate to civilian life as veterans, it does not seem to offer a broad understanding of the process of career change.

Within the non-military literature, Work Adjustment Theory is focussed upon the fit between a worker and their work environment (Osipow, 1990). Such an adjustment may be necessary when there is a change either in an existing place of work or due to a career move (Hesketh, 2004). A good fit between worker and workplace might lead to increased satisfaction and better performance, although other factors might also influence this adjustment, such as childhood development, personality, and life stage (Osipow, 1990). The idea of adjustment

resonates with the previous concept of Reverse Culture Shock and seems relevant to veterans who are moving from a military work culture. In addition, the concept of a good fit improving job satisfaction supports a hypothesis within this thesis that military healthcare professionals might seek out similar civilian employment. However, this model maintains a narrow focus upon adjustment or fit, as opposed to a broader explanation for the process of career change.

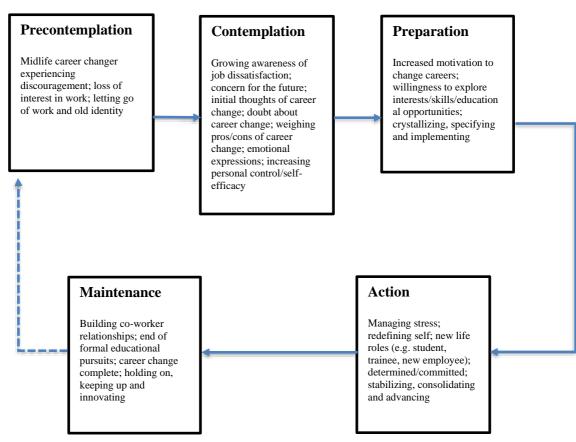


Figure 2.2 Transtheoretical Model of Midlife Career Change

Adapted from Barclay et al. (2011)

The Transtheoretical Model for Midlife Career Change (Fig 2.2) has been identified as one model that might offer a broader explanation for the process of career change (Barclay et al., 2011). The Transtheoretical Model was originally developed to explain a behavioural change in people experiencing addictions (Prochaska & DiClemente, 1983). As its name suggests, it has been adapted to explain change in different healthcare and organisational

settings (Clark, 2013; Prochaska, Redding, & Evers, 2013). The Transtheoretical Model applied to voluntary midlife career change suggests that a person might begin as relatively naive to the idea that change is going to occur, or feel some discontent within work, but be uncertain as to why (Barclay et al., 2011). This leads to a person beginning to weigh up the benefits of change as outweighing the potential costs (Prochaska, 1999). Eventually, this may lead to a period of more focused contemplation about career choices that results in exploring available options before taking action. Taking action then leads to forming a new identity within a new work environment, followed by the consolidation and maintenance of that new work role (Barclay et al., 2011). Despite attempts to define the length of each stage within the Transtheoretical Model (Prochaska, 1999), it remains unclear how long each stage might last and defining distinct stages may be arbitrary (Adams, 2004). An alternative may be to view it as a dynamic and flexible process that reflects the individual's current circumstances and stage of change (Brug, 2004).

The Transtheoretical Model applied to voluntary midlife career change focuses upon the reasons for changing career, the process of taking action, and adjustment to a new work environment (Barclay et al., 2011). Interestingly, the model incorporates precursors that exist prior to the observable change, which suggests that there is a process before taking action that may be relevant to how veterans effect a midlife career change (Prochaska, 1999). When relating the model to employment, this has been described as a readiness to change career (Park, Tod, & Lavallee, 2012). The Transtheoretical Model also emphasises the establishment and maintenance of a new career, which seems relevant to how veterans adjust to their civilian careers. For this reason, the Transtheoretical Model has been selected as an overarching theoretical framework to explain the mechanism for understanding the experience of a midlife career change. However, while this model has been applied to a voluntary midlife career change in civilian settings (Barclay et al., 2011) and retirement from sport (Park et al., 2012), it has not previously been applied to a military career change. This is a different work setting in which, for most veterans, there is an inevitable and potentially involuntary ending of their military careers midlife. This means that they could have reached a point in their midlife when,

compared to civilian workers, they would not have been able to exercise as much choice about whether or not to leave, but may have invested significantly in a military lifestyle and culture. Therefore, given that this thesis focusses upon veterans who have served lengthy careers, developing the framework in relation to this group may contribute to a better understanding of how they manage midlife career change.

2.4 Conclusion

This chapter has sought to discover what is known about how armed forces personnel experience the transition from military to civilian employment. There was a range of quantitative and qualitative studies included in the literature review. Key points that emerged from the literature were that veterans might hold unrealistic views about the value of their military experience within the civilian labour market. Job skills that were transferable to the civilian labour market may be an advantage. Most studies identified differences between the military and civilian workplace, which meant that developing a civilian identity involved adjusting to new ways of working and values. However, no papers focussed solely upon the experience of UK military healthcare professionals and their experience of career transition. The theoretical framework for this thesis is the Transtheoretical Model of Midlife Career Change. Exploring how this model applies to veterans may contribute to a greater understanding of their experience of midlife career transition to civilian employment.

3 Methods

3.1 Introduction

This chapter aims to explain the research approach used to answer the research question: What do I understand about the experiences of self and other military healthcare professionals' midlife career transition to civilian employment? Creswell (2014) states that a research approach consists of three key factors: the researcher's philosophical position, methodology, and specific research methods. The philosophical position or world view is important because it is likely to shape the researcher's assumptions about the research methodology and the nature of knowledge (Polit & Beck, 2012). In addition, defining the research design or methodology may help explain the researcher's overarching strategy or framework for answering the research question (McCluskey et al., 2006). Finally, detail about specific research methods helps clarify how the knowledge gained might contribute to answering the research question and how credible those findings might be (Bryman, 2012). For these reasons, this chapter includes an explanation of the research methodology, a discussion of the philosophical position, and a description of the research methods. However, a research approach also needs to sit within an ethical framework that serves to demonstrate how the study was approached and how any ethical risks were managed, so this chapter shall also include a section on ethics and data management (Iphofen, 2009).

3.2 Methodology

Methodologies typical fall under the umbrella of quantitative or qualitative research designs that represent the overarching principles or research theory that inform the way a phenomenon is researched, that is, the practical stages of recruiting participants, data gathering, data analysis, and reporting the findings (McCluskey et al., 2006). Quantitative research focuses on measuring the extent of a problem to produce facts that are generalisable from the study participants to a wider population (Creswell, 2014; Polit & Beck, 2012). By comparison, qualitative methodologies focus upon the meaning attached to a phenomenon or social context,

thus tend to be exploratory and place a greater emphasis upon holism or complexity than the more reductionist quantitative approaches (Bowling, 2009). The research question was about my understanding of the experiences of self and other military healthcare professionals' transition to a veteran in civilian work, which suggests an exploratory approach to research, and therefore a qualitative research approach informed the choice of methodology.

Insider research can be defined as research that is carried out by a researcher who is also a member of the cultural group or organisation (Greene, 2014). This means that they hold beliefs and a sense of self or identity that are similar to other group members within the organisation or setting (Chavez, 2008). In addition, because they are also experiencing the phenomenon of interest, it may be difficult to separate the researcher from the research situation (McCluskey et al., 2006). This means that there is a risk of the insider researcher missing or ignoring information because they may take group norms and values for granted (Edwards, 2002). However, the insider researcher holds deeper, tacit knowledge of the group and may also find it easier to access the setting (Chavez, 2008). Therefore, although the insider researcher cannot claim that they are separate, as they are fully immersed in the experience, they are able to gain insight and understanding through the construction of their personal experience, as opposed to reconstructing the experiences of others (Brannick & Coghlan, 2016). Finally, insider research may be less an advantage or disadvantage but offer one perspective upon a phenomenon that accounts for the researcher's existing experiences (Savage, 2011). Because I am both a military healthcare professional and a veteran, I fit the definition of an insider researcher, and this informed the choice of research methodology.

Heuristic Inquiry is a qualitative research approach that seeks to understand the lived experience of a phenomenon through prolonged engagement by the researcher with that situation or social context (Casterline, 2009). Heuristic Inquiry derives from the Greek word for discovery and is about the researcher's journey of discovery (Kenny, 2012), which means that there is a focus upon a topic that is of personal relevance to the insider researcher, and can result in them becoming the primary data source (Haertl, 2014; Johnston, Wallis, Oprescu, &

Gray, 2017). It is possible to carry out a Heuristic Inquiry as a purely autobiographical study, or the researcher can also seek out knowledge from people who have shared a similar experience (Moustakas, 1990; Vafeas & Hendricks, 2017). Indeed, it is argued that understanding others' experiences is deepened by first examining one's own experience (Vafeas & Hendricks, 2017). Heuristic Inquiry leads to an interpretation of the phenomenon that is personally relevant to the researcher and primarily informed by knowledge gained from their lived experience but also the experiences of others (Hiles, 2012). This means that the core question asked by Heuristic Inquiry is about the researcher's experience of the phenomenon and the key experiences of others exposed to a similar situation (Patton, 2015). The degree of inclusion of the researcher's personal experience and the experience of others within the published literature ranges from utilising the researcher's data as a primary data source (Haertl, 2014) to the researcher having shared a similar experience but focussing upon the data gathered from other participants (Vafeas & Hendricks, 2018).

I am a veteran and a healthcare professional who has recently left the military for civilian employment, which means that a Heuristic Inquiry approach was well placed to make use of my personal experience. Through social media, I was also able to recruit other military healthcare professionals who were also veterans. Whilst I interviewed other people, the purpose was to use this knowledge to develop a deeper understanding of my own experience as a healthcare professional leaving the military and becoming a veteran. Moustakas (1990) reported first applying Heuristic Inquiry to his exploration of loneliness in the 1960s and, since then, this research approach has been used to explore topics within the areas of education, health care, politics, and psychotherapy (Sultan, 2018). The literature review in Chapter 2 did not identify any previous military study about career transition that has made use of Heuristic Inquiry, making this study the first to do so. Hence this thesis offers a unique perspective upon midlife career transition and broadens the application of this methodology.

Heuristic Inquiry has been described as a variant of phenomenological research that is focussed upon the personal experience of the researcher (Patton, 2015). Phenomenology is a

research tradition that focusses upon people's lived experience and emphasises the meaning a phenomenon holds for those who are experiencing it (Polit & Beck, 2012). It is an established approach to research and has several variants, for example, Descriptive Phenomenology, Realist Phenomenology, Hermeneutic Phenomenology, and Analytic Phenomenology, that has led some authors to question whether it remains as one common methodology or incorporates a number of distinct research approaches (Zahavi, 2018). While it is acknowledged that Heuristic Inquiry has characteristics in common with phenomenological research, it has been argued that Heuristic Inquiry is distinguishable from other phenomenological methods (Casterline, 2009) or even a distinct methodology as opposed to a variant of phenomenology (Hiles, 2012).

Moustakas (1990) suggests that, within Heuristic Inquiry, the researcher is obliged to have first-hand experience of the phenomenon which reflects a connectedness and deeper personal or autobiographical relationship with the subject matter. By comparison, phenomenological research involves an effort to bracket personal experiences or previous knowledge and therefore to distance the researcher from the phenomenon and instead to focus upon the features or essence of the lived experience for a group of people (Douglass & Moustakas, 1985; Patton, 2015). In comparison, Douglass and Moustakas (1985) go on to suggest that the Heuristic Inquiry researcher remains focussed upon personal experience and seeks to synthesise or reintegrate this discovery, or newly-found knowledge, into the researcher's personal understanding about a phenomenon, retaining this within their portrayal of the data.

To summarise this section about methodology, the suggestion is that research approaches fall into two main camps that are quantitative or qualitative research methodologies. Qualitative approaches seemed better placed to create an opportunity to discover knowledge about healthcare professional's experience of transition from military to civilian employment. As I was a military healthcare professional, and transitioning into a civilian work role, it seemed important to identify a methodology that would account for this. Heuristic Inquiry was

identified as a methodology likely to offer one possible answer to the research question and to account for my personal relationship with the experience of midlife career transition.

3.3 Philosophical position

A philosophical position or paradigm can be defined as the world view that underpins a research approach and the researcher's assumptions about the generation of knowledge (Polit & Beck, 2012). Polit and Beck (2012) go on to suggest that a world view relates to assumptions about ontology or the nature of reality, epistemology or the relationship between the researcher and the participants, and axiology or the degree of subjectivity. As a consequence, there are a variety of potential paradigms that might influence the research question, how research is carried out, and the knowledge that is generated but there is no clear agreement or definitive list of paradigms (Kelly, Dowling, & Millar, 2018). At their simplest, they can be divided into a positivist paradigm that is associated with quantitative research and assumes one truth, that the researcher can remain separate from the research participants and that objectivity is important (Polit & Beck, 2012). By comparison, an interpretivist paradigm is associated with qualitative research and assumes that truth is a construct of which there are multiple alternatives, and that subjectivity is unavoidable (Harvey & Land, 2017).

Heuristic Inquiry is a qualitative approach that has roots within phenomenology but has characteristics that distinguish it from phenomenological research approaches (Moustakas, 1990; Patton, 2015). A key philosopher that influenced the development of phenomenological research was Husserl, who originally developed phenomenology to describe the essence of people's lived experience of a phenomenon (Langdridge, 2017). Amongst the philosophers who influenced the development of phenomenology, Husserl's views have particular relevance to the development of Heuristic Inquiry as he advocated that knowledge can only be obtained from a first-person or subjective stance that represents each person's experience of reality (Sultan, 2018). This seems consistent with Heuristic Inquiry because this methodology focusses upon the lived experience of a phenomenon by the researcher through prolonged engagement with

that situation or social context (Casterline, 2009). Patton (2015) suggests that even when not applying a specific phenomenological research methodology, adopting a philosophical position or world view consistent with phenomenology can support the application of qualitative research methods that seek to understand the way people experience a phenomenon. Considering phenomenology at the paradigmatic level, a world view that has been widely reported as underpinning phenomenology is interpretivism (Annells, 1996; Harvey & Land, 2017; Kelly et al., 2018) and, because of the close relationship between Heuristic Inquiry and phenomenology, it may be that interpretivism is an appropriate world view for Heuristic Inquiry. This point will be discussed further in the following paragraphs.

Recent literature about Heuristic Inquiry has acknowledged the influence of phenomenology but has identified social constructivism as the dominant paradigm for understanding how knowledge is generated (Sultan, 2018). The terms social constructivism and constructivism are both used interchangeably within the literature to describe a world view where people construct meaning about experiences that are contextual, hence informed by their interaction with other people and the shared cultural norms or values within their environment (Creswell, 2014). The terms social constructivism and social constructionism are also often loosely defined within the wider literature (Kukla, 2000). Patton (2015) suggests that a social constructionist paradigm places greater value in the way culture informs the meaning that people attach to experiences, whereas the social constructivist paradigm emphasises the individual experience and meaning within social situations or settings. Within this thesis, the emphasis is upon my understanding of midlife career transition as an insider researcher informed by both my experience and the experience of others. Upon reflection, consistent with social constructivism, I consider the emphasis to be upon my personal experiences of career transition within a military culture as opposed to how a military culture shaped my experience.

Sultan (2018), reports interpretivism and social constructivism as interchangeable terms when arguing that Heuristic Inquiry is positioned within a social constructivist paradigm. In addition, Schwandt (1998) suggests that the terms constructivist and interpretivist are

interchangeable, and their function is to signpost the reader towards a general view of the world. Exploring this further, Polit and Beck (2012) describe ontological, epistemological, and axiological assumptions about constructivism as based upon an assumption that there are multiple interpretations of reality, the researcher engages with the participants to co-construct knowledge and that subjectivity is both valuable and unavoidable, which are similar to those equated to interpretivism by Harvey and Land (2017). Hence, consistent with previous literature about Heuristic Inquiry, the term social constructivism is used within this thesis and is aligned to the terms interpretivism and constructivism in order to indicate a general world view that underpinned this study.

Social constructivism is informed by the assumption that the meaning or reality of the world around us is constructed by the people interacting with that world, including the researcher, and that this meaning is dynamic and subject to change (Bryman, 2012). More specifically, meaning or truths might be dependent upon the actions of the social actors within a given situation, which suggests that meaning might be shaped by what happened to them or what they experienced (Kukla, 2000). Finally, to understand the meaning that somebody attaches to a social context it may be necessary for the researcher to visit that social environment in order to experience it, leading to the argument that it may be the researcher's interpretation or construction of the meaning they attach to their personal experience and resulting data that informs the research findings (Creswell, 2014). It is this final point that seems to be a dominant axiological assumption within Heuristic Inquiry, where it is an expectation that the insider researcher has first-hand experience of the phenomenon. This distinguishes it from phenomenology where the researcher may hold more distance between themselves and the phenomenon by either having no personal experience or attempting to bracket their personal experience and values (Moustakas, 1990; Sultan, 2018)

A social constructivist philosophical position is also consistent with the idea of gaining insider knowledge about a phenomenon and the assumption that this knowledge will be constructed during the process of interacting with the setting or experience and be value-laden

(Polit & Beck, 2012). I am a veteran, a healthcare professional, and a researcher, which means that any knowledge gained about career transition will, inevitably, be shaped by my personal experiences as an insider researcher. As this personal construct or subjective position can influence the process through which knowledge might be constructed (Polit & Beck, 2012), the resulting truth that is informed by personal experiences of the world may vary from person to person (Zahavi, 2009). When the researcher adopts the position of having insider knowledge, there may be very little difference between living as a person within the social context of interest and carrying out research in that area (Muncey, 2010). This last point seems consistent with Heuristic Inquiry, where there is an assumption that the researcher will have personal experience of the phenomenon (Moustakas, 1990; Sultan, 2018).

This thesis aims to consider what I understand about the experiences of self and other military healthcare professionals' midlife career transition to civilian employment. This would seem congruent with the social constructivist assumptions previously outlined because, as an insider researcher, I aimed to construct one possible truth about military career transition informed by both my experience of this phenomenon and what I discovered from my interactions with other veterans who shared similar experiences. Therefore, my personal construction of how I came to understand the experience of becoming a veteran in civilian work falls within a social constructivist paradigm and is framed by a Heuristic Inquiry methodology that has informed the choice and application of the research methods outlined in the following section.

3.4 Methods

One advantage of qualitative research approaches is greater flexibility in the choice of methods designed to answer the research question (Snape & Spencer, 2003). Heuristic Inquiry advocates flexibility within research methods, encouraging creativity but always with the intention of gaining insight relevant to the research aim (Moustakas, 1990). Because of this flexibility, a clear description of the research methods is indicated in order to enhance the

trustworthiness of the study (Creswell, 2014). I adopted a Heuristic Inquiry approach to the research design and, although I adapted this approach to meet the study aim, this informed my choice of methods. My main aim was to develop a personal construction of how I understand my experience as a healthcare professional leaving the military and becoming a veteran. I talked to other veterans to help me to shape or develop my personal truth about becoming a veteran. The following section provides information about the research population, data collection methods, data analysis, and ethics.

3.4.1 Sampling

Qualitative research utilises non-probability sampling methods such as convenience, purposive or theoretical sampling (Polit & Beck, 2012). Convenience sampling involves recruiting participants because of their accessibility, irrespective of whether or not they have exposure to experiences relevant to the research project (Polit & Beck, 2012). By comparison, purposive sampling involves developing a sampling strategy that results in people being included in the research who have experiences that are relevant to the research question (Bryman, 2012). Theoretical sampling involves identifying people who may have an experience that would help test or inform a theory about a phenomenon (Polit & Beck, 2012). This study applied a purposive sampling approach, and the rationale for this is discussed in the following paragraphs.

Heuristic Inquiry focusses upon gaining an understanding of a phenomenon that is relevant to the researcher (Moustakas, 1990). As previously stated in the methodology section, I am a participant within the study and the primary data source. I am a military mental health nurse who has recently completed an 18-year career in the Royal Navy. In that time, I served with the Royal Marines, on a submarine base and with the surface fleet. I have experience of combat, humanitarian, and peacekeeping operations all over the world. I have left the navy to become a fulltime lecturer in mental health nursing at a British university. In addition to which,

I maintain a small, private psychotherapy practice. I left the Royal Navy on the 31st May 2015 and began my civilian career the following day.

In addition to the use of self, Heuristic Inquiry can include conversations with other people, indeed, including more than one person's experience may improve the richness or depth to the findings (Douglass & Moustakas, 1985; Moustakas, 1990). However, it is also important within Heuristic Inquiry that potential participants share a similar experience to the researcher (Haertl, 2014). Participants were recruited who might help inform how I understand the experiences of self and other military healthcare professionals' midlife career transition to civilian employment. For this reason, this study involved a purposive sample of people who shared a common experience as military healthcare professionals before becoming veterans.

A first step to recruiting study participants is ensuring access to a sample of people from the population of interest (Hammond, 2013). Access and recruitment of a purposive sample can be influenced by where the participants are located geographically, as a community or within an institution (Ritchie et al., 2003). Therefore when recruiting participants into a study consideration needs to be given to how to advertise the research, with the internet, social media, and email viewed as common recruitment strategies (Reagan et al., 2019; Robson, 2002). This study utilised my position as an insider researcher to gain access through social media to recruit participants, about which further details are outlined below. It is acknowledged that this will inevitably introduce a degree of bias, as not everyone would have computer access, digital literacy skills or be engaged with social media (Bold, 2012). However, online recruitment does have the advantage of accessing participants from a wide geographical spread (Robson, 2002).

Moustakas (1990) suggests developing inclusion criteria for identifying potential participants within Heuristic Inquiry. In addition, recruitment can be influenced by the researcher's knowledge of the group and personal judgement (Sultan, 2018). The inclusion criteria were healthcare professionals who had retired from the UK armed forces. There was no limit to how long-ago participants would have left the forces, as whatever stage they were at in the transition process was judged as likely to create a narrative that might inform my

understanding about the experiences of self and other military healthcare professionals' midlife career transition to civilian employment. The reason for choosing healthcare professionals is because their military experience seemed likely to be similar to my own. This is because they would have been exposed to similar military and professional training and served in similar locations both in the UK and abroad. Military veterans are a geographically disparate group hence difficult to recruit or to identify by outsiders. In the methodology section, I identified myself as an insider researcher and considered the strengths and limitations of this position. As an insider researcher, I was able to take advantage of access via existing professional networks using social media to access this hard to reach group. This means that the participants were either known to me professionally or that I was aware of them during my military career.

The sample size within a purposive sampling strategy is a balance between too few cases to achieve data saturation and too many cases to gather rich data (Bryman, 2012; Onwuegbuzie & Collins, 2007). Data saturation means a redundancy of new information derived from the narratives of additional participants about the research question (Polit & Beck, 2012). While data saturation may be an important aspiration for some qualitative research methods, for example, grounded theory (Charmaz, 2006), the broad aim of qualitative research is to learn about experience or meaning as opposed to generalising findings to a wider population (Polit & Beck, 2012). Therefore, sample size can also be influenced by other characteristics such as the homogeneity of the sample, with greater heterogeneity leading to a larger sample size (Ritchie et al., 2003). In this study, the population of interest shared several homogenous characteristics such as all being veterans, healthcare professionals, and in civilian employment, all of which would be indicative of a smaller sample size. In addition to homogeneity, the constraint that resources such as time, money, and participant availability place upon the sampling strategy are likely to influence the final sample size (Ritchie et al., 2003). Finally, Moustakas (1990) suggests up to 10-15 participants as a ballpark figure for a sample size within Heuristic Inquiry. To reflect the constraints outlined above, the likely homogeneity within the purposive sample, and Moustakas' (1990) recommendations, an a priori lower limit of 6 and an upper limit of 12 participants was included in the recruitment strategy.

The recruitment strategy was to use a purposive sample of military healthcare professionals contactable, by me, via a social networking site (LinkedIn) who were sent a standardised message advertising the research project and inviting them to become involved (Appendix A). Those who responded were sent a further message inviting them to an interview (Appendix B), a participant information sheet (Appendix C), and a consent form (Appendix D). A total of 10 people were recruited to participate in the study, and their socio-demographic data is outlined in Table 3.1. Nine of the participants were from the Royal Navy, one was from the British Army, and there was one female participant. Previous research about recruiting participants via social media has reported no gender bias evident by UK users of the LinkedIn social media site (Blank & Lutz, 2017). In addition, there are not a greater number of navy healthcare professionals when compared to the other branches of the armed forces. Therefore, the lack of air force personnel and the low number of army and female participants seems likely to be the result of the characteristics of my social media links as an insider researcher, whose background was the Royal Navy. Upon reflection, further research could purposively sample participants from the British Army and Royal Air Force or female health care professionals who may offer a different perspective upon midlife career transition.

Within this Heuristic Inquiry, the average age of the people recruited was 44 years, length of service 21 years, and time since leaving five years. There were no significant differences in the demographic characteristics between the army and navy participants. Overall, the participants had very similar characteristics to my demographic, which serves to demonstrate that, as an insider researcher, I had recruited individuals from within my military sub-group. This seems consistent with a Heuristic Inquiry methodology where the study focus is of a phenomenon that has personal relevance to the researcher, and other participants are recruited whom share a similar experience (Patton, 2015). Recruitment ended as a result of time constraints and no further volunteers. However, it is noted that during the data analysis, there

was a high degree of commonality or data saturation in participant's experiences about the themes.

Table 3.1 Sociodemographic Data

Participant	Rank	Role	Gender	Relationship Status	Employment Status
A	Officer	Nurse	Male	Married/Long term partner	Full-time
В	Other Ranks	Nurse	Male	Single	Full-time
С	Other Ranks	Medical Assistant	Male	Married/Long term partner	Full-time
D	Officer	Medical Assistant	Male	Married/Long term partner	Part-time
Е	Officer	Nurse	Male	Married/Long term partner	Full-time
F	Other Ranks	Medical Assistant	Male	Married/Long term partner	Zero-hours
G	Other Ranks	Nurse	Male	Married/Long term partner	Full-time
Н	Other Ranks	Nurse	Male	Married/Long term partner	Full-time
I	Other Ranks	Nurse	Male	Married/Long term partner	Zero-hours
J	Other Ranks	Nurse	Female	Married/Long term partner	Full-time

3.4.2 Data collection

Heuristic Inquiry advocates a flexible approach to data collection with the aim of shedding light on the phenomenon of interest (Moustakas, 1990). Heuristic Inquiry can include personal experience and the experiences of other people (Douglass & Moustakas, 1985). The aim of speaking to other people was to help me to understand my experience of the phenomenon better. To account for this, different data collection approaches were adopted for recording my personal experience and gathering information from others.

With regards to my personal experience of midlife career transition, because this occurred over an extended period, longitudinal strategies such as remembering events from the past and journaling are recommended for capturing this type of autobiographical data (Muncey, 2010; Nicol, 2012; Whybrow, 2013). For this study, I started to keep a reflective journal at the point of leaving the military, and this was maintained for a six-month period during the

transition into new employment. An unstructured approach to journaling was adopted as this offered greater scope for themes to emerge from the data (Bartlett & Milligan, 2015). Hence there was no set format, but diary entries tended to focus upon my expectations, what happened, and how I felt. Diary entries were prompted by an event that felt significant hence were made regularly but not daily. Examples would be the first day at work, attending a team meeting, or feeling scared. Moustakas (1990) describes this kind of self-dialogue as a primary data source that can be used alone or alongside dialogue with other participants.

In addition to the use of journaling as a primary data source, supplementary material can be used to enrich the meaning or depth of understanding about an experience (Moustakas, 1990). As the journaling started at the point that I left the armed forces, I felt it was important to generate additional data that captured my memories and reflections about the build-up to leaving by producing a written narrative of the memories of key experiences from the past. These written narratives involved writing a response to each of the topic areas in the Interview Aide-Memoire (Table 3.2) that was also used by the other participants. This aide-memoire was prompted by my initial reading of the literature and the aspects to career transition that I was unsure about when I was leaving the forces. These narratives were written in December 2015, after the journaling of my personal experience but before interviewing other people.

Table 3.2 Interview Aide-Memoire

Topic					
1	The general story of the transition to civilian employment.				
2	What it means to be a veteran and a civilian employee.				
3	The emotional experience of transition to civilian employment.				
4	The experience of veterans focussed social support networks over the course of				
	the transition period.				
5	The actual experience of civilian employment compared to the memory of how				
	expected it to be.				
6	Perspective upon previous military employment.				
7	Experience of integration with civilian community.				
8	Satisfaction with new job and income.				
9	What has gone well in the transition process.				
10	The challenges and what steps were taken to try and overcome them.				
11	Hopes and aspirations for future civilian career.				

A total of 10 healthcare professionals were recruited into the study and invited to an online video interview or telephone interview dependent upon available technological resources. Demographic data was gathered using a short questionnaire at the start of the interview that consisted of age, gender, service, rank, length of service, and employment status (Appendix E). On average, the interviews lasted approximately one hour. Any participants who wished to become involved but did not have the time to attend an interview were invited to create a written account of their response to the themes within the aide-memoire, and these were treated as written transcripts for the purposes of data analysis. In total, eight participants attended an interview and a further two participants forwarded written responses to the aidememoire.

Interviews within Heuristic Inquiry are used as a way of conversing with oneself and with other people (Moustakas, 1990). Ultimately, such conversations can help illuminate the researcher's internal frame of reference (Kenny, 2012). I used the interviews to help me to engage fully with my own experience of career transition by hearing other people's perspectives and then developing a creative synthesis. Two types of qualitative interview methods are semistructured and unstructured interviews, the choice of which depends upon the amount of flexibility that is acceptable within the participant responses (Bryman, 2012). This project used a semi-structured, flexible interview style incorporating a shared aide-memoire. I focussed upon encouraging the participants to tell their stories by using open-ended questioning and demonstrating my engagement and participation in the conversations (Riessman, 2008). As active listening skills underpin my personal experience as a mental health nurse, facilitating conversations in this way was familiar to me. In addition, because I shared a common language, cultural identity, and work experience, I felt able to understand both jargon and context. During the interviews, I noticed that I identified with their experiences, saw the connections with my own transition from service person to veteran, and began to reflect upon this in relation to the themes that had emerged from my personal data.

Interviewing participants is a common data gathering method within qualitative research in general and in Heuristic Inquiry specifically (Bryman, 2012; Moustakas, 1990). However, not all participants were able to make themselves available for an interview. In recognition that this was a difficult to access and geographically disparate population, excluding their input would have excluded their voices and their narrative. Therefore, a decision was reached to promote accessibility to those potential participants who could not afford the time to attend an interview but wanted to be involved in the study, by offering the opportunity to submit written responses. Whilst interviewing participants has the advantage of providing an in-depth exploration of a topic and the development of a shared understanding even when following an interview guide or aide-memoire (Silverman, 2010), this was not possible for two participants who forwarded written responses. This limitation to the data that was gathered is acknowledged. However, Heuristic Inquiry is a flexible research approach that accommodates a range of data sources to help provide an answer to the research question (Sultan, 2018). While more limited in content and depth, when combined with my personal data and interview data from the other participants, this additional data formed part of the thematic analysis and contributed to my understanding of the experiences of self and other military healthcare professionals' midlife career transition to civilian employment.

All interviews were audio-recorded and later transcribed verbatim, which is a recognised approach to interview data gathering (Silverman, 2010) and has the advantage of not relying upon the researcher's memory of the interview, thus facilitating a more thorough and repeated exploration of participants' responses (Bryman, 2012). As I was already immersed in this experience as an insider researcher, it was considered that verbatim transcription of audio recordings would result in meaningful data that might help inform how I understand the experiences of self and other military healthcare professionals' midlife career transition to civilian employment.

A professional transcription service was commissioned to transcribe four of the eight audio-recorded interviews to maximise the time available for data analysis. A confidentiality

agreement was signed, which was in accordance with the Lancaster University research ethics approval for this thesis (FHMREC Ref: FHMREC16081). All transcripts were then read whilst listening to the audio recording to check the accuracy of the transcriptions. Within Heuristic Inquiry repeated exploration of the transcripts facilitates immersion in the data to generate an implicit and explicit understanding of the experiences of self and others (Moustakas, 1990). This process of checking the accuracy of the transcripts combined with a repeated exploration of the transcriptions during the data analysis facilitated immersion in the data.

3.4.3 Data analysis

Moustakas (1990) describes a process for analysing data within Heuristic Inquiry that accounts for both personal experience and knowledge that is constructed from dialogues with other people who share similar experiences. The analysis involves several discrete phases within Heuristic Inquiry (Kenny, 2012; Moustakas, 1990). These phases and how they were applied are outlined in Table 3.3, and the specific techniques used, for example, thematic analysis, are discussed in the remainder of this section.

Thematic analysis within this project took the form of qualitative content analysis, whereby data from transcripts was examined, and significant themes and patterns within the data were identified (Polit & Beck, 2012). Moustakas (1990) suggests trying to maintain a reference to the whole person when generating depictions of their experience within themes. Therefore themes were represented by individual lines of text but also by larger excerpts that better captured the essence of the story being told (Flora, 2012). These excerpts were coded by labelling them according to the content that they represented and then grouping this coded content into themes (Polit & Beck, 2012). Thematic analysis can focus on the similarities and differences between each participant's story (Faircloth, 1999). However, within Heuristic Inquiry, there is a greater emphasis on the similarities identified between the experiences of the different participants (Moustakas, 1990). In order to more easily manage large amounts of data, the text was coded into themes with the aid of a Computer Assisted Qualitative Data Analysis

Software package (Bryman, 2012). An example of this analysis for a participant is in Appendix F, and an example of this coding from my diary entries and theme development is in Appendix G.

Table 3.3 Heuristic Inquiry Phases of Data Analysis

Phase	Description	Application
Initial engagement	The researcher's autobiographical engagement with the subject area. This helps to focus the researcher's understanding of the phenomenon and the research question.	My diary entries and reflections were thematically analysed. The emerging themes were then used as a priori themes when coding the other participants' manuscripts.
Immersion	The researcher's comprehensive engagement with the subject through dialogue with other people to develop a deeper understanding.	Transcripts of interviews were thematically analysed informed by the a priori themes developed during the initial engagement.
Incubation	The researcher distances themselves from the more intense previous engagement with the subject area.	I stepped away from the data and focussed not on analysing the experience of career transition but instead family life and fulfilling my civilian work role, i.e. becoming a veteran.
Illumination	This is the natural process of beginning to modify the previous understanding of a phenomenon and to gain a sense the broader meaning or the themes associated with a phenomenon.	I began to focus my attention upon the analysis again and became increasingly aware of the synthesis between my own and other people's experiences.
Explication	The researcher becomes more fully aware of what has been learnt and what meaning is attached to the phenomenon.	I created typologies to represent the people interviewed and sought to situate myself within them.
Creative synthesis The researcher draws together the different components to the analysis into a collective whole that reflects the meaning the researcher attaches to the experience. This moves beyond the data, and the narrative can include stories, poems, drawings etc.		I revised the themes within a new narrative of my understanding of what it meant to transition from military to civilian employment.

(Kenny, 2012; Moustakas, 1990)

Heuristic Inquiry can include an autobiographical component to data collection and therefore include the researcher as the primary data source (Kenny, 2012). Hence, the themes that emerged from the initial thematic analysis were derived from my personal experience captured in a journal and reflective narratives. In order to better understand my experience and journey of discovery, these themes were then applied a priori to the analysis of other people's accounts and subthemes were developed that reflected the similarities and differences in people's experiences. These subthemes are described in the findings section with rich or thick enough detail to help the reader to understand the context and hence the meaning attached to the experiences (Lewis & Ritchie, 2003). Finally, the creative synthesis phase to the data analysis was an opportunity to synthesise the implicit and explicit knowledge that I had gained from my own experience and others' perspectives upon that experience. This led to further refining of the themes into a narrative that had sufficient poetic licence in the way the story was told to help the reader to engage both emotionally and analytically with the content (Moustakas, 1990; Muncey, 2010). To help the reader to understand how my personal experience and my conversations with others shaped the construction of knowledge, the findings chapter begins with the themes that emerged from my experience, followed by what I found out from other people, and ends with a creative synthesis.

3.5 Validity and reliability

Validity and reliability within qualitative research help to demonstrate how rigorously a study has been carried out (Bowling, 2009). Rigour within the research process may demonstrate trustworthiness or credibility of the research and the findings (McCluskey et al., 2006). Validity within qualitative research can be defined as the extent to which the results of the study are consistent with the perspective of the participants (Creswell, 2014). Validity within Heuristic Inquiry may be about how the methods help to illuminate the researcher's internal frame of reference and tacit knowledge (Kenny, 2012). My focus was upon developing a personal construction of what it meant to become a veteran in the civilian workplace. To be

transparent about this process, the findings chapter presents my personal experience within themes, what I learnt about other people's experiences concerning those themes, and a creative synthesis of what this now means to me as a veteran transitioning into a civilian workplace.

Validity is about authenticity, with both testimonial validation and transparency in the research processes ways of demonstrating authenticity within qualitative research (Holloway & Freshwater, 2007; Lewis & Ritchie, 2003). Testimonial validity typically involves checking with the participants for their agreement with how their data has been interpreted (Stiles, 1993). This view is supported by Holloway and Freshwater (2007) who suggest checking with the participants that their transcript represents what they meant to say and providing them with an opportunity to re-construct the written version of the interview. In this study, testimonial validity involved sending participants a copy of their transcript and sharing with them how their data and direct quotes fitted within the themes, so that they could review the contents and make any necessary revisions or redactions (Creswell, 2014; Holloway & Freshwater, 2007; Lewis & Ritchie, 2003).

Within Heuristic Inquiry, the researcher can also create individual depictions or summaries of each participant and develop exemplary portraits, or select participant summaries that represent the people sampled (Moustakas, 1990). I opted not to use individual depictions because they did not add to my application of the other veterans' interview data, which was to help me to deepen my understanding of the themes that emerged from my personal experience. Exemplary portraits were viewed as a useful mechanism for highlighting the similarities and differences between other veterans and my personal experience. However, in my efforts to protect anonymity, rather than select from individual depictions, I opted to generate typologies that drew upon characteristics from individual group members. Therefore, I adapted the methodology to meet the study aims and ethical considerations, which meant that there was no requirement to seek testimonial validity for individual depictions or exemplary portraits.

Method triangulation is another mechanism by which validity can be sought because it involves more than one method or source of data collection and can provide for a more rounded

perspective on a phenomenon (Polit & Beck, 2012). Within Heuristic Inquiry, data can come from the self and from speaking to other people (Moustakas, 1990). Thus, method triangulation was demonstrated in this study by including two different data sources, which were the researcher's and other veterans' experiences of transition from military to civilian careers. I viewed this additional data source as on a continuum, which ranged from using the additional data to inform my personal experience to viewing the data as a separate entity. My approach was to make use of the data to help inform my personal construction or frame of reference. I think this is because I have previous experience of autoethnography and began this research journey from this perspective. This means that the primary data came from my journaling or written reflections on the experience of leaving the military. However, data also came from interviews or written responses from other participants who shared a similar experience. This second data source was used to help me to immerse myself in my own experience of the phenomenon and to deepen my understanding of the themes that had emerged from that experience.

Reliability within qualitative research includes the consistency within which the research method was applied (Ritchie et al., 2003). In addition, reliability can be defined as the consistency within which this process was carried out over time and can be demonstrated by a thorough description of the research process (Creswell, 2014). Reliability is also about transparency that can include the researcher sharing their philosophical assumptions, values in relation the phenomenon being studied, and a clear explanation of decisions made about sampling strategy, data collection, and analysis (Bowling, 2009). This might help the reader to understand the research process, leaving them better placed to understand any conclusions that are drawn (Lewis & Ritchie, 2003). Reliability within this study was demonstrated by describing the methods of sampling, data collection, and analysis. To further ensure consistency with a Heuristic Inquiry research process, a research guide was developed (Appendix H). The research process was regularly monitored for congruence with a Heuristic Inquiry approach, as outlined in the previous subsections and the research guide.

3.6 Ethics

Ethical approval was obtained from Lancaster University (FHMREC Reference: FHMREC16081). This included a minor amendment request to incorporate direct quotes from participants within the thesis (Appendix I). Ethics represent a set of principles that may inform the decisions taken about how a research project will be designed or undertaken (Iphofen, 2009). This means that they are a type of moral compass that helps the researcher to navigate the research journey (Polit & Beck, 2012). This is important because there are examples in history where such a moral compass has not guided research design leading to the rights of the participants not being respected (Iphofen, 2009). According to the Declaration of Helsinki, all foreseeable ethical issues should be assessed in order to minimise the risk to life, wellbeing, dignity, integrity, autonomy, confidentiality, and privacy (World Medical Association, 2008). Bryman (2012) simplifies this into four key areas that are harm to participants, lack of informed consent, invasion of privacy, and deception. The following section shall consider ethics in relation to the recruitment strategy, data collection and analysis, data management, and knowledge dissemination.

3.6.1 Recruitment strategy

Access to potential participants was gained through my position as an insider researcher, and people were recruited via a social media site. It could be argued that there was a risk that participants might feel obliged to participate and that I was using my position as leverage to recruit participants (Kirpitchenko, 2014). An initial opt-in message was sent out (Appendix A) and further information provided to those who expressed an interest. It was made clear that participation was voluntary and detailed information was provided about the research project (Appendix C). This means that the recruitment strategy was to seek volunteers who could make an informed choice about opting into the study.

3.6.2 Data collection and analysis

The primary data source was the author, which means that I recorded and wrote about my experience of transitioning to civilian life. Peterson (2015) states that this approach requires a willingness by the author to expose their vulnerabilities to the audience. I have previous experience of this type of research method and was able to make an informed decision about being vulnerable within the text (Whybrow, 2013). Information related to general encounters with other people used composite characters as a mechanism for protecting individual identities (Muncey, 2010).

Informed consent was initially gained from participants to include paraphrased quotes within the final thesis and subsequent publications. This was based upon an initial plan to analyse data in a manner consistent with autoethnographic research methods, which would not have required specific quotes from others. However, as the study evolved, it was recognised that there was an opportunity to more fully account for the experiences of others that led to a change in the research approach to Heuristic Inquiry, which was subsequently approved by Lancaster University research ethics panel (FHMREC Ref: FHMREC16081). This adjustment to the data analysis strategy resulted in an opportunity to represent other people's experiences more fully, and further permission was sought to use specific direct quotes as opposed to paraphrased quotes. Where further consent was not gained, then paraphrased quotes were used, and this has been annotated next to individual quotes within the findings chapter. This process ensured that each participants confidentiality and privacy was protected in what is a relatively small community of military healthcare professionals.

There was a small risk that participants would have described experiences that were upsetting to them. Although it was not possible to predict when or if this might happen, it was important to minimise the impact with appropriate support (Iphofen, 2009). Within the information sheet, participants were advised to access their GP or Combat Stress should they consider that they needed further help. None of the participants reported feeling upset or needing to access support.

Participants' consent to be interviewed is not a carte blanche agreement for the researcher to invade their privacy (Bryman, 2012). In order to ensure informed consent about the scope of invasion of privacy, a list of key interview themes was sent to the participants in advance of the interview (Table 3.2). Also, because of the informal, conversational nature of the interviews, there was still a risk that participants might say more than they meant to (Elliott, 2005), which could be viewed as a form of deception that then results in an invasion of privacy. To mitigate this risk, the participants could opt for written transcripts to be sent to them in order to have the opportunity to check or change the content. This was based upon the understanding that no response within two weeks of being sent a transcript would imply that no changes were required.

3.6.3 Data management and storage

The risk of harm is that the data is accessed by a third party (Bold, 2012). Lancaster University recommends that data held on a personal computer be encrypted, password protected and stored for 5 years before destruction (FHMREC, 2014). To reduce the risk of harm, this project complied with these recommendations.

3.6.4 Dissemination

The completed project has led to a PhD thesis and possible publication in a peer-reviewed journal. When presenting qualitative research, using direct quotes can add to the richness of the presented analysis (Lewis & Ritchie, 2003). However, to protect confidentiality and right to privacy, it was also important to try and protect individual participants identity, especially with regards to the use of quotes (Riessman, 2008). Therefore, composite characters or typologies were created to represent typical demographic information within the study, and consent for the use of specific direct quotes was sought from participants or paraphrased quotes were used (Appendix J).

3.7 Conclusion

This methods chapter aimed to explain the research approach, the specific research methods, and the ethical considerations that were taken into account within this thesis. In order to offer an answer to the research question about transition from military to civilian employment, a Heuristic Inquiry approach was adopted. This methodology was chosen because it was congruent with insider research and enabled the researcher's experience to be included as the primary focus of the study. This was important because I am a recent veteran transitioning to a civilian career, so I am well placed to offer an insight into this experience. However, the project also drew from information gathered from other veterans and both the researcher's personal data and other participant's data were included in the data analysis. Following a period of reflection and illumination, a final creative synthesis was generated that sought to present my understanding of what it means to transition from a military to a civilian work role. These findings will be presented in the next chapter.

4 Findings: What I Have Learnt About Becoming a Veteran

4.1 Introduction

This findings chapter aims to explain what I learnt about becoming a veteran, informed by my journaling, reflective accounts, and interviews with other healthcare professionals. Consistent with Heuristic Inquiry, my insider knowledge and personal experience have shaped the way the information is presented. To help the reader to understand better the lens through which I have constructed this knowledge, the chapter begins with my story and the themes that emerged from my experience of leaving the armed forces. I will then share the insights I gained about those themes from interviewing other veterans about their experience of leaving the military. Finally, I reshape this learning into new themes that represent a creative synthesis of what I have come to understand about leaving the forces and becoming a civilian employee. This includes the process of a midlife career change, the impact upon health and wellbeing, and the experience of adjusting to a new place of work.

4.2 My experience of leaving the armed forces

4.2.1 Vignette (Self)

I was a sailor in the Royal Navy for 18 years. I fell into a career in the armed forces with no real planning or strategic goal. I did not even know that it was going to be a career and still feel surprised that it was. I joined the navy relatively late at 26 years old. Before joining up, I had been a lifeguard, a barman, and a courier. I had travelled widely, lived and worked abroad, both as a child and an adult. I was an ex-public schoolboy but from a working-class background and never really fitted in. I had tried my hand at poetry, been a pacifist, and generally dabbled in different lifestyles. I have struggled with anxiety and low self-esteem for most of my life. I think I joined the navy in search of direction more than adventure.

I joined as a medical assistant because I was interested in learning a skill and liked the idea of being a medic. Medical assistants are the backbone of the military medical service and perform many different roles that include paramedical skills, primary care, pharmacy, and management. However, they lack a civilian qualification, and I felt frustrated by this. I had worked alongside nurses, and they seemed to be treated differently to medics and to have more autonomy. I thought nursing was a good opportunity to gain civilian qualifications, so I took the opportunity to retrain as a mental health nurse. I served at sea as a medical assistant deploying to the far east and the gulf. I also served on land as a nurse, deploying to Afghanistan twice. In the UK, I served in Scotland and both the south west and the south east of England. I went wherever I was asked and never complained. Even when faced with significant personal issues, I was able to contingency plan and to look to my wife for support. I always did my duty as selflessly as I could. I feel guilty about this to this day, as I chose a selfless commitment to the service, but my family did not.

I think my military experience, commitment to the service, and specialist nursing qualifications in talking therapies strengthened my credibility as a military healthcare professional which afforded me many opportunities within the forces. These opportunities probably went beyond my military rank. I enjoyed not quite fitting into my rank or expected role but was never belligerent and always abided by military norms and values. I was respectful, followed the rules, was positive about change, and my contributions were generally constructive. I was definitely in the navy, a good team player, and wore my uniform with pride. But just like when I was a public schoolboy, I never quite felt like I fitted in, had more acquaintances than friends, and was probably held back by my anxiety and low self-esteem.

I left the forces to start a new job as a lecturer in May 2015. For several years before leaving, I also worked privately as a nurse specialist in psychological therapies so had an awareness of civilian work. I planned to continue my private therapy practice and viewed it as a way to buffer any reduction in salary. This meant that I felt that I could adjust to a new career fairly smoothly. I was at a stage in my career where I was able to leave with a pension which I

hoped would also help financially. I could have stayed in the forces for longer had I chosen to, but in reality, I had probably reached a ceiling within my military career. I accepted and understood this shift in my military career prospects. The resulting career change involved a geographical move, not only for myself, but also for my family. I felt guilty for forcing a geographical move upon my family but hoped it would be the last big move for all of us.

4.3 Individual Depiction (Self): Themes

The following themes emerged from the qualitative content analysis of my reflective account that I had recorded in a journal and my written reflections upon the topics within the aide-memoire that I used when speaking to other veterans:

- 1. Reaching a tipping point about deciding to leave the forces
- 2. Uncertainty when leaving the forces and starting a civilian job
- 3. Managing insecurity within the civilian workplace
- 4. Building new working relationships
- 5. Seeking stability in the face of non-work life stressors
- 6. Experiencing a change in identity

4.3.1 Reaching a tipping point about deciding to leave the forces

The idea of leaving the military began when I was a medical assistant and two or three years into my career. I had failed a specialist military course, was physically injured with a sports injury related to training for the course, and was exploring my options. This was a negative time in my life where I was unsure of my future in the forces and fearful of long-term injury. This led me to realise that I might need to rely more upon my intellect than my physical strength, which was disappointing. I hid the extent of my injury from which it took me several months to recover. I think that this recovery period afforded me time to adjust and to review my options. I was studying a distance learning degree in psychology, was aware of other people who had transferred to nursing, and so I also requested a transfer as I considered this would afford me a civilian qualification and a recognised profession. I was not particularly interested in career promotion but was interested in job role opportunities. This was when I learnt about the value of creating opportunities or options for further professional development and adopted

this strategy throughout my career. I enjoyed my military roles most of the time. My goal was not to leave the forces but, eventually, the opportunities for further professional development reduced and the option of leaving became more apparent.

I was in France (in 2014) when I started to apply for academic jobs. I had been on a warning for a draft (job change) that moved me further away from academia and I felt that over time this would reduce my options. Yes, that is basically it, for most of my RN career I could see the options ahead of me but in my final year these were lessening, and the civilian options seemed greater. (Reflection upon interview themes 27 Dec 15)

Similar to early in my career when I decided to transfer to nursing, a negative event tipped the decision to leave. In this case, it was that my career seemed to be heading away from the specialist clinical and academic work that I coveted towards a path that I would not have chosen. The new path was to a more generalist mental health nursing role in which I risked losing my specialist and academic skills. This is not to say that I was angry or upset; I accepted the situation for what it was and tried to be pragmatic. However, I also felt that I needed to protect my skill set as a nurse specialist as I realised it had value beyond my military career. This was probably when I realised that what was important to me and what was important to the military were beginning to part company. My selfless commitment to the service began to weaken, and my identity as an independent person with a skill set of value to a wider labour market became more obvious to me. The reality is that most military personnel are obliged to seek a midlife career change, and my career would have come to an end anyway. This is because there was an upper age limit to employment in the military and employment contracts were time-limited not open-ended. The below quote reflects my view about having left the military from my perspective as a veteran.

I liked my job, but I don't miss it. I think that I had got as far as I could and risked treading water/backwards steps without the stability of a same geographical location to settle in to or a guaranteed job after the end of my 22 years (aged 49) and definitely no job after 55. (Reflection upon interview themes 27 Dec 15)

What made it easier to tip in the direction of a civilian career was that I had transferable skills and qualifications. I knew this because It was easy to subscribe to job alerts and to be emailed new job advertisements, and I had made a habit of comparing my skill set with potential civilian jobs. I think that I had begun to do this out of curiosity, after training as a psychotherapist, and when lots of jobs were becoming available in the NHS. I sometimes felt that I could not get a job outside of the military, as my perception was that I was not good enough to get a job elsewhere, which was probably underpinned by low self-esteem and anxiety. In the military, I had a value that was indicated by my rank. Comparing myself to civilian job descriptions meant I had a better idea of my true value in a wider job market, and I felt better able to act when the military opportunities were outweighed by the civilian alternatives.

4.3.2 Uncertainty when leaving the forces and starting a civilian job

A core theme emerging from my data was related to the uncertainty that I experienced when leaving the military. This began with the length of the notice period when leaving, which was 12 months. Early release can be granted, but this is locally agreed and not guaranteed. Once my job offer was secured, I requested and was granted early release, which reduced my notice period to eight months. I feel very grateful to my boss for agreeing to early release. Once approved by a line manager, an early release must be authorised at a very senior level. Again, this person was very supportive and very kind. The process itself, however, reduced my feeling of autonomy or self-determination and led to me feeling helpless at times because my future seemed to be in the hands of the navy still. I also had to plan for the contingency that the navy may suddenly need me to extend my notice period to 12 months, and this could have meant

losing my job offer. This felt scary and added to my feeling of uncertainty. I managed this by focusing upon routine, fitness, and planning the geographical move.

A lengthy notice period made job seeking difficult and, I feel, weakened my position when negotiating the terms of a new job. This is because I had to focus on agreeing to the notice period and ask for flexibility by any potential new employer. This placed me in a weaker position when negotiating other conditions, such as pay. Indeed, one potential employer explained that the notice period was the reason they disregarded me at the point of application. However, it afforded financial advantages too, as it meant I moved beyond my pension point and was entitled to an immediate pension. I did not blame the Royal Navy for this process but observed how challenging it felt at the time. Then, when it happened, the reality of my careerending struck me.

On my last day at work, I handed in my ID card and received a piece of paper. I then walked out of the base, knowing that it would be very difficult to walk back in again...I was no longer in the 'club' and access that I had taken for granted would now be denied. I felt the difference between serving and veteran. A loss of status reflected in a loss of access. It was immediate but happened without pomp or ceremony. The signature on a piece of paper by a civilian in a small side office then I walked out of the base. (Reflection upon interview themes 27 Dec 15)

As I left the base, the security guards recognised the piece of paper, that I now held in place of an ID card, and let me through the gate. I had parked my car outside of the base because I no longer had vehicle access. With one final step through the threshold of the gate, my identity changed to a veteran. This was an exciting moment, stepping into the unknown of a new career. It had built up over several weeks with a wind-down of my military work and the various bureaucratic processes such as handing back items of uniform and passes. However, it was also an anti-climax in many ways as nothing really changed; I went home, walked the dog, picked the children up from school, made dinner, and watched tv.

Eventually, I was in a position to start my new job as a university lecturer. Eight months had passed since my interview and deciding to leave. I had moved my family, relocated geographically, and given up my navy pay. There was no way back now, and I felt the uncertainty of a new role, I was anxious but remained keen to make it work. I did not know what to expect from the first day as my previous civilian work had all been clinically based and in private therapy rooms over which I had considerable control. I did not feel overly excited, although I was keen to start, it was more that I hoped that I had made the right choice for my family and myself and now needed to see it through.

What a warm welcome. ...it feels like it went well. I managed to fall into a friendly pattern of meeting new people and did not feel anxious, reminding myself how effective I actually am at liaison. But remembering that I am no longer protected by a long contract and years of experience. Reminding me how important these new working relationships are going to be to my survival in this new place of work. (Journal, 1 Jun 15)

4.3.3 Managing insecurity within the civilian workplace

This theme was about feeling vulnerable within the workplace and was triggered by the threat of redundancy soon after starting a civilian job. This threat then seemed to come in waves for a while and, when it was the main topic of conversation at work, triggered anxiety and worry within me. I realised quickly that this was a risk that I would need to manage. Initially, this was about trying to make myself indispensable in the workplace.

So, I feel compelled to volunteer when emails come out committing to things. So that people can see I am enthusiastic and also to kind of ensure my diary is fairly full as a way of, I feel, demonstrating my worth, my value and why they would not make me redundant. (Journal, 6 Aug 2015)

But the second time this threat rose to the surface, I decided that spreading my efforts and committing to different sources of finance, for example, university work, private clinical work, and clinical supervision, might be a better way to mitigate the risk. This desire to spread the financial risk by committing to different financial sources was also driven by a realisation that I may compare unfavourably when competing with both more established employees and new employees from more traditional healthcare settings.

What I discovered was a lot of shining stars. People who had been a real success in their clinical/managerial roles and with lots more corporate knowledge of the geographical application of their previous skills to the environment that we were now all working in. I am not the shining star, and I have very little to offer that is not already here. This feeds into my low self-esteem, and I feel scared that I will shortly be asked to leave – redundancies, cuts, someone better comes along. (Reflection upon interview themes 27 Dec 15)

Over time I realised that I was not alone in feeling insecurity, and this was not just about being in the forces and transitioning to civilian life. What seemed different for me when compared to my peers was that I had committed my family to a significant geographical move, which resulted in a loss of connections and relationships. This made the threat feel worse to me, as I felt that I was more exposed than my peers, and I found the uncertainty difficult to bear. In actuality, I felt more vulnerable than during most of my career in the armed forces. In the forces, vulnerability is not about deploying to combat zones, as you prepare for that. Nor was it about the dynamics of the workplace, as you learn to operate within the system and how to exert agency. When I injured myself early in my career, failed a very physical course, and thought my military career was at risk if I did not recover from my injury, that was when I had previously felt this vulnerable. Only, on that occasion, I had no family and no children. Whereas this time, in a different part of the UK, in a rented house, with a family dependent upon my income, I

think it weighed more heavily. Ultimately, I was able to develop strategies for managing this that included demonstrating a strong work ethic, spreading the risk, and networking.

4.3.4 Building new working relationships

Building new friendships in new places has always felt difficult for me. I lived in a lot of different locations as a child, both in the UK and abroad. This meant countless schools where I felt odd, awkward, different, and was bullied at times. This has led to me feeling self-conscious and anxious when forming relationships. However, I recognised the value in work relationships, was conscious of the need to develop them, and was concerned about 'getting it wrong'. Every military training course or deployment and most challenging work situations that I have experienced have always relied upon teamwork. Despite my anxiety, I am a good team player. However, I am always faced with an internal conflict between my anxiety and desire to escape or avoid social or group situations versus my experience of the value of working with others. Over the years, I have learnt to make a better first impression and to try to maintain work relationships. In my personal life, I am more typical of somebody with social anxiety, have a very narrow circle of friends, and depend upon my wife for friendship as well as love.

A tough day today. Felt anxious in a meeting. Worried about building bridges. Very conscious of the need to be a team player and not to become too entrenched. Feel this nearly happened today although this was not my intention. Relationships seem very important and can be tough to build. (Journal 16 Jul 15)

Despite my insecurities and anxiety in social settings, what I am good at is liaison. While I was never trained to do this by the military, liaison was fundamental to my military role. I reflected upon it a lot, especially during my last deployment, where I learnt something about myself and how I manage my anxiety but continue to deliver upon my work commitments. I can introduce myself to people and raise my profile without being too forward

and usually leave a reasonably good first impression. This is a skill I took from my military role and meant I was able to foster effective working relationships in new or challenging settings, for example, a forward operating base in a combat zone. I think that part of this was also about flexibility and an awareness of the need to adapt and not to become too entrenched. I had served many years in the military and learnt that when I was too rigid, it impacted negatively upon work relationships compared to when I sought a compromise. I had learnt from this, had changed my approach, and was keen to apply these strategies for building relationships and networks in my new work environment and geographical location. However, one difference was that I did not fully understand the dynamics or politics of a very different civilian rank structure.

Trying to work out my role. Who my peers are and who my superiors are in a flattened hierarchy. I think power is less explicit, although some seem to hold more than others. So, a conflict with the wrong person, i.e. someone with lots of influence, would be a poor decision. I have been in that position with fellow military personnel before. At present, I am not sure who is a threat and who is not, whereas previously I was. Watchful waiting is the way ahead. (Journal 8 Oct 15)

At the same time, while building new links, I was faced with trying to understand what to do about my previous military relationships. I was uncertain about the balance between maintaining professional links and holding on to a previous life.

I email old colleagues today with my contact details... I wonder about this, am I trying to maintain links that are no longer there? I do it anyway... It is the same with LinkedIn as I consciously force myself to seek out new non-military contacts. (Journal 2 Jun 15)

In part, I think that I cherish some of those military relationships as they took me a long time to build, and I often found this difficult. There is a difference for me between short term work-based liaison, which I am good at, and long-term work-based friendships that I still find difficult. Emailing old colleagues triggered my anxiety about social situations because it made me question whether I was maintaining contact to remain within my comfort zone, which risked me avoiding focussing upon building new work relationships. As a result, I think I was more conscious of the need to force myself to build new relationships.

Building lasting work relationships is challenging. I have been in a new job for five months and am now reaching a tipping point of needing to maintain those relationships. Politically, this is my weakest area as it is in my personal life. This does not seem too different to in the military, except I don't fully understand the rules around loyalty, being of the same group etc. (Journal 10 Oct 15)

I decided that collaborating on work projects was a way to achieve new and positive working relationships. I sought out opportunities to work with others and aimed not to isolate myself. Seeking to isolate myself would have been an easy option and my default setting in new social situations. Despite my anxiety, I am also a good and proven team player, collaborating on work projects was a way to manage my social anxiety and to allow me to play to my strengths. However, when combined with job uncertainty, it would have been easy to take on too high a workload and to volunteer for too many projects. The reality is that I probably did take on too much and still have not quite got the balance right. I hope that being more strategic will come with time and experience in my new place of work.

How much stuff should I volunteer for? How thinly should I spread myself? I have not produced results here, so lack that credibility. I have a lot going on, illness, house move, parental relationships, fitness, weight, love, happiness, dog, broken car, PhD etc. How to deliver and be

reliable. Do I slim down and just try to deliver on 1 or 2 things, or do I volunteer for everything? The standing joke in the forces is never volunteer. But I always have and still am....for everything. Do I need to be more strategic? At least one paper is looking good although will need to contact the editor for an extension. I try and work with others, sometimes that is more challenging than working alone, but I hope more rewarding for everyone in the long term. (Journal 18 Oct 15)

4.3.5 Seeking stability in the face of non-work life stressors

Although my final military draft had only lasted for one year, we were all settled in that geographical location and liked it there. It was different when we moved for my first civilian job. I had only lived in military married quarters early in my married life, and the rest of the time, I had either owned a house or rented. In my previous geographical location, I had rented a very clean, large house that suited my family. As a civilian, I opted for cheaper rented accommodation because I was uncertain about my net monthly wage once pensions and tax had been removed. Also, I knew that I would be earning less money than my military wage and wanted a financial safety net. This resulted in an immediate and obvious environmental impact upon my family.

Arriving in Wales was not exciting. It was a lot to manage – house move. The check-in people (estate agents) were not booked, so the house was not ready. It was dirty and run down as we later found out the cleaners only had one day to sort it out, and it was one of the dirtiest houses they had ever cleaned from the previous tenant. The kids did not like it and were unhappy... The living area was too small for my family, and we were under each other's feet at a time when we probably needed space. (Reflection upon interview themes 27 Dec 15)

I realised that rented accommodation was not helping and, in order to increase stability for my family, decided to buy a house. This meant that within eight months, there was a second

geographical move to an area in which we could afford to live that was approximately 80 miles from where we were renting.

Moving to a new house, lots to plan and coordinate, big risk as moving far from work ...but hopefully the payoff will be worth it. Feeling anxious, and so are the kids. Lots to do with new schools etc. I watched my children and remember feeling the same way at their age. (Journal 25 Oct 15)

The impact of additional life stressors had an effect on me at a time when I did not know how to access civilian healthcare services for either physical or psychological health problems. Within the military, I was very confident about how to access healthcare to meet my needs. While I had not reached the point of needing psychological support, I consider that my mental health could easily have worsened. Accessing help did not feel straightforward, and the below quote outlines my experience from when I first became a veteran.

It has taken me eight months to understand the dental system. I probably had an unnecessary extraction, decision based on cost. Because of my ignorance of how to access the NHS. I now understand the dental system, but previously had no concept of how civilian dental care worked. My mental health was affected by the stressors around relocating. Everyone was unsettled, and I blamed myself, felt guilty (Reflection upon interview themes 27 Dec 15)

During the first six months, and even to the present day, there seem to have been several life stressors that included financial insecurity, geographical moves, and health problems. These seemed greater than at most times during my previous career. I am uncertain if this is because of leaving or a coincidence because my family and I are now older and are likely to have more needs. On reflection, I think it may have been a combination of both that exacerbated the distress experienced during this period of adjustment. This felt like walking a tightrope, one missed step

and I could easily have spiralled into increased distress and then not functioned effectively at work at the exact time when I needed to be demonstrating my value as an employee.

4.3.6 Experiencing a change in identity

My military role involved liaison with different parts of the armed forces and civilian healthcare services. Each of these groups would hold a different world view and, to liaise effectively, I would have to adapt my approach to account for this. Adopting an entrenched or rigid approach to my military work had never been useful, and I took this learning into leaving the forces. The main difference with leaving the military for a new career was that previously I sought to accommodate the social norms of other groups from the position of knowing who I was. On this occasion, I had relinquished my strong foundation as a credible expert in military mental health nursing.

I am sat on a train on my way to work. Opposite a man in his 50s, wearing a blue Gortex jacket with an RM (Royal Marines) badge sewn on to it. I think about feeling vulnerable and now understand why he wears it. (Journal 26 Nov 15)

My interpretation was that the man on the train was reminding himself (and others) of the position of strength from which he derived. Without it, he was another man in his 50s sat on a train, but with it, he and others knew where he came from. I remember when I got promoted in the forces to a rank that represented credibility within my role. It involved the right to wear a slightly different uniform – peaked cap, long sleeve shirt, tie and different rank slides. To me, this uniform represented credibility because rank was associated with skill and experience in my military role. It helped others to understand my skill and experience, and without it, I felt more vulnerable.

Ifelt a little anxious the other day like something was missing. I was walking to the train station and suddenly felt like I've forgotten something, and something was missing, my head felt lighter, but I realise what it was... my peaked cap. (Journal 3 Aug 15)

By comparison, I quickly realised that my clothing represented very little of value within my new team. I began with a shirt and tie but would often be the only person in the room that was dressed that way, as even senior managers wore jeans at times. This was a point where I could have become entrenched and sat in meetings wearing a service tie or veterans badge pinned to the lapel of a blazer. In many ways, this was how I viewed the man on the train, seeking to identify with who he once was. Instead, I adapted my dress code to fit better with the team in which I sat and adopted a far more casual look than I had originally planned. When thinking back to the man on the train and reflecting upon the previous strength reflected through a badge on his jacket, I think it risked making him seem vulnerable in this civilian world, entrenched, and unable to change. I wanted to come across as flexible and keen to learn, which I sought to demonstrate by seeking to fit in with the way my peers dressed.

I kind of hoped I would be some sort of shining star, delivering everything that was missing and highly prized. Stepping out of one work environment where I was doing ok in my field and leaping feet first into another where those skills were ready to go. (Reflection upon interview themes 27 Dec 15)

The reality was very different, and my military experiences, or point of reference, seemed to contribute very little compared to my peers' NHS experiences. My expected strong platform upon which to launch a civilian career seemed weaker than I first thought, and I compared myself unfavourably to my civilian peers. I had to shift my perspective and adjust my new identity to reflect this change of status. This was driven by a motivation to overcome the challenges that I faced and to make my new situation work. I had left the forces a credible

expert and joined my new organisation as a novice on probation. Seeing things from this new perspective of novice helped me to develop a flexible strategy that focussed upon learning new skills while building upon existing ones. When adopting this strategy, I began to feel more confident and could begin to understand why they had employed me, which was not for what I was but instead for what I might become within their organisation.

4.3.7 Summary of my experience of transition to civilian employment

The above depiction of my experience of commencing civilian employment was not a journey that I took alone but included my whole family. Leaving was a voluntary decision taken because civilian employment opportunities seemed more congruent with my future career aspirations than the military alternatives. Because of the lengthy notice period, there was uncertainty about whether I could take the new job and negotiating a lengthy gap until my start date meant that I felt I had limited leverage in negotiating pay. Beginning a new job did not relieve the stress of leaving the forces, as it quickly became apparent that there was job insecurity. This was exacerbated by a geographical move and having minimal work-based networks in the new location. The geographical move also impacted upon my family, and I felt guilty about this. I took steps to increase stability in my family life, for example, buying a house. This reduced my flexibility in the job market but allowed my family to settle. I emphasised building new networks and built upon my liaison skills, while recognising that I find building new friendships difficult as I struggle at times with social anxiety. I also experienced a shift in identity and tried to be flexible to this shift from credible expert to novice. Ultimately, this was a positive shift and inspired in me the hope that I could develop myself to meet the demands of my new place of work.

4.4 Other people's experiences of leaving the armed forces

The above personal construction of transition from a military to a civilian work role has shaped this Heuristic Inquiry. The next stage involves using my personal construction as a frame

of reference when exploring other veterans' experiences. This section presents what I discovered about the above themes from interviewing other people in order that the reader can see the process that shaped the final creative synthesis that represents my personal truth about being a healthcare professional and becoming a veteran. The section shall commence with four composite exemplars in the form of typologies that seek to provide context by portraying some of the characteristics of the people interviewed. This will be followed by a depiction of their experience framed within the themes that emerged from my analysis of self.

4.4.1 Typologies

The typologies aim to portray some of the characteristics of the people interviewed about their experience of transitioning into civilian employment. In order to protect identity, but reflect elements of the real experiences of the different participants, the typologies are a composite of various participant's characteristics. The function of these typologies is to provide the reader with context about the people that I interviewed. It should be noted that all participants had served for a minimum of 12 years and had well established, long-term military careers. Within those established careers, some left earlier and some closer to an inevitable, midlife end of contract. Table 4.1 illustrates the typical transition pathway of the people I interviewed and whom I perceived to have left the military as one of four different typologies.

The four typologies were labelled as: Early Leaver; Glass Ceiling; Sudden Ending; Full Career. Three of the participants were categorised as early leavers (Participants B, C and J), their mean age was 38 (range 35-43), and they left the military after 12-13 years of service. Two participants were placed in the glass ceiling typology (Participants A and G), their mean age was 43 (range 42-43), and they left the armed forces after an average of 19 years of service. Two further participants were categorised into the sudden ending typology (Participants E and F), their mean age was 48 (range 47-49), and they left the forces after an average of 25 years of service. The final group had reached the planned end of their career and consisted of three

participants (Participants D, H and I), their mean age was 49 (range 43-57), and they left the forces after an average of 28 years of service.

Table 4.1 Typologies

Туре	Typical Composite Characteristics	Participants
Early Leaver	Left the military after 12-years' service; performed well within the armed forces and quickly gained promotion; able to secure a desirable role and additional civilian recognised qualifications; relocated to a new geographical location for a civilian job.	B, C, J
Glass Ceiling	Left the military near to the end of their career but before the standard exit period; excellent clinical skills but limited promotion; postgraduate training in a specialist clinical area; remained in the same geographical location and found civilian work.	A, G
Sudden Ending	Served a full career; promoted to a senior level and dedicated to their military role; ineligible for an extension to their contract; no civilian work experience and limited transferable civilian, non-degree qualifications; work is geographically distant from family.	E, F
Full Career	Served a full career plus a 2-year career extension; benefitted from promotion and gained civilian recognised qualifications; rarely undertook any civilian work while in the forces; always planned to leave at the end of a full career; remained in the same geographical location and found civilian work that was similar to their military role and dependent upon their qualifications.	D, H, I

4.5 Composite Depiction (Others): Themes

The aim of this section is to describe the experience of others who have left the forces for civilian employment. Their experiences are interpreted through the themes developed from my previously described experience of leaving the military.

4.5.1 Reaching a tipping point about deciding to leave the forces

The main subthemes relating to reaching a tipping point for deciding to leave the forces were about opportunities and values. Of these, it seemed that weighing up opportunities both in the military and as a civilian was the most prominent subtheme that led to a tipping point for choosing to leave.

Was mindful of the currency in up to date qualifications and transferable skills. Chose to develop self in the forces with managerial skills that were transferable across industries and was keen not to be stuck with no transferable skills after a long military career. Early Leaver (Participant B: Paraphrased)

The concept of it being 'my time to go' resonated with most types of service leavers, and represented a moving apart of previously shared values between the organisation and the employee. This shift seemed most pronounced for those who left whilst experiencing a glass ceiling, and they typically reported a period of conflict and significant unhappiness in the workplace, a mismatch.

I wasn't valued at all. And I felt very undervalued. In fact, I started getting into trouble. I ended up getting two warnings. Coz I had a massive dose of the fuck ems, to be honest. Glass Ceiling (Participant G)

Participants were also able to make comparisons with other people who had already left and to make a prediction about what to expect. For example, Participant G went on to explain that he found it helpful to know that people who had left did not regret doing so, and that his portfolio of skills and experience was comparable to his veteran peers. Thus, knowing that his skills were marketable, combined with discontent, seemed to lead to a tipping point for leaving. This period of conflict and unhappiness was shared with those who left more suddenly than planned due to health issues. This group perceived that their contract with the military had been broken and reported feeling undervalued, let down, and a subsequent period of loss. By comparison, those leaving at the end of their career reported a more gradual process of change that included a need to accept a shift in opportunities within the forces, age-related physical limitations, and a growing tiredness or apathy with military life.

Yeah, I was just tired with everything. I knew I was tired with the navy at the time. It was right, it was 22 years I'd done you know, and I was getting more and more bad with knee injuries and everything. So, I thought let's get out and go and see the other life that's out there. So, it's a choice I made I'm quite happy with. End of Career (Participant I)

4.5.2 Uncertainty when leaving the forces and starting a civilian job

The main subthemes described by participants related to uncertainty when leaving the forces were an emotional reaction to leaving, preparation for leaving, and transferable skills. The emotional reaction tended to be anxiety, which was commonly experienced at the point of leaving. It would seem that a degree of anxiety was both a typical and a normal part of experiencing the uncertainty about leaving a stable job for the unknown of civilian employment.

I guess for me the biggest thing was when I first left was that all of a sudden that realisation that you're out of the service, you're out of your, I guess, almost comfort zone. In terms of when you look at the military, the military, I feel, personally, very much does take care of you and you have got a reasonable or good salary coming in. It's guaranteed every month, and you get all your perks and the benefits of the additional pay for when you're away and your travel and all that kind of stuff, good leave packages and that kind of stuff. Early Leaver (Participant C)

For other people, this anxiety persisted, and this did not seem to be dependent upon the reason for leaving the forces or at what stage in a person's career they chose to leave. Instead, it was driven by an extended period of uncertainty about future civilian employment once they had left and were no longer receiving military pay. The reasons for uncertainty when starting a civilian job were varied but included the process of emigrating, redundancy, job offers falling through, human resources errors, and zero-hours contracts.

Preparedness for leaving was something that many of the participants reported was helped by the sorts of experiences and training opportunities that they had exposure to whilst in the forces. Participants also acknowledged that, in common with all military personnel, there were opportunities available to them for additional resettlement training. While some reported the available resettlement training courses as more useful than others, all participants felt that time needed to be better protected for resettlement and the process of transition.

And I see, all too often, people squander their re-settlement. It is almost like, in service, you can be given time off while still being paid. I don't know to start your adjustment long before you actually get to that point where that is your last day in service. You could almost do with three months, six months – that's protected time. You no longer need to wear your uniform. We are going to pay you, but you need to really sort out your employment and all that kind of stuff. Sudden Ending (Participant E)

Finally, a clear subtheme relating to uncertainty was about transferable skills or experience. For those who considered that they possessed such skills or experience, it would seem that this reduced uncertainty and led to a speedier process of securing appropriate employment and less reliance upon the resettlement training opportunities.

I actually managed to avoid them cause, I got the phone call you need to go to the transitional workshop, and I went, what for? They went to allow you to transition to a civilian environment and get a job. I went, I have got one. Oh, oh, what? I went yeah, I have got one. Oh ok, when do you start? I have been doing it for two months (laughing). Oh, ok. Yeah, I won't be attending your workshop. Glass Ceiling (Participant G)

Others had started their career within a role that would lead to less transferable skills and may have hoped to resolve that while serving. Where they were unsuccessful in gaining transferable skills, due to military commitments, then this led to greater dependence upon the resettlement process. This meant that securing civilian employment became about making use

of networking skills, while also trying to invest wisely in resettlement and post-military training. The hope was that the resettlement training would lead to greater civilian job stability, however training courses could be costly and did not always lead to employment. In summary, the deficit in civilian skills and training associated with some military healthcare roles seemed to translate into uncertainty about civilian employment and a perception of reduced employment opportunities.

4.5.3 Managing insecurity within the civilian workplace

The military provided continuity with wages and employment. You kind of get into a nice relaxed atmosphere. Coming out into civilian street and not knowing if the wages are coming in or if your next job is coming in, it was the hardest thing. Sudden Ending (Participant F)

Some participants reported perceived insecurity in their civilian workplaces. Key subthemes related to this were the emotional reaction it caused, credibility, and skills. The types of insecurity or unexpected events reported were the threat of a job falling through, problems with administrative processes, no permanent work, and redundancy. Whatever the unexpected event, a dominant feature was the impact upon how the participant felt in the situation, more specifically, their emotional reaction to negative workplace events. On occasion, this was exacerbated by other life experiences or their previous military role.

That transition period was probably the worst six months for me that I've had to date, because of the unsettling sort of episode that I had. It then kind of set me back in terms of, I had a few sort of issues I guess, while still in the military, dealing with things like traumatic incidents and things like that, and relationship breakdown and all that kind of stuff. And it really did kind of set me off and put me back quite considerably, and I ended up quite down and quite fed up, a bit depressed for a short period. Because of the insecurity and believing that I made -

convincing myself that I made a big mistake in terms leaving and all that kinds of stuff. But eventually, things were sorted. Early Leaver (Participant C)

For some people, this period of insecurity seemed to pass within a few months, whereas other people had to tolerate job insecurity for an extended period of time. Insecurity about civilian work included extended periods away from home, unsatisfying work roles, long hours, and non-permanent contracts that impacted upon mental wellbeing.

... well, I think the last year has been very stressful. It's probably had a stressful impact on my health. I can see weight loss; I can see quite a few more regular attendances at the GP with stress and probably anxiety. Sudden Ending (Participant F)

All participants described how they planned for stressful events and problem solved mechanisms to manage them and to improve their situation if needed. This included planning for predicted periods of insecurity, contingency planning for different eventualities, and identifying a goal to work towards when faced with adversity. Two factors that impacted upon those plans were perceived credibility in their role and possessing transferable, relevant skills.

To manage the risk of the job role being cut, he attempted to build up his contribution to the organisation so that could be easily relocated to a different job. This involved enhancing qualifications and spending a lot of time studying. Glass Ceiling (Participant B: Paraphrased)

4.5.4 Building new working relationships

Building new working relationships was a fundamental aspect of the participants' experience of civilian employment, with soft skills and valuing military or shared experiences reported as the main subthemes. Some participants reported that they sought out employment that had similarities to military life with an expectation of a shared understanding. While there

may have been some similarities, ultimately the civilian employment was in a different organisational structure that seemed less cohesive at times.

...one of my biggest lessons was that certainly, the NHS is very different. And obviously, it has to be because it's not the military, it's not doing the same function. But that kind of, as you say, I think my expectation that it was very similar to the military. It was probably a little bit overestimated, but it's kind of there to a certain extent. And, again, there's a few people that you kind of develop sort of close working friendships or not just working, but close friendships and bonded with that you've worked with over a period of time. Early Leaver (Participant C)

Soft skills are the communication, teamwork, and interpersonal skills that some argue are as important as the more technical or hard skills that a person may possess (Bhatnager, 2011). One participant added to this definition by suggesting that useful characteristics from the military were self-discipline, motivation, and getting things done without prompting (Participant A). Whilst another suggested that qualifications will only get a person so far, as other skills are important to climb the corporate ladder (Participant B). However, sometimes the application of soft skills was reported as challenging.

Colleagues react badly to constructive criticism, and line management is unsupportive of approach, so he is now trying to be less blunt. Full Career (Participant H; Paraphrased)

Nevertheless, more generally, the application of soft skills was perceived as a strength derived from military life.

I think the military teaches you how to cope and play along and you do a good job because you are smart, and you turn up on time, you are polite, and you are very keen to work in a team, and it's not all about you. Sudden Ending (Participant E)

Soft skills were perceived as an important tool within the workplace. Interpersonal skills were valued at times of uncertainty in order to build working relationships, to gain permanent employment, or to further employment prospects and promotional opportunities. Most viewed this as very much a long game and, given that all participants had served a minimum of 12 years in the military, this may have been consistent with their previous work experience.

For me, all went quite well really. I mean it's quite simple that - just slide from one area to another and get on with the - I think the thing that goes really well for -especially I'd say in our kind of world is the fact that we usually just get in there and then and getting on with stuff. And a lot of places like that, that you'll just get on with the job and it means you are then appreciated, and people will ask for you to go back to other places again. End of Career (Participant I)

4.5.5 Seeking stability in the face of non-work life stressors

One other participant shared my experience of a non-work-related negative life event when leaving the forces and transitioning into civilian employment. This life event was a relationship breakdown that resulted in divorce. They observed that a geographical move and lack of immediate social network meant it was harder to meet new people.

One other participant recognised that their civilian employment was impacting upon their ability to enjoy family life, which was because they had made choices that involved working away from home. They recognised this as similar to being separated from family due to a deployment and realised it was now optional rather than a mandatory part of service life.

... and then I thought this is a bit crazy because I've just spent the last xx years away from home. And here I am now that I'm sort of a free man separated from my family, so I thought, well, I might as well go home. End of Career (Participant D)

Finally, most participants reported that civilian employment had resulted in a more stable social and family setting.

I look at people... I have got a life now. I can, I am more in charge of what I am doing and that, my families future. If I had stayed in, I would have probably been posted and seen my family at the weekends. I see my family every single day. Glass Ceiling (Participant G)

4.5.6 Experiencing a change in identity

Participants reported that their military values shaped their civilian identity and that they identified with the term veteran. In general, it seemed that military experience was not always as highly prized by their civilian employers as they had expected it to be. More rarely, previous military experience or status added value to new employment or shaped how the employer might perceive the veteran within the workplace. On occasion, this led to the employer holding unrealistic expectations about how the veteran would perform their role.

My first job, having met the manager at the time, she was very keen on me over others because she thought I could go in there and sort them out. Sort out the support workers. She thought that a bit of military discipline and the ability to grip a situation was what she was after. Not really my style. Sudden Ending (Participant E)

Some veterans orientated themselves towards specific civilian roles such as nursing, the ambulance service, or working in an offshore medical role on oil rigs. However, although these roles attracted veterans because they were perceived as similar to their military role, their previous military experience did not always translate or lead to job offers. In fact, a common message was that employers were not too interested in operational tours, medals, and specific military experiences.

I look back in now, and I see a lot of my military colleagues, and they are just focusing on, oh well I just need to focus on being a sergeant, or I need to focus on being a chief. And you think actually no, you need to focus more on [qualifications]...yep, albeit that is a career choice. What I realised was, when you leave that interviewer doesn't care whether you were a Chief, doesn't care whether you were a Petty Officer. And I soon came to realise that where a lot of people were in that, looking up to get that next rank structure. In the real world, it doesn't really count for much. Glass Ceiling (Participant G)

Despite this lack of interest in previous military experience as forming part of a veterans' civilian work identity, most participants were in employment. A minority of veterans reported job roles that seemed to lead to a concentration of employees who were also veterans, for example, the ambulance service or working offshore on oil rigs. Military personnel are forced to integrate with each other and to internalise a set of core military values from day one in basic training. This may mean that military camaraderie and values remained important to the veterans working in those settings.

I do miss, I really do miss the military. I miss I think probably the camaraderie, the friendships that you, the bonds that you kind of develop through some of the environments that you find yourself in... not just. I mean, yes, I think that across the board when you're in the UK and going through training, and you're living in close proximity and what have you, you build some strong bonds and friendships and stuff. Early Leaver (Participant C)

Despite the perceived lack of value by civilian employers in participants' previous military experience, most of them felt like their previous military role would always shape their identity.

People used to say what is it like to be a civvy. I say I have no idea mate. I said I am an ex; I am ex-military. I will never be a civvy. And people don't realise that you carry on being military when you leave, you still identify. And I see myself being an old legionnaire soon, sitting in an old legion if there is any left. Glass Ceiling (Participant G)

As previously stated, it may be that the participants sought out roles where they hoped that there would be some similarities to their previous military values and that this would continue to form part of their identity. Sometimes the reality was not exactly as expected, sometimes the values did not fit at all, or the civilian workplace was too focussed upon other pressures such as finance as opposed to the people within the organisation and the quality of the service that they were delivering. On other occasions, the transition into a civilian identity included benefitting from what were perceived as transferable values.

And do you know, we've got all those skills. I can live on my own. I know what to do. I'm disciplined. I've got a good work ethic, and I've got loyalty. And to me, it wasn't really that different from being in the service because of the sort of roles that I've played anyway. It was just another job. I didn't even consider it. I just thought this is what I am going to do, and I went away and did it. End of Career (Participant D)

4.5.7 Additional themes

As previously discussed, the above themes were developed a priori and informed by my experience of transition from military to civilian employment. Moustakas (1990) emphasises seeking out commonalities within the experience of different participants. However, a difference that was reported was joining the reservists after leaving the military. The reserves were not an option that I had seriously considered, yet one participant clearly described it as helping to shape their identity and to give life meaning when work was very predictable, they were losing their fitness, and were missing military structure or discipline.

I am doing it because I keep my military skills up and I am enjoying it. And also, I felt myself getting fat, and I still have to pass a fitness test. I don't have to pass fitness tests for my civvy job. So, I found myself becoming fat lazy and complacent. Whereas now I have still got a xx that phones me up and says you have got a fitness test to pass have you been running this week? Glass Ceiling (Participant G)

On reflection, many of the participants reported a continued affinity with the forces, some were members of veterans' organisations, while others maintained contact via social media and enjoyed meeting up with old friends, or strangers who shared a common bond, when the opportunity arose. I am no different and have continued to maintain some links with former colleagues and other veterans. Perhaps becoming a reservist represents the extreme end of a continuum upon which all the participants fell, where it served as a mechanism to maintain a link with the armed forces and military life.

4.5.8 Summary of other people's experience of transition to civilian employment

The above analysis started with typologies that positioned the participants within one of four groups: the early leaver; those who left due to a glass ceiling; people who experienced a sudden ending to their career; those with a planned retirement. This Heuristic Inquiry research process sought out commonalities across these different groups informed by the a priori themes identified from my own experience of transition to civilian employment.

There were many commonalities between participants related to the themes. All participants reported a tipping point that led to the decision to leave. Even those who planned retirement at the end of a full career had the option to extend their contracts but decided to leave. The exception being one participant who was refused further employment due to physical health problems. The early leavers and glass ceiling groups left for better civilian opportunities, those experiencing a sudden ending seemed less well prepared and took longer to adjust to civilian employment, and the full career participants had a reached a point where they simply felt that

they had done their time and needed to move on. Finally, for most people, there was a moment of conflict or incongruence between employer/employee expectations, or needs, that led to the decision to leave.

Many of the participants experienced uncertainty at the point of leaving and insecurity in their new employment. Amongst those who left early, this was often due to administrative processes that delayed new careers. While the UK military offers a career transition programme for resettlement when leaving, the benefit of this programme for healthcare professionals was limited, for example, one participant with limited transferable qualifications reported spending significant amounts of money for courses that did not adequately equip them for their future career. In addition, other participants suggested the training on offer was irrelevant because of their civilian qualifications, for example, military nurses. By comparison, those at the end of their military career and planning to leave seemed better equipped to benefit from either the networking opportunities or the option to explore alternative careers and training that were offered by the career transition service.

Insecurity and uncertainty seemed to be compounded by an expectation that civilian employers would highly prize previous military experience. The reality was that transferable skills and civilian work experience seemed more important when building new work relationships but that much of the previous military work experience was irrelevant for most participants. However, the soft skills developed during a military career, such as teamwork and flexibility to adapt to changing circumstances, were considered important for building new relationships by all groups. These soft skills translated into civilian employment, where participants were resilient to change and often problem solved solutions or developed contingency plans to overcome the challenges that they faced. They also planned longer-term strategies to gain permanent employment that included, achieving further academic qualifications, building a credible reputation in their field, and investing money in the relevant trade skills.

Finally, participants described their identity as a veteran, and this was clearly perceived as being shaped by the values internalised during their military career. The degree of continued association with the military varied, but all participants maintained some sort of link that helped them to identify as a veteran. This connection to the military through identifying as a veteran seemed important and, even if there was some conflict that led to a participant leaving, there was often a great deal of pride in holding veteran status. In the previous paragraph, it was reported that soft skills rather than direct military experiences were of value in the civilian workplace. This suggests that, although the experiences from within participants' military careers seemed less important to their new workplace, it could be that military values related to teamwork and flexibility to change were both associated with being a veteran and of value in the civilian workplace.

4.6 Creative Synthesis

This section seeks to synthesise the experience that was shared by both the participants and myself and to generate a new personal construction of what this experience means. This is a creative process designed to evoke the felt sense of that experience but also to make explicit what I think I have learnt. To achieve this, I begin with a metaphor about military careers and then revise the themes to better represent my current understanding of the experience of military healthcare professionals' midlife career transition.

I was sat on a riverbank in a location that is hundreds of miles from where I was born, and hundreds of miles from where I served in the navy, but it is where I now find myself and where I am trying to settle. The riverbed was made up of stone, and the water was shallow with small bits of seed and plant materiel floating on the top. The sun was shining on the water, which was crystal clear. You could see the stones, steady, not moving too much, always there, and you could see the water and flotsam moving quickly across them on its perpetual journey to the sea. The military is an institution that has been with us since we have needed to defend ourselves. Like that riverbed, it is a constant. People join, internalise military values, working

practices, and skills during both basic training and trade-specific training. They then follow the course of their career for a period of time before leaving and continuing into civilian employment. They are like the water and flotsam that flows across the riverbed, there for a moment, important as they make up the river but then gone in an instant. One difference between this and most other forms of employment is that the ending is forced upon all military personnel mid-career. All participants in this study left the forces before the end of their working lives. It is this midlife career transition and subsequent experience of non-military employment that has formed the focus of the previous thematic analysis in this findings chapter. I have reworked that analysis into the following revised themes that draw upon all our experiences of transition from military to civilian employment. The revised themes are the tipping point, adjustment, and progression.

4.6.1 The tipping point

While it is true that I was frightened of leaving the forces, it is equally true that I was scared to stay. Like those who left because of a glass ceiling, there was increasing tension between my values and employment needs compared to the expectations of the military. This felt like a gradual shift in my identity from a sailor who was also a nurse to becoming a nurse who happened to be working in the navy. Had this continued, then the flexibility or scope of my work role may well have reduced, and the conflict increased. This tension slowly led to a tipping point where the opportunities as a civilian began to outweigh those in the forces. Most of the people that I talked to shared this experience. On reflection, many of us worked towards this eventuality by developing civilian work skills, professional training, and outside interests that bore fruit in the latter stages of our careers. This served as a cushion during the transition process, and when it did not happen for whatever reason, for example, ill health or lack of opportunity, then the shock of leaving seemed more severe and the adjustment took longer.

I have learnt that, during a military career, it is important to target professional development that includes transferable skills and civilian qualifications. One advantage to

serving as a healthcare professional was the scope to exploit opportunities for civilian training, as some of the civilian professional roles were not dependent upon previous military experience, and it felt like it was the skill that was transferable and of value in the civilian labour market more than the person. However, there is a risk that a growing realisation of the value of civilian skills or qualifications might increase the tension or conflict near the time of leaving. For example, I and others began to feel that the value of our skillset had transcended whatever rank or role was being performed in the forces and the military structure. For some, this was evident in the monetary value placed upon our skills and the demand for our services in part-time civilian employment that was more favourable than our military grade. This led to a tipping point, where leaving seemed to be an opportunity to flourish, but staying felt increasingly like a dead end.

Although tension and a degree of conflict seemed to form part of the process of reaching a tipping point for leaving, we all looked back fondly upon many aspects of our military careers. In this study, the earliest leavers had served at least 12 years which means that everybody interviewed had succeeded in the military and had stayed for a long period of time. We all shared many experiences to be proud of, to laugh about, and to reminisce that meant that we were able to look back on our careers with rose-tinted spectacles. This positive perspective outweighed the tension commonly felt towards the end of our careers. We remain loyal towards the forces, and to other veterans in general, but identify most closely with fellow healthcare professionals. There is a saying in the navy, "you can take Jack out of the navy, but you can never take the navy out of Jack". Everybody I talked to still had their military identity within them, and the same seems to hold true when I talk to other veterans in everyday life. This means that although we all left the forces in the middle of our working lives, some would have stayed for their entire working lives given a chance. But they couldn't, which meant that eventually effort put into military work was no longer going to lead to promotion, monetary gain or new qualifications and we all experienced this. Then we all pressed the buttons on a computer screen and ended our careers. So, when this happened to me, it felt like my turn. Just like watching the water pass across the riverbed, my moment had passed, and my journey to the sea needed to continue.

4.6.2 Adjustment

With the decision made to leave, there came a period of adjustment. This was a triple whammy of uncertainty about the process of leaving and the starting of new employment, insecurity in the workplace, and a loss of identity. Most people reported a period of adjustment that included increased anxiety or low mood. Some people had been able to develop and perform their future civilian role while still serving and before giving their notice, which may have cushioned them a little from some of the stress of leaving. However, for others, leaving meant a period of deciding how best to make use of resettlement funding for further training and job hunting. There were mixed views about this resettlement process with some finding the workshops, courses, and job fairs useful and others making little use of them. I fell into the latter category and could not work out how to make use of the available funding and courses.

Having spent time during their military careers drafted to different geographical locations with or without their families, most people left the forces for greater stability and security for the future. All participants had invested many years in the forces and had flourished. Leaving was a time of uncertainty that involved navigating bureaucratic processes, a long notice period, and securing civilian employment. This was particularly challenging when it coincided with civilian job insecurity that came in many forms from not fitting in with the team norms, the agreed job no longer being available, problems with emigration, zero-hours contracts, and the threat of redundancy. This was managed by problem-solving strategies to improve the situation that included improving CVs through targeted training and job experience, securing different employment, and trying hard to fit in and to progress within the organisation despite the job insecurity.

I took the view that the threat of redundancy must be common in civilian employment, observed my civilian peers' minimal reaction to it, felt anxious but decided to work harder at

being part of the team, and also to acquire additional training or qualifications that may stand me in good stead, for example, gaining a teaching qualification. I also developed a part-time job as a fall back for redundancy in much the same way as I had used part-time work in the military to give me confidence that I had transferable skills for civilian employment. Instead, it now provided confidence that I could survive beyond my current employment and provide for my family. This was very similar to the other participants who all reported contingency planning.

4.6.3 Progression

You never sit still in the forces as you are always at risk of being drafted, practising skills, training or working towards promotion; but you never sit still. Everybody learns how to navigate the opportunities this presents and feels the frustration when it does not work out the way we hoped it would, for example, being turned down for a promotion, a wrong draft or rejected for a desirable training opportunity. Everybody learns how to navigate that system, to play to their strengths and to progress. The key is to make yourself invaluable, to become credible, to be dependable, and to fit in.

The importance of this was best represented by one of the early leavers and one person whose career ended suddenly. The former was ambitious and keen to gain a senior role. However, soon after leaving, he was made redundant and learnt the importance of building credibility and networking in the civilian workplace in order to defend himself against future job losses and to create opportunities. The latter was on a zero-hours contract and trying to gain full-time employment in his chosen field. Again, to develop a full-time role meant being liked and well regarded. Soft skills were paramount in both cases in order to develop positive work relationships. To achieve this, they both sacrificed work-life balance and played the long game for their careers through self-sacrifice and relationship building in the short to mid-term. When faced with adversity and uncertainty at work, I defaulted to the same strategy which was to sacrifice work-life balance for the team, help as much as possible, and try to build a reputation

as somebody who could be depended upon to deliver the task at hand. This resonates with my training experiences in the military; whether it was basic training, leadership training or deployment training, the principal was always the same. The principal was to act in the best interests of the team because a resilient team benefits all the team players.

Everybody felt that they had developed a set of military values that had helped shape their identity and were useful. More specifically, values such as punctuality, smart dress, and working hard were deemed important and associated with being ex-military. Clearly, these attributes are not exclusive to veterans, yet many reported being able to identify other military personnel and being drawn to them, on occasion, either in work or socially. It would have been easy for me to fall into an entrenched position with this, after all, I still write my dates and times in a military-style, but I rarely speak using military jargon. However, I now feel that for me to maintain a strong military persona would be of limited worth. Amongst the other people that I talked to, the degree to which people maintained a military identity was on a continuum. I think that I was at the lower end, which was probably also the case whilst in the forces too. At the other end of the continuum, was opting to join the reserves or being active within a veterans' organisation. Wherever people sat on this continuum, a common message was that civilian employers rarely cared about what we had done in the military or that part of our identity. This may be because we were employed within healthcare settings and healthcare is well established in the civilian workplace. As a consequence, civilian healthcare settings are not dependent upon a veteran labour force, and our healthcare professional persona may be valued more than our military one.

I now think that my military experiences are beginning to feel like war stories to be told to grandchildren, as opposed to fundamental experiences relevant to my civilian work role. Progression has been about adapting values, culture, and language to a new setting and forming a new identity shaped not only by previous healthcare and military experience but importantly by new civilian ones too. Reflecting upon this, I have not taken a "stand-easy, gone to scran or drank a wet" since I left. Nevertheless, I do know most other veterans in my workplace and,

occasionally, I meet them in a coffee break (stand-easy), we go for lunch (scran), or we get a hot drink (wet). Previously, I highlighted punctuality, smart dress, and working hard as behaviours consistent with military values. Yet, I am sometimes late for meetings, rarely dress smartly, and now use language that would have been unfathomable to me previously. With regards to working hard, my new reality is that everybody does that, not just veterans.

Seeing the strengths of my civilian colleagues and my military peers, whilst noticing that these are not mutually exclusive is a shift in thinking. I have let myself become more distant from my military past and others in this study have chosen to do the same but to greater or lesser degrees. As I focus upon my current work role, performed by me as a civilian healthcare professional who once worked in the military, I realise that being a veteran remains part of all of us and contributes to who we are in a civilian workplace. However, it does not need to exclusively define my civilian work identity, as we all get to shape our future selves, the jobs we do, the way we act, and what we say. This feels forward focussed, as opposed to dwelling on the past, and it feels like progression.

4.7 Conclusion

This chapter has reported the findings from a Heuristic Inquiry into the experience of healthcare workers transition from military to civilian employment. The findings are the product of my interpretation of the experience of career transition as an insider researcher. As such, I have been transparent about my personal experience of transition and how this informed the interpretation of my conversations with other veterans. This led to a creative synthesis which represents what I now understand about how military healthcare professionals experience the transition into a civilian work role.

For me, while leaving was voluntary, it happened approximately four years prior to my contract ending, in midlife, when civilian employment opportunities seemed better than military alternatives. My civilian qualifications and transferable skills as a mental health nurse contributed positively to my employability. By comparison, the lengthy notice period and the

need to be granted permission to leave led to uncertainty and weakened my negotiating position for my new civilian contract. There was job insecurity in the new workplace made worse by minimal work-based networks in the new location. Therefore, in order to meet the demands of my new place of work, it was important to build new networks and to continue to develop myself professionally.

The people interviewed had either left halfway through their military career, hit a glass ceiling, were ineligible for a career extension or completed a full career. Despite these different exit points, there were a number of shared experiences. Interestingly there seemed always to be a moment of tension or conflict where military demands and personal desires no longer matched, leading to a tipping point for leaving. This often resulted in uncertainty and a sense of insecurity that led to a period of emotional turmoil. Those healthcare professionals without civilian qualifications found that this impacted upon employability. However, people were very good at adapting, planning, and taking action to improve their circumstances. All identified as veterans and saw some implicit value to this, but most felt that their military experience was less important to their civilian employers than they had expected it to be.

A final creative synthesis of the information gathered about the transition to civilian employment reworked the experience of both the participants and myself into new themes that were about the tipping point for leaving, adjustment to a new role, and progression in the new place of work. To conclude, despite most healthcare professionals holding transferable skills, the process of career transition was challenging. It involved an initial triple whammy of uncertainty about leaving, insecurity in a new job and loss of identity. Ultimately, most people had adjusted to this and identified a niche for themselves in which they had the potential to flourish.

5 Discussion

5.1 Introduction

Military healthcare professionals are a unique group of non-combatants who serve within the armed forces and about whom there is little research. No previous research has specifically explored the experience of the ~125000 veterans who served as UK military healthcare professionals. My position as a veteran and as an insider researcher has revealed new insights about the experiences of self and other military healthcare professionals' transition to a veteran in civilian work. More specifically, how we experienced a divergence in values away from military service and an explanation for why adjusting to civilian employment impacted upon mental wellbeing. This is important because it may affect how healthcare professionals prepare for a midlife career change, retention within the armed forces, and how civilian employers support veterans. Recommendations for veterans, the armed forces, and civilian employers are outlined within the conclusion chapter. This discussion chapter draws upon previous military and civilian literature in order to interpret the research findings, how this learning relates to the theoretical framework, and the contribution to knowledge before outlining the strengths and limitations to the research design.

5.2 Discussion of the Findings

As a military healthcare professional leaving the armed forces, and an insider researcher, I carried out a Heuristic Inquiry in order to gain greater insight into the experience of healthcare professionals' transitioning into a civilian work role. This involved three phases of data collection and analysis that focussed upon my experience of transition, what I learnt from other people's experiences, and a creative synthesis that represents what I now think that I understand about military healthcare professionals' experience of a midlife career change. The themes identified within the creative synthesis were about the tipping point for leaving, adjustment to a new role, and progression in the new place of work.

5.2.1 The tipping point

All of the participants described a tipping point for leaving the military that typically included a period of conflict or tension between the needs of the person and those of the organisation. For some, such as for the early leavers and those experiencing a glass ceiling, this was the result of shifting career opportunities, and for others, it resulted from the end of the employment contract. For all participants, this tipping point precipitated a midlife career change that was inevitable because military careers tend to end in the early forties. The duration of military employment experienced by the participants, which was typically greater than 12 years, suggests permanency that may no longer exist in the same way in the general labour market where multiple job changes seem more common (Macaulay, 2003). A study of people in lifelong careers, for example, teachers and police, identified that financial commitments and age might predispose somebody to remain in their chosen career (Howes & Goodman-Delahunty, 2015). In addition, long service as an employee can lead to a strong identification with an organisation (Matzuo, 2016). In common with other military studies, the participants and I identified strongly with the armed forces. We acted like long-term employees with established and lasting military identities, enjoying a long-term career, and had limited experience of seeking new employment. However, we all found that our contracts were predestined to end mid-way through our working lives. What this thesis adds is how we prepared for this inevitable change and experienced a tipping point for leaving.

Bolstering employability was discussed in the literature review chapter, and some UK veterans reported developing transferable skills (Walker, 2013). Wider research suggests that one protective factor against unemployment may be educational and vocational training as, even in a disadvantaged group of service leavers, this seemed to be associated with improved outcomes (van Staden et al., 2007). Most participants in this thesis utilised qualifications and skills accrued during their military career, particularly nursing and paramedic qualifications. In addition, approximately half of those interviewed, and I, had identified our future employment prior to leaving, and all these individuals had transferable civilian qualifications. This seems to

confirm that developing transferable skills and planning for the future was a useful strategy for serving military healthcare professionals to bolster their future employability.

In Chapter 1 it was suggested that membership of reinventive institutions such as the military are typically perceived as a positive and transformative life experience, with the new military professional identity becoming a dominant facet of a person's social identity (Scott, 2015). Given that many participants reported a divergence in skills and values leading to the potential for conflict and unhappiness, it seems possible that the perception of the military institution as transformative and life-fulfilling may not be a static construct and could be dependent upon factors such as career stage, military experiences or competing demands from other roles. Neary (2014) suggests that, because professional identity can be a composite of different concurrent roles, how people perceive and communicate their professional identity to others may not straightforward. Furthermore, it may be that the military component is a fragile and transitional element to a person's overarching professional identity that involves becoming a military person, being a military person, and then undoing a military identity dependent upon where a person is in their military career pathway (Walker, 2013). This thesis indicates there may be a shift in professional identity towards the latter stage of a military career as people reach a tipping point to a midlife career change.

For me, the decision to leave and the shift in identity was a slow process of increasing awareness of reducing opportunities in the military and a disconnect between organisational and personal values. Similar to the experiences of some other participants, this was strengthened by holding qualifications and a skill set that was of value beyond the military environment. This is in common with research into MBA students that suggests a growing disconnect between an employee's desires and the opportunities offered by their current employer (Muja & Appelbaum, 2012). This disconnect may be exacerbated when the employee perceives themselves as overqualified for their existing role and experience distress or dissatisfaction (Fine & Nevo, 2008; Johnson & Johnson, 1996). By comparison, maintaining a good employee-employer fit and ensuring adequate career development opportunities are potential strategies

for retention (Cloutier, Felusiak, Hill, & Pemberton-Jones, 2015). This is important because the armed forces face challenges with both recruitment and retention but do not have a clear picture of the reasons (Morse, 2018). My experience, and that of many of the participants, was of a growing divergence in skills and values that resulted in the potential for increased conflict or unhappiness in the workplace. In addition, we started to make comparisons with alternative civilian employment opportunities that eventually tipped us towards having confidence in our employability in the civilian labour market, taking action, and leaving.

5.2.2 Adjustment

Work-related stress can be defined as the employee perceiving the challenges placed upon them by the demands of their work situation as having the potential to exceed their ability to cope (Dewe, 2000). We all experienced a period of uncertainty when leaving the military and starting civilian employment that led to self-doubt about career decisions and how we were going to manage. Consistent with the idea that new joiners to an organisation experience stress and uncertainty (Sluss, Ashforth, & Gibson, 2012), the participants in this thesis reported that uncertainty in the new workplace and loss of identity resulted in periods of anxiety and low mood.

Identity loss may reflect both the experience of a shift in professional identity as we adjusted to the new workplace and, as discussed in the previous section, the fragility of military identity when leaving a reinventive institution such as the armed forces. In part, this may explain the participants and my struggle with the general adjustment to a civilian role. However, we also experienced additional organisational stressors related to leaving the UK military, as opposed to joining the new civilian organisation, which were navigating military bureaucratic processes and a long notice period. These additional organisational stressors that were related to the process of leaving the military may have presented as an additional challenge and resulted in increased anxiety.

Once we had left the UK military, we were then faced with the challenge of adjusting to a new employment setting, team dynamics, and processes. This seems consistent with the wider literature, which also suggests that learning new processes can impact negatively upon newcomer adjustment (Sluss et al., 2012). More specifically, incongruency between organisational and new employee goals may exacerbate the risk of difficulties adjusting to a new job (Lu & Tjosvold, 2013). By comparison, role clarity and trusting working relationships may mitigate the impact of work-related stress (Lang, Thomas, Bliese, & Adler, 2007). For the veterans in this thesis, specific stressors in the new organisation included the threat of redundancy, zero-hours contracts, and changes in the expected job. These stressors may be examples of the employer's requirement for an efficient labour force and the veterans' desire for job certainty resulting in less clarity and less trust in the employer-employee relationship than was expected. This workplace uncertainty led to increased work-related stress and anxiety for both other military healthcare professionals and myself.

One way to reduce workplace uncertainty and to facilitate adjustment or wellbeing may be for new employees to adopt the new team or organisational goals (Beus, Jarrett, Taylor, & Wiese, 2014). This view is supported by Sluss et al. (2012), who suggested that stress drives the new employee into seeking to internalise new values and to make sense of new organisational processes. Veterans in this thesis valued being team players and were proactive about adopting new team goals as a way of reducing stress and managing workplace uncertainty. This strategy is congruent with previous research that reported new employees' motivation to adjust to the team norms might be enhanced by previous work experience (Tan, Au, Cooper-Thomas, & Aw, 2016). Military personnel are regularly posted to new teams in different geographical locations and are used to adopting the goals of those new teams. Within this thesis, participants reported an ability to get along with people and to communicate effectively as important, which seems consistent with both their previous military work experiences and a transition strategy that involved adopting new team goals and becoming an effective team player.

An additional aspect to teamwork and networking, highlighted within previous research, was that higher ranking military personnel reported better political or soft skills within the workplace and lower levels of self-reported stress (McAllister et al., 2015). The concept of soft skills resonated with most of the participants in this study, including myself, but did not seem to be dependent upon rank. McAllister et al. (2015) hypothesised that, in addition to rank related military experience, other factors such as academic qualifications might contribute to better networking skills. Of note, many of the participants interviewed held qualifications at both undergraduate and postgraduate level despite their rank. These qualifications seemed to act as an enabler or passport to new career opportunities which were then combined with proactive efforts at building new working relationships that were informed by our existing team working skills. Indeed, some reported this as a launchpad for job roles that either would have been or were denied to them within their previous military employment. However, when this was not the case, it seemed to be missing qualifications and not soft skills that were perceived as the barrier.

It has previously been reported that fitting in with a civilian environment was more difficult if veterans held a very fixed military identity (Binks & Cambridge, 2018), whereas effective leadership and management within the civilian workplace has been associated with an easier adjustment to a civilian work role (Bennett et al., 2015). Within this thesis, managers with an understanding of the participant's background were viewed favourably, and some participants orientated themselves towards work roles where fitting in was more likely because of an association with the military, for example, specialist medical roles favoured by veterans or a new manager with military connections. Previous literature about how military personnel thought their new employers viewed them indicated that veterans were seen as set in their ways and hard to manage (Binks & Cambridge, 2018). This was not borne out in the current thesis as the participants and I emphasised fitting into our new networks, adjusting to civilian norms, and focusing upon what was important to the new employer.

This strategy for adjusting to the new workplace seems consistent with Simon's (2004) suggestion that people actively seek an equilibrium between personal identity (micro) and the new organisational identity (macro). In addition, Burke (2009) suggests that identity is dynamic and can shift across the lifespan, with different facets of identity such as personal, role or group coming to the fore dependent upon the context or environment. The strategies used by other participants and myself to adjust to a civilian workplace, that included adapting to civilian norms and refocusing on what was important to the new employer, may demonstrate our acceptance and openness to non-military facets of our identities becoming more dominant as we transitioned to our new working lives.

What seemed of value to civilian employers was seldom military experience or military identities, which resonates with a previously reported shift in identity that involved reconstructing the professional self to better fit into the civilian environment (Elliott et al., 2017). A potential obstacle to this shift in identity and adjustment to a new workplace was that civilian employment had previously been reported as alien, less purposeful, and a job not a lifestyle (Beech et al., 2017; Dirani, 2017). This did not come across with the interviewed participants, as most of them reported their anxiety settled over time and indicated that their civilian roles had a purpose, value, and meaning. However, for some, when there was a mismatch between a civilian employers' understanding of the military background and the participant, then this was reported as impacting negatively upon their civilian work experience. This seems to support the view that when people are able to adjust to a role or work identity this can impact positively upon self-esteem and people feel more valued, competent, and fulfilled (Burke, 2009).

5.2.3 Progression

The armed forces are a progression focussed, hierarchical organisation where personnel are actively encouraged to seek out promotion at various stages in their career. In common with their military experiences, and following a period of adjustment, participants talked about

progression within their new civilian organisation. Building new relationships was considered to be a component of adjusting to a civilian workplace, but maintaining relationships and continued networking was also relevant to career progression. Building horizontal and vertical networks and effective communication may be useful as mechanisms for newcomers to thrive in a new organisation and can have a positive effect upon wellbeing (Fang, McAllister, & Duffy, 2016; Volmer & Wolff, 2018). This tactic may be associated with improved career progression evidenced by increased earnings (Wolff & Moser, 2009). Networking with more senior employees, such as line managers, may lead to developmental opportunities within the new organisation (Fang et al., 2016). However, the authors suggest that horizontal networking with peers was also recognised as an important alternative, especially when senior figures are more difficult to access. This seems consistent with the other participants and my recognition of the value of teamwork and building relationships as ways to consolidate and strengthen our position within a new organisation, particularly when faced with the threat of job instability or uncertainty in the workplace.

One possible threat to such tactics for adjustment and progression was low self-esteem, as this may result in difficulties in building networks (Fang et al., 2016). An additional factor amongst military personnel was an expectation that military experience and values would be both transferable and important within the civilian workplace, which was reported as an unrealistic assumption in previous research with UK veterans (Walker, 2013). This unrealistic assumption was shared by both myself and many of the participants, who identified that military experiences were of limited value to healthcare workers once they transitioned to a civilian workplace. This meant that, at times, some of us experienced a loss of confidence or self-doubt that was precipitated by stressors within the civilian workplace combined with minimal transferable job experiences. Interestingly, people adjusted to this by applying soft skills such as relationship building and teamwork, even when this felt challenging.

Personal growth and development featured in most participant's stories about their future progression outside of the armed forces, including continuing professional development

(CPD) activities such as gaining new qualifications or skills. Valuing qualifications is consistent with the general experience of being a healthcare professional, as CPD is often a requirement of the role. An example of this is nurses, who generally hold positive views about the concept of CPD and recognise that it is a requirement for their continued registration (Hughes, 2005; NMC, 2015). When people leave employment, it has been suggested that they seek retirement, identify a bridging job before retirement, or start a new job (Feldman, 1994). This is of interest because the language I use is about retiring from the military. Indeed, many of the other participants and I receive a pension, yet only one participant reported working part-time with the remainder retired from the forces but either in or seeking full-time employment. This might explain why several of us viewed qualifications or CPD as important to our civilian work roles and progression.

The process of resettlement as a CPD opportunity, designed to bolster employability or aid career progression, was viewed poorly by many and to lead to minimal transferable qualifications for health care workers. This is different from most military personnel transitioning through the resettlement process, who report a favourable opinion about the training received (Defence Statistics Health, 2014). However, it is consistent with the view that the resettlement process is akin to a 'sheep dip' approach to preparing people for leaving, as opposed to a bespoke career support service (Strachan, 2014). This viewpoint was most pronounced for one participant who fitted the sudden ending typology and did not hold transferable civilian qualifications. For this person, there was a sense of frustration that neither their military training nor their resettlement adequately met their educational needs. It also resonated for those of us with civilian qualifications, but this was more that we struggled to identify how the resettlement training opportunities would build upon existing qualifications and help us to develop and progress within our future civilian careers.

5.3 Theoretical framework

The Transtheoretical Model of Midlife Career Change is the broad theoretical framework that underpins this thesis. Two military focussed models were also discussed in Chapter 2, Identities-Of-Becoming (Walker, 2013) and Reverse Culture Shock (Bergman et al., 2014), but not selected because they maintained a more narrow focus. Before drawing upon the findings from this study and considering what can be learnt about the Transtheoretical Model, this section will first consider what the research findings might contribute to knowledge about these other models.

The Identities-of-Becoming model explored the idea that the meaning attached to past work experiences in the military may be used to predict future experiences within civilian employment. Walker (2013) found that service personnel at all career stages were naive to what their future civilian role might entail and constructed unrealistic future civilian identities. Many participants in this thesis reported that their previous military work experience was of limited value within their new roles, which supports Walker's (2013) prediction that military personnel held naive expectations of future civilian employment. This current study expands upon how veterans managed this incongruency once in the civilian workplace by using soft skills such as teamworking and seeking to build credibility within their new work environment.

The Reverse Culture Shock model described transition as a process of reintegration to a civilian culture following a period of integration into the military, whereby there may be an initial period of psychological distress and difficulty followed by adjustment and recovery (Bergman et al., 2014). The authors suggested that longer service may lead to a smoother transition because people would have a stable and positive foundation upon which to carry out a career change. The focus of this thesis was healthcare professionals who had all served for long careers and were often well qualified. Rather than a smooth transition based upon a stable foundation, this thesis concluded that there was an initial triple whammy of uncertainty about leaving, insecurity in a new job, and loss of identity that impacted negatively upon many participants and my psychological wellbeing for a period of time. However, consistent with the

Reverse Culture Shock model, we were able to overcome this initial distress, to adjust, and to re-integrate into civilian life. The triple whammy might help to explain why military personnel experience a period of distress when reintegrating to civilian life.

The Transtheoretical Model has previously been applied to civilian career change and is the central model that underpins this thesis. More specifically, the model has been utilised within organisational settings to support employees in changing behaviours (Prochaska, Prochaska, & Levesque, 2001), explaining the stages and process of a voluntary midlife career change (Barclay et al., 2011), and retirement from sport (Park et al., 2012). The Transtheoretical Model includes several stages of change, beginning with a person as naive to the idea that change is going to occur or feeling some discontent but uncertain as to why. The model suggests that this can lead to a period of contemplation about current job and career options, resulting in exploring alternative jobs options before taking action (Barclay et al., 2011). This was consistent with the participants and my experience, as we all reported a tipping point that precipitated the decision to leave which was typically associated with a divergence of values that had previously been in sync with the military organisation. Interestingly, this period of contemplation and preparation was of an indeterminant length with some developing themselves for civilian careers several years in advance but not acting until opportunities as a civilian outweighed the military alternative.

One further change process within the contemplation stage of the Transtheoretical Model is for the individual to begin to positively re-evaluate how change might promote their happiness and wellbeing (Prochaska et al., 2001). When these opportunities to prepare for departure during a military career were not available or were missed (sudden ending typology), then there seemed to be less time to re-evaluate the benefits to leaving and this seemed to impact more negatively upon wellbeing.

The Transtheoretical Model also describes a period of adjustment and stress at the action stage of starting a new job, resulting in a need to manage stress, stabilise the situation, and to define a new identity (Barclay et al., 2011). For the interviewed veterans and myself,

employment. This may have also been exacerbated by a change of identity and realisation that previous experience was of less value than originally assumed. This is similar to the experience of elite sports personnel at the action stage of their career change, who also described feeling unprepared and lacking relevant life experiences or skills (Park et al., 2012). Several strategies were employed to manage this uncertainty and stabilise the situation, for example, the veterans described building credibility and positive new work relationships as a mechanism for reducing uncertainty and managing the process of adjustment. This seems consistent with an affinity to teamwork as a route to success that is instilled throughout a military career and forms part of the core military values. Within the Transtheoretical Model, building co-worker relationships has been viewed as part of the consolidation or maintenance phase (Barclay et al., 2011). Within this thesis, it would seem that such strategies were also a mechanism for reducing uncertainty and establishing ourselves in new work environments.

5.4 Contribution to knowledge

This is the first study to explore the experience of healthcare professionals' midlife career transition from military to civilian employment within the UK. This is important because this is a discrete population within the UK armed forces about whom there is limited research. It is also the first military study to adopt the position of an insider researcher, by deploying a Heuristic Inquiry methodology, thus offering a unique perspective upon leaving the forces. The previous section discussed the findings in relation to the broader literature and the theoretical framework. Informed by this discussion, I consider that the contribution to knowledge about veterans' career transition was, firstly, about diverging values when leaving. Secondly, how veterans experienced a triple whammy that impacted negatively upon wellbeing during the transition period. Thirdly, how the transtheoretical framework applies to military healthcare professionals experiencing a midlife career change. Finally, the use of Heuristic Inquiry offers

a unique perspective on veterans' midlife career transition and contributes to a wider understanding of the application of this methodology.

5.4.1 Diverging values

No previous study has explored why veterans opted to leave the UK military following a period of long service. This thesis contributes to current knowledge by suggesting that, prior to leaving the armed forces, military healthcare professionals may become increasingly aware of diverging skills and values, leading to increased unhappiness. This divergence in values contributed to a tipping point for choosing to leave either in advance of the inevitable midlife end of military employment (early leavers and those experiencing a glass ceiling) or instead of accepting a short, fixed-term contract extension (full career). This may have implications for retention of healthcare professionals within the armed forces, as this tipping point represents an opportunity to promote convergence of skills and values that could be achieved via promotion, the establishment of specialist roles or enhanced pay. It may also be relevant to future veterans who could prepare for this tipping point by taking steps during their career to strengthen their future employability through the acquisition of relevant skills, civilian work experience, and transferable qualifications.

5.4.2 Triple whammy

Previous research about adjustment to civilian employment has presented a mixed picture ranging from an uneventful process (Bennett et al., 2015) to one that presented as more challenging (Beech et al., 2017; Elliott et al., 2017). This thesis found that adjustment tended towards the more challenging end of this continuum, which builds upon previous research that suggested military personnel shift from a stable and predictable military environment to a civilian one that involves increased uncertainty (Zinn, 2011). In this study, other healthcare professionals and I experienced uncertainty and anxiety both within the process of leaving and when joining a new civilian organisation. The civilian workplace involved a period of

adjustment to a civilian work identity and shared team goals that impacted negatively upon wellbeing. This may have been exacerbated by the process of leaving because the military organisation imposes long notice periods and complicated processes. This was described in this thesis as a triple whammy of uncertainty about leaving, insecurity in a new job and loss of identity.

Reflecting upon the negative framing of this experience as a struggle with adversity depicted as a triple whammy, this captures a phase within the transition process that was relevant to me temporally and recorded within my journal during the first six months of leaving the military. Interestingly, struggle with adversity can lead to the potential for personal growth as people make sense of themselves in relation to an adverse experience (Joseph & Linley, 2006). Earlier in this chapter, I highlighted that personal growth and development featured in most participants' stories about their future progression outside of the armed forces. In previous, non-military research, it has been reported that the degree of personal growth may be associated with the level of engagement in new ventures or opportunities (Roepke & Seligman, 2015). This resonates with the participants and my experience as we were all motivated to adjust to this new venture of civilian employment and to progress with our careers. It may be that some of our previous work experience of being flexible when joining new teams in the forces, and our focus upon engagement with our new civilian workplace, can aid this process of adjusting values and shifting identity towards the goals of a new work environment. This thesis contributes to a better understanding of why all of us experienced a period of mental distress but also how we overcame this initial triple whammy and experienced the potential for personal growth whilst adjusting to a civilian workplace.

5.4.3 The Transtheoretical Model

This is the first time that the Transtheoretical Model has been applied to midlife career change for both UK veterans in general and military healthcare professionals specifically. The links between the Transtheoretical Model and military healthcare professionals' experience of

midlife career transition were: the concept of reaching a tipping point that involved recognising a shift in values (Precontemplation/Contemplation); exploring opportunities in civilian environments (Preparation); reaching a decision to leave (Action); adjusting to a new work environment and identity (Action); building new working relationships and civilian work experience (Action/Maintenance); as well as establishing and maintaining credibility as an employee (Maintenance). Of note, at the point of leaving there seemed to be an initial triple whammy of uncertainty about leaving, insecurity in a new job and loss of identity that impacted negatively upon the positive foundation expected from long service and exacerbated the degree of distress experienced when integrating into civilian work roles. This triple whammy may need to be accounted for as a risk factor within the action stage of the Transtheoretical Model.

5.4.4 Heuristic Inquiry

A detailed description of Heuristic Inquiry, it's philosophical underpinnings, and associated research methods can be found in Chapter 3. In Chapter 3, it was argued that, as an insider research, I was able to capture my personal experience of leaving the military for civilian employment and to use my networks to access a hard to reach and geographically disparate population. The literature review in Chapter 2 did not identify any previous studies about how armed forces personnel experience the transition from military to civilian employment that positioned the researcher within the study. This thesis provides a template for how to apply a Heuristic Inquiry methodology to study military or veteran themed phenomenon when they are personally relevant to the researcher and that the researcher is actively being exposed to whilst the study is being carried out.

When considering the future application of Heuristic Inquiry, this methodology may be applicable to a variety of military and veterans' experiences where in vivo qualitative data would be hard to gather by outsiders due to the arduous nature of the setting or because the population are geographically disparate and hard to reach. Reflecting further upon my application of this methodology within a military context, leaving the armed forces and

transitioning to civilian employment proved to be both a deeply personal experience and one that I held in common with other military healthcare professionals. As an insider researcher, I was fully immersed in my own experience of becoming a veteran and consider that it would have been difficult to maintain any real distance from what was happening to me. Moustakas (1990) highlights that this immersion in a personally relevant experience is a distinct characteristic to Heuristic Inquiry when compared to other qualitative methodologies, such as phenomenology, that distance the researcher and separate their personal experience and values from the findings.

When I was actively experiencing the process of transitioning to civilian employment, I was also searching for a better understanding of what I was going through, and it felt like a natural step to ask veterans with a similar military background about their experiences. Heuristic Inquiry is a methodology that results in a perspective upon a phenomenon that can be informed by knowledge gained from the researcher's lived experience and the experiences of others (Hiles, 2012). The data gathered from self and other participants is synthesised by the researcher within a new personal construction of what the researcher grows to understand about the phenomenon (Douglass & Moustakas, 1985). This Heuristic Inquiry simultaneously captured my temporally bound experience as an insider researcher and the universal themes and meanings that I discovered that I held in common with the other participants. For me, this represented a once in a life opportunity to contribute to what is known about military healthcare veterans' experiences of transition from a unique perspective that led to new insights about diverging values, the triple whammy, and the Transtheoretical Model described earlier in this section. Thus, this thesis advances knowledge about the application of Heuristic Inquiry in a military setting by demonstrating that it may be a relevant methodology when including the researcher's lived experience as a primary data source that can offer a unique, insider perspective upon the experience of career transition but may also be applicable to other military or veteran themed experiences.

5.5 Strengths and limitation of the research design

Healthcare professionals leaving the military are a geographically disparate population and as such, are difficult to access. In order to overcome this, as an insider researcher, I made use of my networks via social media to access participants, which means they had links with the researcher that may have increased the commonality of the findings. Whilst this was a pragmatic approach to accessing a geographically disparate population, interviewing participants with links to the researcher is not unusual within specialist areas, and seeking out commonalities between participants is an acceptable approach within Heuristic Inquiry (McConnell-Henry, James, Chapman, & Francis, 2014; Moustakas, 1990). However, Heuristic Inquiry also has the potential to focus on the differences between the researcher's experience and others (Sultan, 2018). Whilst this was not the focus of the current study, accessing participants without a link to the researcher may have resulted in identifying more differences within the findings. Therefore, it could be argued that the findings from this thesis represent one potential truth about military healthcare professionals' midlife career transition amongst multiple realities (Polit & Beck, 2012).

Because the other participants were geographically distant to the researcher, data collection was based upon a single interview conducted via video conference. Additionally, two of the participants opted to respond to the request for an interview with a written response to the proposed interview themes. Whilst this reflects the flexible nature of qualitative research (Polit & Beck, 2012), it does highlight a limitation to the data gathering method. A single interview is an accepted approach to Heuristic Inquiry with the aim of facilitating the emergence of ideas and feelings related to the phenomenon (Moustakas, 1990). This emergence of ideas through dialogue was not possible with the written responses, which means that there was not an opportunity to clarify meaning or to explore ideas with those two participants. In addition, within Heuristic Inquiry, it is possible to engage in an expanded dialogue with participants that could include learning about their personal experience via access to personal documents, diaries, music, art etc. (Casterline, 2009). Given the organisational focus, where available,

asking for access to previous military performance appraisals may have added an extra dimension to the learning. Although, in order to achieve this, it may have been necessary to recruit participants prior to them leaving the forces which was beyond the scope of this study.

I was a military healthcare professional leaving the forces for civilian employment and shared a similar experience of this phenomenon to the people I interviewed. A strength to Heuristic Inquiry is that it places the researcher within the research as a participant and accounts for their experience of the phenomenon as central to the study (Kenny, 2012). As I was the instrument of analysis within this study, my perspective will have shaped my interpretation of the other participant's experiences (Sanjari, Bahramnezhad, Fomani, Shoghi, & Cheraghi, 2014). Within qualitative research, there is scope to be reflexive and to illustrate how the researcher makes sense of the knowledge they are creating (Adams, Jones, & Ellis, 2015). In this study, rather than avoiding my personal bias, the aim was to make it explicit by presenting the findings from my personal experience and then applying these as a priori themes to the analysis of the participants' experiences. By doing this, it is hoped that the reader might better understand how the creative synthesis of these findings was developed, more specifically, how my subjectivity shaped the way I made sense of the experience of military healthcare professionals' midlife career transition.

Given that Heuristic Inquiry is a subjective research design, it should be recognised that it will not lead to generalisable findings (Sultan, 2018). However, one could argue this is the case for all qualitative research methods, where the emphasis is upon transferability instead of generalisability (Bryman, 2012). Because the researcher was placed central to the study, a limitation to this approach was that it might have dampened other people's voices and is closer to autoethnography than other qualitative methods. This seems consistent with Heuristic Inquiry because I was an insider researcher and the study situated my experience as central within the research (Kenny, 2012). However, other qualitative research approaches, such as phenomenology or narrative research, might be better placed to make other people's experiences more central to the study and would not be so dependent upon my role as an insider

researcher. This is not to say that my interpretation of the experience within a Heuristic Inquiry cannot lead to a credible perspective or possible truth about midlife career transition. Transferability within Heuristic Inquiry can be at the micro-level of several readers, one reader or even how I now transfer my learning to a new organisational setting (Sultan, 2018). With this in mind, the concluding chapter will end with a reflective account of what I have learnt from this experience and how I now feel about having carried out this study.

5.6 Conclusion

The discussion chapter aimed to summarise and interpret the research findings. It was generally observed that both other participants and I experienced a tipping point where the needs of the individual outweighed those of the armed forces. This involved a divergence of values and skills and ultimately a decision to leave the military. We also experienced a triple whammy of uncertainty about leaving, insecurity in a new job, and loss of identity that impacted upon wellbeing for a period of time, nevertheless, most people adjusted and identified a niche for themselves. These concepts of diverging values and the resulting triple whammy when adjusting to a civilian workplace represent the main claim for a contribution to knowledge within this thesis. In addition, the triple whammy concept may need to be accounted for as a risk factor for veterans within the action stage of the Transtheoretical Model. The final contribution to knowledge is that Heuristic Inquiry seems to be a relevant methodology when military or veteran researchers are living the experience that forms the focus of their research.

6 Conclusion

6.1 Introduction

This is the first study to explore the experience of healthcare professionals' midlife career transition from military to civilian employment within the UK. This concluding chapter provides a summary of the thesis and recommendations for veterans, organisations, and researchers. Finally, it will end where it began, with me, a military healthcare professional and veteran leaving the armed forces and adjusting to civilian employment.

6.2 Thesis summary

The aim of the thesis was to gain greater insight into how military healthcare professionals experience the transition into a civilian work role informed by the author's and other people's experiences. The research question was: What do I understand about the experiences of self and other military healthcare professionals' midlife career transition to civilian employment? This led to four research objectives which were: 1) To identify themes from the researcher's own experience of transition from military to civilian employment; 2) To explore these themes in relation to other veterans' experience of transition from military to civilian employment; 3) To present the data from self and others experiences of transition from military to civilian employment within a creative synthesis that represents key aspects of the phenomenon; 4) To make recommendations for future research and workplace strategies to promote successful career transition for veterans.

The literature review and theoretical framework chapter identified what was already known about how armed forces personnel experience the transition from military to civilian employment. It seemed that veterans were likely to be in employment but that the reality of this employment was different to their pre-retirement expectations. Nevertheless, most veterans managed to overcome these challenges and integrated into their civilian roles.

The theoretical framework that underpins this thesis is the Transtheoretical Model, which suggested that veterans shifted through the stages of pre-contemplation, contemplation,

preparation, action, and maintenance during the process of transition from military to civilian work roles. While this framework had previously been applied to a civilian voluntary midlife career change, military personnel are pre-destined for an involuntary midlife career transition, and little was known about how UK military healthcare professionals experience this process of transition or what it meant to adapt to their civilian work roles.

This thesis was the first insider researcher study about midlife career transition from military to civilian employment. The application of Heuristic Inquiry to this topic resulted in a unique perspective through which I discovered three key themes that resonated with both my personal experience and with other veterans who had served long careers as military healthcare professionals. Firstly, there was a tipping point for leaving that often pre-empted the predetermined contract end date, this was followed by a period of adjustment to a new work role, and then a focus upon progression in the new place of work. Even though most healthcare professionals held transferable skills, the process of career transition was challenging, and everybody experienced an initial triple whammy of uncertainty about leaving, insecurity in a new job, and loss of identity. However, when a healthcare professional lacked a relevant civilian qualification, or transferable skills, then this impacted more negatively upon their employability and wellbeing. Nevertheless, most people had overcome the challenges that they faced, adjusted to their civilian employment, and identified a niche in which they had the potential to flourish.

This thesis discovered that veterans who had served a long career experienced a divergence of values and skills away from the needs of the military service. This seems consistent with the precontemplation/contemplation stages within the Transtheoretical Model and may explain why military healthcare professionals then reached a tipping point and left the armed forces. In addition, the Transtheoretical Model describes anxiety or stress when adjusting to new work roles within the action stage of change. This thesis helps understand why other veterans and I experienced anxiety and distress when leaving, which was the triple whammy of uncertainty about leaving, insecurity in a new job, and loss of identity. For veterans, this triple whammy may be a risk factor for increased mental distress within the Transtheoretical Model.

This thesis explains how we mitigated the risk through the acquisition of civilian skills and qualifications before leaving the military. Finally, it describes how we then sought to overcome the effects of the triple whammy in the civilian workplace by building credibility, networking, teamwork, and flexibility towards the goals and values of our new civilian work environments.

6.3 Recommendations

The recommendations in this section shall focus upon personal strategies to manage transition, organisational strategies to support the transition process, and future research. At the personal strategy level, most of the healthcare professionals held additional civilian qualifications in nursing, education or paramedical skills. This seemed like a useful strategy for promoting employability as when this was not the case there was greater dependency upon the resettlement process and increased civilian employment uncertainty. Thus, it may be useful to develop civilian qualifications earlier in a military career. It may also be helpful to target additional learning towards a future civilian career, as opposed to doing so in sole support of current military opportunities. Self-funded options could make use of the military's dedication to supporting life-long learning through a universal training allowance known as enhanced learning credits but may still involve a personal expenditure (MOD, 2017). This approach may help to mitigate uncertainty when transitioning to civilian employment and create less dependence upon a military resettlement process that was reported as ill-equipped for healthcare professionals.

A common message was the limited value placed upon previous military work experience when adjusting to civilian employment. Healthcare professionals may wish to seek out opportunities for greater exposure to civilian work experiences that are relevant to their future civilian career aspirations. This could be achieved by seeking out agency work, part-time work, voluntary or entrepreneurial opportunities in the hope of easing the transition by grounding expectations about future employment within relevant civilian work experiences. This approach may help to foster a positive civilian identity concurrent to veteran status. It may

also mitigate uncertainty in the civilian job market as veterans would have greater insight into their labour value and marketability.

At an organisational level, the tipping point for choosing to leave the military may be of interest. All participants reported a period where the needs of the service and the needs of the individual parted ways, that is, there was a divergence in values. For some, this came at the end of a contract when participants reached the decision not to extend their contract. In essence, they perceived that they had served their time and were now ready to leave. For others, remaining in the forces beyond their current contract was not an option afforded to them, and their careers ended more suddenly. However, there was a final group who felt that there were greater opportunities available in civilian employment and that their military role/rank did not adequately reflect their skills and qualifications. This group typically pre-empted the inevitable midlife end of the military employment contract. This seems to be a group that the military could seek to retain if suitable roles could be identified that reflect their skills and qualifications. In order to mitigate personnel making unfavourable comparisons and opting to leave, then the military may need to ensure it demonstrates that it values civilian qualifications and clinical skills in a way that is comparable to how it values other characteristics such as management and leadership skills.

Civilian employers may also have a role to play in supporting the transition process for military healthcare professionals. Wider research suggests that new joiners who have an identified mentor or means of support in a new organisation seem more likely to share organisational goals (Lu & Tjosvold, 2013). Military personnel are a group who have an affinity to teamwork and may be seeking opportunities to become part of their new team. Mentorship may be a strategy that would help veterans to adjust to new organisations, especially as there is the potential mismatch between their expectations about the value of military experience and the realities of civilian employment. This may help reduce uncertainty in the new workplace and to foster positive civilian identities.

This thesis has focussed upon the experience of healthcare professionals transitioning to civilian employment. However, their experience sits within the broader context of the military that they are leaving behind and the civilian organisations that they are joining. Further research could be carried out to understand the perspectives of military and civilian line managers in supporting veterans through a career transition. It may also be of interest to learn more about how healthcare professionals experience further career changes and the function of their veteran status within that process. In addition, this study has focussed upon healthcare professionals leaving the forces after a lengthy period of employment, many of whom had transferable civilian qualifications, yet still experienced turbulence within the process of transition. It seems important to find out how those military personnel in roles without civilian qualifications, but who have also served lengthy careers, might experience transition. Finally, it is beyond the scope of this study to generalise the findings to a wider population. A cross-sectional study using a survey method could test out the theory about the triple whammy leading to challenges within the process of adjustment to civilian employment during midlife career change within military personnel.

6.4 Reflection upon what I have learnt

Moustakas (1990) describes Heuristic Inquiry as a reflective, inward focusing process that leads to personal growth and transformation. My professional role as a nurse is also focused upon personal growth and development through reflection (Fook, Royes, & White, 2017). There are a number of structured models that can help with reflection within nursing. A model that is familiar to me is called Gibb's Model, which asks what happened (description), what did I feel about it (feelings), what was positive or negative about it (evaluation), how can I make sense of the experience (analysis), and what else could I have done (conclusion) (Gurney, 2013). Gibb's Model is the framework applied in the below reflection about what I have learnt from this Heuristic Inquiry.

I opted to leave the armed forces for civilian employment near the end of my military employment contract, which precipitated a midlife career change. Midlife career change is inevitable for military personnel, and most long-serving veterans leave the military in their forties. As a mental health nurse, I am part of a population of military healthcare professionals who are a unique group with the UK armed forces and about whom there is limited research. I took advantage of my position as an insider researcher to carry out a qualitative study informed by a Heuristic Inquiry research methodology and underpinned by a theoretical framework called the Transtheoretical Model.

I feel grateful to the people who agreed to be interviewed as those conversations helped me to have a better understanding of my personal experience. I am surprised at how similar our experiences were, how challenging midlife career transition felt to me at times, and how often I let people know that I am a veteran. Life has been chaotic and scary at times, and I am still establishing my civilian career. As an insider researcher, still living the experience of the phenomenon that I am writing about, I don't feel that I am able to distance myself from the experiences that shape this thesis. Heuristic Inquiry is like writing about the experience of downhill skiing while still on the slope and trying not to fall over.

Reflecting upon what has gone well, I have been able to speak to a disparate group whose experience, as veterans, is rarely reported upon. I also feel more self-aware of my personal strategy for career transition, how I manage my anxiety, and my focus upon work relationships and teamwork. I have previous experience of autobiographical research methods and think I balanced disclosure versus over disclosure adequately. In hindsight, I would have liked to have started my diary keeping earlier in the process, perhaps at the preparation stage or earlier in the action stage within the Transtheoretical Model. It was helpful to talk to other veterans, and I think including them more completely as researchers, co-constructing the findings, would offer a different perspective upon career transition to the one that I have created.

I make sense of this experience as a journey without end. I now realise that I am currently adopting similar strategies to those that I applied while serving and when leaving the

forces. More specifically, I am continuing to develop transferable skills, gain work experience, and to acquire relevant qualifications. I also think that I am still moving around the various stages of change within the Transtheoretical Model dependent upon the job-related threats or opportunities that I encounter. This last point was not captured within my findings but could form the focus of a further autobiographical or co-participant research project.

6.5 Conclusion

To conclude, this is the first study to explore the experiences of healthcare professionals transitioning from military to civilian employment within the UK. This study confirmed that the Transtheoretical Model of change, previously applied within civilian settings, seemed applicable to the process of a career change for UK military healthcare professionals. Within this model, the reasons for experiencing anxiety and uncertainty when taking action and trying to establish a new civilian role may be explained by the initial triple whammy of uncertainty about leaving, insecurity in a new job and change of identity. This would seem to impact the positive foundation expected from long service and exacerbate the initial degree of distress experienced when integrating into civilian communities. However, once overcome, most people reported flourishing within their new civilian employment, although they never fully gave up their military identity. To paraphrase one participant who said that they were an "Ex". They meant that they were ex-military and felt that they would never be a civilian but would always be an Ex. For my part, four years have now past since leaving. In many ways, I am now unrecognisable as a serviceman. I dress more casually, my beard is longer, my language has changed, and I am even a little less punctual. Yet, despite this shift, I think that I remain an Ex too.

7 References

- Adams, J. (2004). Why don't stage-based activity promotion interventions work? *Health Education Research*, 20(2), 237–243.
- Adams, T., Jones, S., & Ellis, C. (2015). Autoethnography. Oxford: Oxford University Press.
- Allen, C. (2011). Assessing the army profession. *Parameters*, 41(3), 73–86.
- Annells, M. (1996). Hermeneutic Phenomenology: Philosophical perspectives and current use in nursing research. *Journal of Advanced Nursing*, 23(4), 705–713.
- Baert, S., & Balcaen, P. (2013). The impact of military work experience on later hiring chances in the civilian labour market. Evidence from a field experiment. *Economics: The Open-Access, Open-Assessment E-Journal*, 7(2013–2037). Retrieved from https://doi.org/10.5018/economics-ejournal.ja.2013-37
- Barclay, S., Stoltz, K., & Chung, B. (2011). Voluntary midlife career change: Integrating the Transtheoretical Model and the Life-Span, Life-Space Approach. *The Career Development Quarterly*, *59*(5), 386–399.
- Bartlett, R., & Milligan, C. (2015). What is Diary Method? London: Bloomsbury.
- Baruch, Y., & Quick, J. (2007). Understanding second careers: Lessons from a study of U.S. Navy admirals. *Human Resource Management*, 46(4), 471–491.
- Beech, N., Gold, J., & Beech, S. (2017). Military lives: Coaching transitions. *European Journal of Training and Development*, 41(5), 434–449.
- Bennett, D., Wellman, G., Mahmood, M., Freye, R., Remund, D., & Samples, P. (2015).

 Survey of retired military pharmacist's transition to a civilian pharmacy career path.

 Military Medicine, 180(12), 1219–1224.
- Bergman, B., Burdett, H., & Greenberg, N. (2014). Service life and beyond Institution or culture? *The RUSI Journal*, *159*(5), 60–68.
- Bernstein, D., Penner, L., Clarke-Stewart, A., & Roy, E. (2011). *Psychology*. (9th ed.). Andover: Wadsworth Cengage Learning.

- Beus, J., Jarrett, S., Taylor, A., & Wiese, C. (2014). Adjusting to new work teams: Testing work experience as a multidimensional resource for newcomers. *Journal of Organizational Behavior*, 35(4), 489–506.
- Bhatnager, N. (2011). *Effective communication and soft skills: Strategies for success*. Delhi: Pearson.
- Binks, E., & Cambridge, S. (2018). The transition experiences of British military veterans. *Political Psychology*, 39(1), 125–142.
- Blank, G., & Lutz, C. (2017). Representativeness of social media in Great Britain:

 Investigating Facebook, LinkedIn, Twitter, Pinterest, Google+, and Instagram. *American Behavioral Scientist*, 61(7), 741–756.
- Bold, C. (2012). Using narrative in research. London: Sage.
- Bowling, A. (2009). Research methods in health: Investigating health and health services (3rd ed.). Maidenhead: Open University Press.
- Brannick, T., & Coghlan, D. (2016). In defense of being "native": The case for insider academic research. *Organizational Research Methods*, 10(1), 59–74.
- Brock, D., Wick, K., Evans, T., & Gianola, F. (2011). The physician assistant profession and military veterans. *Military Medicine*, *176*(2), 197–203.
- Brug, J. (2004). The Transtheoretical Model and Stages of Change: A critique: Observations by five commentators on the paper by Adams, J. and White, M. (2004) Why don't stage-based activity promotion interventions work? *Health Education Research*, 20(2), 244–258.
- Bryman, A. (2012). *Social research methods* (4th ed.). Oxford; New York: Oxford University Press.
- Buckman, J., Forbes, H., Clayton, T., Jones, M., Jones, N., Greenberg, N., ... Fear, N. (2013). Early service leavers: A study of the factors associated with premature separation from the UK armed forces and the mental health of those that leave early. *European Journal of Public Health*, 23(3), 410–415.

- Bulger, C., & Fisher, G. (2012). Ethical imperatives of work/life balance. In N. Reilly, M.Sirgy, & C. Gorman (Eds.), Work and quality of life: Ethical practices in organizations(pp. 181–201). Dordrecht: Springer Netherlands.
- Burdett, H., Woodhead, C., Iversen, A., Wessely, S., Dandeker, C., & Fear, N. (2012). "Are you a veteran?" Understanding of the term "veteran" among UK ex-service personnel: A research note. *Armed Forces & Society*, *39*(4), 751–759.
- Burke, P. (2009). *Identity Theory*. Oxford: Oxford University Press.
- Casterline, G. (2009). Heuristic Inquiry: Artistic science for nursing. *Southern Online Journal of Nursing Research*, 9(1), 1–8.
- Caza, B., & Creary, S. (2016). The construction of professional identity. In A. Wilkinson, D.Hislop, & C. Coupland (Eds.), *Perspectives on contemporary professional work:*Challenges and experience (pp. 259–285). Cheltenham: Edward Elgar Publishing.
- Chargualaf, K., Elliott, B., & Patterson, B. (2017). The transition from military nurse to nurse faculty: A descriptive study. *International Journal of Nursing Education Scholarship*, 14(1), 1–10.
- Chargualaf, K., Elliott, B., & Patterson, B. (2018). From military to academic nursing:

 Embracing an untapped leadership resource. *Journal of Nursing Education*, 57(6), 355–358.
- Charmaz, K. (2006). Constructing Grounded Theory. London: Sage Publications.
- Chavez, C. (2008). Conceptualizing from the inside: Advantages, complications, and demands on insider positionality. *The Qualitative Report*, 13(3), 474–494.
- Clark, P. (2013). Toward a transtheoretical model of interprofessional education: Stages, processes and forces supporting institutional change. *Journal of Interprofessional Care*, 27(1), 43–49.
- Cloutier, O., Felusiak, L., Hill, C., & Pemberton-Jones, E. (2015). The importance of developing strategies for employee retention. *Journal of Leadership, Accountability and Ethics*, 12(2), 119–129.

- Creswell, J. (2014). Research design: Qualitative, quantitative, and mixed methods approaches (4th ed.). London: Sage Publications.
- Dandeker, C., Wessely, S., Iversen, A., & Ross, J. (2006). What's in a name? Defining and caring for "veterans": The United Kingdom in international perspective. *Armed Forces* & *Society*, 32(2), 161–177.
- Defence Statistics (Tri-Service). (2012). *UK armed forces revised quarterly personnel compendium*: 1 May 2009 to 1 Oct 2011. London: Ministry of Defence.
- Defence Statistics (Tri-Service). (2013). *UK armed forces annual personnel report 1 Oct* 2012. London: Ministry of Defence.
- Defence Statistics (Tri-Service). (2014). *UK armed forces quarterly personnel report 1*October 2013. London: Ministry of Defence.
- Defence Statistics (Tri-Service). (2016). *UK armed forces monthly service personnel statistics*. London: Ministry of Defence.
- Defence Statistics (Tri-Service). (2017a). *UK armed forces monthly service personnel statistics 1 December 2016*. London: Ministry of Defence.
- Defence Statistics (Tri-Service). (2017b). *UK armed forces monthly service personnel statistics 1 October 2017*. London: Ministry of Defence.
- Defence Statistics Health. (2014). *UK armed forces mental health: Annual summary & trends over time*, 2007/08 2013/14. Bristol: Ministry of Defence.
- Defence Statistics Health. (2017). Annual population survey: UK armed forces veterans residing in Great Britain, 2016. Bristol: Ministry of Defence.
- Dewe, P. (2000). Measures of coping with stress at work: A review and critique. In P. Dewe, M. Leiter, & T. Cox (Eds.), *Coping, health and organizations* (pp. 3–29). London: CRC Press.
- Dirani, K. (2017). Understanding the process of transfer of training in a military context:

 Marching into new roles. *Advances in Developing Human Resources*, 19(1), 101–112.
- Director General Leadership. (2014). Developing leaders: A British Army guide. Sandhurst:

- Ministry of Defence.
- Douglass, B. G., & Moustakas, C. (1985). Heuristic Inquiry: The internal search to know. *Journal of Humanistic Psychology*, 25(3), 39–55.
- Duarte, M., Silva, J., & Paixao, M. (2017). Career adaptability, employability, and career resilience in managing transitions. In K. Maree (Ed.), *Psychology of career adaptability, employability and resilience* (pp. 242–261). Cham: Springer.
- Edelmann, A. (2018). Culturally meaningful networks: On the transition from military to civilian life in the United Kingdom. *Theory and Society*, 47(3), 327–380.
- Edwards, B. (2002). Deep insider research. Qualitative Research Journal, 2(1), 71–84.
- Elliott, B., Chargualaf, K., & Patterson, B. (2017). Military to civilian nurse: Personal and professional reconstruction. *Journal of Clinical Nursing*, 26(9–10), 1375–1384.
- Elliott, J. (2005). *Using narrative in social research: Qualitative and quantitative approaches*. London: Sage.
- Fabio, A. (2017). A review of empirical studies on employability and measures of employability. In K. Maree (Ed.), *Psychology of career adaptability, employability and resilience* (pp. 107–124). Cham: Springer.
- Faircloth, C. A. (1999). Revisiting thematisation in the narrative study of epilepsy. *Sociology* of Health & Illness, 21(2), 209–227.
- Fang, R., McAllister, D. J., & Duffy, M. K. (2016). Down but not out: Newcomers can compensate for low vertical access with strong horizontal ties and favorable core selfevaluations. *Personnel Psychology*, 70(3), 517–555.
- Feldman, D. (1994). The decision to retire early: A review and conceptualization. *Academy of Management Review*, 19(2), 285–311.
- Feldman, D. (2007). Late-career and retirement issues. In H. Gunz & M. Peiperl (Eds.), *Handbook of career studies* (pp. 153–168). Thousand Oaks: Sage Publications.
- FHMREC. (2014). Faculty of Health and Medicine Research Ethics Committee (FHMREC) application form guidance. Lancaster: Lancaster University.

- Fine, S., & Nevo, B. (2008). Too smart for their own good? A study of perceived cognitive overqualification in the workforce. *The International Journal of Human Resource Management*, 19(2), 346–355.
- Flora, K. (2012). Recovery from substance abuse: a narrative approach to understanding the motivation and ambivalence about change. *Journal of Social Work Practice in the Addictions*, 12(3), 302–315.
- Fook, J., Royes, J., & White, A. (2017). Critical reflection. In M. Chambers (Ed.), *Psychiatric* and mental health nursing: The craft of caring (3rd ed., pp. 117–124). New York: Routledge.
- Forces Watch. (2011). Forces Watch Briefing: Terms of service in the UK armed forces.

 London: Forces Watch.
- Greene, M. (2014). On the inside looking in: Methodological insights and challenges in conducting qualitative insider research. *The Qualitative Report*, 19(29), 1–13.
- Greenhalgh, T. (2010). How to read a paper: The basics of evidence-based medicine (4th ed.).

 Oxford: John Wiley & Sons.
- Gurney, S. (2013). Continuing professional development and advanced practice. In I. Norman & I. Ryrie (Eds.), *The art and science of mental health nursing: Principles and practice* (3rd ed., pp. 92–106). London: McGraw-Hill Higher Education.
- Haertl, K. (2014). Writing and the development of the self- Heuristic Inquiry: A unique way of exploring the power of the written word. *Journal of Poetry Therapy*, 27(2), 55–68.
- Hammond, M. (2013). Research methods: The key concepts. New York: Routledge.
- Harvey, M, & Land, L. (2017). *Research methods for nurses and midwives: Theory and practice*. London: Sage Publications.
- Hatch, S., Harvey, S., Dandeker, C., Burdett, H., Greenberg, N., Fear, N., & Wessely, S.
 (2013). Life in and after the armed forces: Social networks and mental health in the UK military. 35(7), 1045–1064.
- Herman, A., & Yarwood, R. (2014). From services to civilian: The geographies of veterans'

- post-military lives. *Geoforum*, 53, 41–50.
- Hesketh, B. (2004). Work adjustment. In C. Spielberger (Ed.), *Encyclopedia of applied psychology* (pp. 683–685). Tampa: Elsevier.
- Hiles, D. (2012). Heuristic Inquiry. In L. Given (Ed.), *The Sage encyclopedia of qualitative research methods* (pp. 390–392). Thousand Oaks: Sage Publications.
- Holloway, I., & Freshwater, D. (2007). Narrative research in nursing. Oxford: Blackwell.
- Horton, J., Jacobson, I., Wong, C., Wells, T., Boyko, E., Smith, B., ... Smith, T. C. (2013).

 The impact of prior deployment experience on civilian employment after military service. *Occupational and Environmental Medicine*, 70(6), 408–417.
- Howes, L., & Goodman-Delahunty, J. (2015). Predicting career stability and mobility: embeddedness and boundarylessness. *Journal of Career Development*, 42(3), 244–259.
- Hughes, E. (2005). Nurses' perceptions of continuing professional development. *Nursing Standard*, 19(43), 41–49.
- Iphofen, R. (2009). *Ethical decision making in social research : A practical guide*.

 Basingstoke: Palgrave Macmillan.
- Ivanovic, A., & Collin, P. (2006). *Dictionary of human resources and personnel management* (3rd ed.). London: A & C Black.
- Iversen, A., Nikolaou, V., Greenberg, N., Unwin, C., Hull, L., Hotopf, M., ... Wessely, S. (2005). What happens to British veterans when they leave the armed forces? *The European Journal of Public Health*, *15*(2), 175–184.
- JBI. (2016a). Checklist for analytical cross sectional studies. Adelaide: Joanna Briggs Institute.
- JBI. (2016b). Checklist for cohort studies. Adelaide: Joanna Briggs Institute.
- JBI. (2016c). Checklist for qualitative research. Adelaide: Joanna Briggs Institute.
- JBI. (2016d). Checklist for quasi-experimental studies. Adelaide: Joanna Briggs Institute.
- Johnson, G., & Johnson, W. (1996). Perceived overqualification and psychological well-being. *The Journal of Social Psychology*, *136*(4), 435–445.

- Johnston, C., Wallis, M., Oprescu, F., & Gray, M. (2017). Methodological considerations related to nurse researchers using their own experience of a phenomenon within phenomenology. *Journal of Advanced Nursing*, 73(3), 574–584.
- Jones, N., Whybrow, D., & Coetzee, R. (2018). UK military doctors; Stigma, mental health and help-seeking: A comparative cohort study. *Journal of the Royal Army Medical Corps*, 164(4), 259–266.
- Joseph, S., & Linley, P. (2006). Growth following adversity: Theoretical perspectives and implications for clinical practice. *Clinical Psychology Review*, 26(8), 1041–1053.
- Katz, I., Rudolph, C., & Zacher, H. (2019). Age and career commitment: Meta-analytic tests of competing linear versus curvilinear relationships. *Fresh Perspectives on the New Career*, 112, 396–416.
- Kelly, M., Dowling, M., & Millar, M. (2018). The search for understanding: The role of paradigms. *Nurse Researcher*, 25(4), 9.
- Kenny, G. (2012). An introduction to Moustakas' heuristic method. *Nurse Researcher*, 19(3), 6–11.
- Kirpitchenko, L. (2014). *Insider research method : The significance of identities in the field.*London: SAGE Publications.
- Kukla, A. (2000). Social Constructivism and the philosophy of science. London: Routledge.
- Lang, J., Thomas, J., Bliese, P., & Adler, A. (2007). Job demands and job performance: The mediating effect of psychological and physical strain and the moderating effect of role clarity. *Journal of Occupational Health Psychology*, 12(2), 116–124.
- Langdridge, D. (2017). Phenomenology. In B. Gough (Ed.), *The Palgrave handbook of critical social psychology* (pp. 165–184). London: Palgrave Macmillan.
- Legard, R., Keegan, J., & Ward, K. (2003). In-depth interviews. In J. Ritchie & J. Lewis (Eds.), *Qualitative research practice* (pp. 138–169). London: Sage.
- Lent, R., & Brown, S. (2013). Social cognitive model of career self-management: Toward a unifying view of adaptive career behavior across the life span. *Journal of Counseling*

- Psychology, 60(4), 557–568.
- Lewis, J., & Ritchie, J. (2003). Generalising from qualitative research. In J. Ritchie & J. Lewis (Eds.), *Qualitative research practice* (pp. 263–286). London: Sage.
- Liberati, A., Altman, D., Tetzlaff, J., Mulrow, C., Gøtzsche, P., Ioannidis, J., ... Moher, D. (2009). The PRISMA statement for reporting systematic reviews and meta-analyses of studies that evaluate health care interventions: Explanation and elaboration. *PLoS Medicine*, 6(7), 1–28.
- Littell, J., Corcoran, J., & Pillai, V. (2008). *Systematic reviews and meta-analysis*. Oxford: Oxford University Press.
- Lu, S., & Tjosvold, D. (2013). Socialization tactics: Antecedents for goal interdependence and newcomer adjustment and retention. *Fresh Perspectives on the New Career*, 83(3), 245–254.
- Lyons, T., Linda, S., & Ng, E. (2015). How have careers changed? An investigation of changing career patterns across four generations. *Journal of Managerial Psychology*, 30(1), 8–21.
- Macaulay, C. (2003). *National statistics feature: Job mobility and job tenure in the UK*.

 London: Office for National Statistics.
- Maharajan, K., & Krishnaveni, R. (2016). "Managing the migration from military to civil society": Motivation model for socioeconomic needs in resettlement of veterans in india. *Armed Forces & Society*, 42(3), 605–625.
- Mangum, S., & Ball, D. (1989). The transferability of military-provided occupational training in the post-draft era. *Labor Relations Review*, 42(2), 230.
- Matzuo, K. (2016). Long-term dynamics of employee identification with an organizational unit. *International Business Research*, *9*(12), 32–40.
- McAllister, C., Mackey, J., Hackney, K., & Perrewé, P. (2015). From combat to khakis: An exploratory examination of job stress with veterans. *Military Psychology*, 27(2), 93–107.
- McCluskey, S., Burton, A., & Main, C. (2006). The implementation of occupational health

- guidelines: Principles for reducing sickness absence due to musculoskeletal disorders. *Occupational Medicine*, *56*(4), 237–242.
- McConnell-Henry, T., James, A., Chapman, Y., & Francis, K. (2014). Researching with people you know: Issues in interviewing. *Contemporary Nurse*, *34*(1), 2–9.
- McDermott, M., Boyd, T., & Weaver, A. (2015). Franchise business ownership: A comparative study on the implications of military experience on franchisee success and satisfaction. *The Entrepreneurial Executive*, 20, 9–30.
- MOD. (2014). Service leavers guide. London: Ministry of Defence.
- MOD. (2017). *JSP* 822: Defence direction and guidance for training and education. London: Ministry of Defence.
- MOD. (2018). Defence Medical Services. Retrieved from www.gov.uk website:

 https://www.gov.uk/government/groups/defence-medical-services#defence-medical-services-in-the-uk
- MOD. (2019). Defence Medical Services. Retrieved from www.gov.uk website: https://www.gov.uk/government/groups/defence-medical-services
- Morse, A. (2018). *Ministry of Defence: Ensuring sufficient skilled military personnel* . London: National Audit Office.
- Moustakas, C. (1990). *Heuristic research: Design, methodology and applications*. London: Sage Publications.
- Muja, N., & Appelbaum, S. (2012). Cognitive and affective processes underlying career change. *Career Development International*, 17(6–7), 683–701.
- Muncey, T. (2010). Creating Autoethnographies. London: Sage Publications.
- Munro, R. (2010). Identity: Culture and technology. In M. Wetherell & C. Mohanty (Eds.), The SAGE handbook of identities (pp. 201–215). London: Sage.
- Neary, S. (2014). Professional identity: What I call myself defines who I am. *Career Matters*, (2.3), 14–15.
- Nicol, R. (2012). Returning to the richness of experience: Is autoethnography a useful

- approach for outdoor educators in promoting pro-environmental behaviour? *Journal of Adventure Education & Outdoor Learning*, 13(1), 3–17.
- NMC. (2015). The Code: Professional standards of practice and behaviour for nurses and midwives. London: Nursing and Midwifery Council.
- Nolen-Hoeksema, S. (2014). *Atkinson and Hilgard's introduction to psychology* (16th ed.). Hampshire: Cengage Learning EMEA.
- Onwuegbuzie, A., & Collins, K. (2007). A typology of mixed methods sampling designs in social science research. *The Qualitative Report*, *12*, 281–316.
- Osipow, S. H. (1990). Convergence in theories of career choice and development: Review and prospect. *Fresh Perspectives on the New Career*, *36*(2), 122–131.
- Park, S., Tod, D., & Lavallee, D. (2012). Exploring the retirement from sport decision-making process based on the Transtheoretical Model. *Psychology of Sport and Exercise*, *13*(4), 444–453.
- Patton, M. (2015). *Qualitative research and evaluation methods* (4th ed.). London: Sage Publishing.
- Peterson, A. (2015). A case for the use of Autoethnography in nursing research. *Journal of Advanced Nursing*, 71(1), 226–233.
- Petticrew, M., & Roberts, H. (2006). *Systematic reviews in the social sciences: A practical guide*. Oxford: Blackwell Publishing.
- Polit, D., & Beck, C. (2012). Nursing research: Generating and assessing evidence for nursing practice (9th ed.). Philadelphia: Wolters Kluwer.
- Prochaska, J. (1999). How do people change, and how can we change to help many more people? In M. Hubble, B. Duncan, & S. Miller (Eds.), *The heart and soul of change:*What works in therapy (pp. 227–255). Washington: American Psychological Association.
- Prochaska, J., Prochaska, J., & Levesque, D. (2001). A transtheoretical approach to changing organizations. *Administration and Policy in Mental Health and Mental Health Services*

- Research, 28(4), 247-261.
- Prochaska, J., & DiClemente, C. (1983). Stages and processes of self-change of smoking:

 Toward an integrative model of change. *Journal of Consulting and Clinical Psychology*,

 51(3), 390–395.
- Prochaska, J., Redding, C., & Evers, K. (2013). Transtheoretical model of behavior change. In K. Glanz, B. Rimer, & K. Viswanath (Eds.), *Encyclopedia of behavioral medicine* (4th ed., pp. 97–122). San Francisco: Springer.
- Reagan, L., Nowlin, S., Birdsall, S., Gabbay, J., Vorderstrasse, A., Johnson, C., & D'Eramo, M. (2019). Integrative review of recruitment of research participants through facebook.
 Nursing Research, 68(6), 423-432.
- Riessman, C. (2008). *Narrative methods for the human sciences*. Los Angeles: Sage Publications.
- Ritchie, J., Lewis, J., & Elam, G. (2003). Designing and selcting samples. In J. Ritchie & J. Lewis (Eds.), *Qualitative research practice: A guide for social science students and researchers* (pp. 77–108). London: Sage Publications.
- Robson, C. (2002). Real world research (2nd ed.). Oxford: Blackwell.
- Roepke, A., & Seligman, M. (2015). Doors opening: A mechanism for growth after adversity. *The Journal of Positive Psychology*, 10(2), 107–115.
- Sanjari, M., Bahramnezhad, F., Fomani, F., Shoghi, M., & Cheraghi, M. (2014). Ethical challenges of researchers in qualitative studies: The necessity to develop a specific guideline. *Journal of Medical Ethics and History of Medicine*, 7, 14.
- Savage, J. (2011). Participative observation: Using the subject body to understand nursing practice. In J. Latimer (Ed.), *Advanced qualitative research for nursing* (pp. 53–76). Oxford: Wiley-Blackwell.
- Schulker, D. (2016). The recent occupation and industry employment patterns of American veterans. *Armed Forces & Society*, *43*(4), 695–710.
- Schultz, V. (2010). Feminism and workplace flexibility. Connecticut Law Review, 42(4),

- 1203-1211.
- Schwandt, T. (1998). Constructivist, interpretivist approaches to human inquiry. In N. Denzin & Y. Lincoln (Eds.), *The landscape of qualitative research: Theories and issues* (pp. 221–259). Thousand Oaks: Sage Publications.
- Scott, S. (2015). *Negotiating identity : Symbolic interactionist approaches to social identity*.

 Oxford: Polity Press.
- Silverman, D. (2010). *Doing qualitative research* (3rd ed.). London: Sage Publications.
- Simon, B. (2004). *Identity in modern society a social psychological perspective*. Oxford: Blackwell Publishing.
- Sluss, D., Ashforth, B., & Gibson, K. (2012). The search for meaning in (new) work: Task significance and newcomer plasticity. *Fresh Perspectives on the New Career*, 81(2), 199–208.
- Snape, D., & Spencer, L. (2003). Foundations of qualitative research. In J. Ritchie & J. Lewis (Eds.), *Qualitative research practice: A guide for social science students and researchers* (pp. 1–23). London: Sage Publications.
- Spiegel, P., & Shultz, K. (2003). The influence of preretirement planning and transferability of skills on naval officers' retirement satisfaction and adjustment. *Military Psychology*, 15(4), 285–307.
- Statt, D. A., & Statt, D. A. (1999). *Concise dictionary of business management*. New York: Routledge.
- Stiles, W. (1993). Quality control in qualitative research. *Clinical Psychology Review*, *13*(6), 593–618.
- Strachan, H. (2014). *Back to civvy street*. Windsor: College of St George; Forces In Mind Trust.
- Sultan, N. (2018). Heuristic Inquiry. London: SAGE Publications.
- Super, D. (1980). A Life-Span, Life-Space approach to career development. *Fresh Perspectives on the New Career*, 16(3), 282–298.

- Suzuki, M., & Kawakami, A. (2016). U.S. military service members' reintegration, culture, and spiritual development. *Qualitative Report*, 21(11), 2059–2075.
- Tan, K., Au, A., Cooper-Thomas, H., & Aw, S. (2016). The effect of learning goal orientation and communal goal strivings on newcomer proactive behaviours and learning. *Journal* of Occupational and Organizational Psychology, 89(2), 420–445.
- The King's Fund. (2018). Staffing shortfall of almost 250,000 by 2030 is major risk to NHS long-term plan, experts warn | The King's Fund. Retrieved 7 November 2019, from https://www.kingsfund.org.uk/press/press-releases/staffing-shortfall-major-risk-nhs-long-term-plan
- Torrington, D., Hall, L., Atkinson, C., & Taylor, S. (2017). *Human Resource Management*. Harlow: Pearson Education.
- Vafeas, C., & Hendricks, J. (2017). Applying Heuristic Inquiry to nurse migration from the UK to Australia. *Nurse Researcher*, 24(3), 13–18.
- Vafeas, C., & Hendricks, J. (2018). A heuristic study of UK nurses' migration to WA: Living the dream downunder. *Collegian*, 25(1), 89–95.
- van Staden, L., Fear, N., Iversen, A., French, C., Dandeker, C., & Wessely, S. (2007).

 Transition back into civilian life: A study of personnel leaving the U.K. armed forces via "military prison". *Military Medicine*, 172(9), 925–930.
- Vigoda-Gadot, E., Baruch, Y., & Grimland, S. (2010). Career transitions: An empirical examination of second career of military retirees. *Public Personnel Management*, *39*(4), 379–404.
- Volmer, J., & Wolff, H. (2018). A daily diary study on the consequences of networking on employees' career-related outcomes: The mediating role of positive affect. *Frontiers in Psychology*, *9*, 2179.
- Vondracek, F. W. (1998). Career development: A lifespan perspective (introduction to the special section). *International Journal of Behavioral Development*, 22(1), 1–6.
- Walker, D. (2013). Anticipating army exit: Identity constructions of final year UK career

- soldiers. Armed Forces & Society, 39(2), 284–304.
- Whybrow, D. (2013). Psychiatric nursing liaison in a combat zone: An autoethnography. *Journal of Psychiatric and Mental Health Nursing*, 20(10), 896-901.
- Wolff, H., & Moser, K. (2009). Effects of networking on career success: A longitudinal study. *Journal of Applied Psychology*, 94(1), 196–206.
- Woodhead, C., Sloggett, A., Bray, I., Bradbury, J., McManus, S., Meltzer, H., ... Fear, N. (2009). An estimate of the veteran population in England: Based on data from the 2007 Adult Psychiatric Morbidity Survey. *Population Trends*, (138), 50–54.
- World Medical Association. (2008). WMA Declaration of Helsinki Ethical principles for medical research involving human subjects (9th ed.). 9th ed. Seoul: World Medical Association.
- Zahavi, D. (2009). Is the self a social construct? *Inquiry*, 52(6), 551–573.
- Zahavi, D. (2018). Introduction. In D. Zahavi (Ed.), *The Oxford handbook of the history of phenomenology* (pp. 1–4). Oxford: Oxford University Press
- Zinn, J. (2011). The biographical management of risk and uncertainty British veterans. *Historical Social Research*, 36(3), 237–269.

8 Appendices

- Appendix A: Recruitment message
- Appendix B: Invitation to attend an interview
- Appendix C: Participant information sheet
- Appendix D: Participant consent form
- Appendix E: Demographic data questionnaire
- Appendix F: Qualitative content analysis example Participant G
- Appendix G: Example of coding diary entries and theme development
- Appendix H: Heuristic Inquiry research guide
- Appendix I: Research ethics committee application and approval
- Appendix J: Email update about direct quotes

Appendix A: Recruitment message

Hello xxxx

My name is Dean Whybrow and I am a nurse who has recently left the UK Armed Forces. As

part of a PhD in Organizational Health and Wellbeing, I am looking to understand more about

health care professionals' experience of leaving the forces and their civilian employment. My

intention is to write about what I learn in the hope that it helps other people when they reach

the point of leaving the forces.

If you would be willing to attend a telephone/Skype interview or to email back your responses

to the main research questions then please reply to this message or email me at

<u>deanwhybrow@hotmail.com</u> and I will send you further information.

Yours sincerely

Dean Whybrow

PhD Student

Lancaster University

Health & Lancaster Medicine University

Appendix B: Invitation to attend an interview

Dear xxxx

Thank you for your interest in becoming involved in this research project. As part of a PhD in

Organizational Health and Wellbeing, I am looking to understand more about health care

professionals' experience of leaving the forces and their civilian employment. My intention is

to write about what I learn in the hope that it helps other people when they reach the point of

leaving the forces.

I have attached further information to this email and would like to arrange a telephone/Skype

interview. Please let me know what times/dates would be convenient to you and we can make

an appointment. I have attached the main topics to this email for you to check out before our

meeting. As an alternative to an interview, you may prefer to write down your responses to

the main research questions (attached) and email them back to me

Yours sincerely

Dean Whybrow

PhD Student

Lancaster University

Health & Lancaster Medicine University

Appendix C: Participant information sheet

Participant Information Sheet

A Military Healthcare Professional's experience of transitioning into civilian employment:

An Autoethnography

My name is Dean Whybrow and I am conducting this research as a student in the

Organizational Health and Well Being PhD programme at Lancaster University, Lancaster,

United Kingdom.

What is the study about?

The purpose of this study is to learn more about your experience of leaving the armed forces

and entering civilian employment. Your experience, combined with that of the researcher's

own transition from the military and what is learnt from online forums will help to shape a

narrative about what it is like to be a service leaver and to be in civilian employment. This

information may help other people when they reach the point of leaving the military and seek

out civilian employment.

Why have I been approached?

You have been approached because the study requires information from people who have

served as a healthcare professional in the armed forces.

Do I have to take part?

No. It's completely up to you to decide whether or not you take part.

What will I be asked to do if I take part?

If you decide you would like to take part, you would be asked to attend a telephone/Skype interview with me in which you will be asked about your experience of transitioning into civilian employment. Should you be unable to make the time for an interview you will be offered the opportunity to write down your thoughts and feelings around the main interview topics and then to forward them to me by email.

Will my data be Identifiable?

The information you provide will be anonymised and any written quotes will be paraphrased.

The data collected for this study will be stored securely and only the researcher conducting this study and their research supervisors will have access to this data:

- o Audio recordings will be deleted once the project is completed.
- The files on the computer will be encrypted (that is no-one other than the researcher will be able to access them) and the computer itself password protected.
- At the end of the study, hard copies of transcripts etc will be scanned and stored electronically with the originals destroyed. The electronic copies will be stored on an encrypted external hard drive in a locked filing cabinet for five years. At the end of this period, they will be deleted.
- The typed version of your interview will be made anonymous by removing any identifying information including your name. Anonymised, paraphrased quotations from your interview may be used in the reports or publications from the study, so your name will not be attached to them.
- o All your personal data will be confidential and will be kept separately from your interview responses.

There are some limits to confidentiality: if what is said in the interview makes me think that you, or someone else, is at significant risk of harm, I will have to break confidentiality. If possible, I will tell you if I have to do this.

What will happen to the results?

The results will be summarised and reported in a thesis and may be submitted for publication in an academic or professional journal.

Are there any risks?

There are no risks anticipated with participating in this study. However, if you experience any

distress following participation you are encouraged to inform the researcher and contact your

line manager, GP, Combat Stress (0800 1381619) or the Samaritans (08457 909090).

Are there any benefits to taking part?

Although you may find participating interesting, there are no direct benefits in taking part.

Who has reviewed the project?

This study has been reviewed by the Faculty of Health and Medicine Research Ethics

Committee, and approved by the University Research Ethics Committee at Lancaster

University.

Where can I obtain further information about the study if I need it?

If you have any questions about the study, please contact the main researcher:

Dean Whybrow: 07925-404829; deanwhybrow@hotmail.com

Research supervisors:

Professor Susan Cartwright: s.cartwright@lancaster.ac.uk

Professor Christine Milligan: c.milligan@lancaster.ac.uk

Complaints

If you wish to make a complaint or raise concerns about any aspect of this study and do not

want to speak to the researcher, you can contact:

Professor Bruce Hollingsworth

Head of the Division of Health Research

Email: b.hollingsworth@lancaster.ac.uk

Tel: (0)1524 593169

Division of Health Research

Lancaster University

Lancaster

LA14YG

If you wish to speak to someone outside of the Organizational Health and Wellbeing Doctorate Programme, you may also contact:

Professor Roger Pickup Tel: +44 (0)1524 593746 Associate Dean for Research Email: r.pickup@lancaster.ac.uk Faculty of Health and Medicine (Division of Biomedical and Life Sciences) Lancaster University Lancaster LA1 4YG

Appendix D: Participant consent form

Consent Form

Study Title: A Military Healthcare Professional's experience of transitioning into civilian employment: An Autoethnography

We are asking if you would like to take part in a research project in order to learn more about your experience of leaving the armed forces and entering civilian employment. Your experience, combined with that of the researcher's own transition from the military and what is learnt from online forums will help to shape a narrative about what it is like to be a service leaver and to be in civilian employment.

Before you consent to participating in the study we ask that you read the participant information sheet and mark each box below with your initials if you agree. If you have any questions or queries before signing the consent form please speak to the principal investigator, [Dean Whybrow].

	Please read each of the below statements and then tick to confirm	
1	I confirm that I have read the information sheet and fully understand what is expected of me within this study	
2	I confirm that I have had the opportunity to ask any questions and to have them answered.	
3	I understand that my interview will be audio recorded and then made into an anonymised written transcript.	
4	I understand that audio recordings will be kept until the research project has been examined.	
5	I understand that my participation is voluntary and that I am free to withdraw at any time without giving any reason.	
6	I understand that once my data have been anonymised and incorporated into themes it might not be possible for it to be withdrawn, though every attempt will be made to extract my data, up to the point of publication.	
7	I understand that the information from my interview will be pooled with other participants' responses, anonymised and may be published	
8	I consent to information and paraphrased quotations from my interview being used in reports, conferences and training events.	
9	I understand that any information I give will remain strictly confidential and anonymous unless it is thought that there is a risk of harm to myself or others, in which case the principal investigator will/may need to share this information with his/her research supervisor.	
10	I consent to Lancaster University keeping written transcriptions of the interview for 5 years after the study has finished.	
11	I consent to take part in the above study.	

Name of Participant:

Signature: < Returned by email in lieu of signature>

Date:



Appendix E: Demographic data questionnaire

How old are you?

What gender are you?

What is your marital status?

What service were you in?

What rank were you?

What was your profession?

How long did you serve?

When did you leave?

Are you currently employed, seeking work, retired?

If employed then what do you do?

If seeking work then how long have you been looking?

Are you a member of a veteran's group or ex military association?



$\label{eq:content} \begin{tabular}{ll} Appendix F: Qualitative content analysis example - \\ Participant G \end{tabular}$

	Theme: Reaching a tipping point about deciding to			
	leave the forces			
Participant	Transcript	Experience (Paraphrased)	Code	Sub-Theme
G	Now if you have a good boss, a good boss will do that. But, I didn't have a lot of good bosses apart from one, <name> who was the (incomprehensible) . <name> my boss after that were awful and didn't develop us at all. But actually the Navy should have focussed on improving people's CVs as well. And they are gonna have to do it for revalidation. And as well as focussing you to be a good <snco>. Focussing the need to be a good charge nurse and have a good career.</snco></name></name>	Did not feel that line manager supported career development. Felt that military should focus upon good clinical skills as well as being a good noncommissioned officer.	balance between clinical skills and military skills not quite right	values
G	with the hope of, the idea was that the <military> would start advanced practitioners. And there would be advanced practitioner roles and that never materialised. So I left with a Band 8 qualification and started working as a band 8 outside as an ANP. And I spent a year at <name> hospital called the <name> working as a Band 8. (incomprehensible) working as a Band 5.</name></name></military>	Had developed clinically to a high level but this was not reflected in military grade yet was when working in civilian employment.	Band 8 as civilian but band 5 in military	opportunities

G	well, absolutely. So from the clear transition point of view. Learning how to write CVs, I was already all over that. And learning how to interview. I had interviewed for all my agency work that I did. I interviewed for the (incomprehensible). So actually get people who do 22 years in the military, stick in the military and never have an interview for anything else. I had four or five.	Had lots of experience of interviews due to agency work whilst in the forces. Feels this was an advantage over other military personnel who may never have attended an interview.	Benefit of applying and working in civilian roles during military career	skills
G	so I was doing lots of stuff on the outside. So I was working for one of the leading medical teams in the country the <name> . Who I am out working with tomorrow. Their part of (incomprehensible) association in their care. So we were doing loads of stuff for them. I was speaking at conferences for the team about my work in the military. So actually I was doing lots of fun stuff.</name>	Whilst in the forces was working part time with a leading medical team and presenting at conferences.	civilian work to high level (senior) whilst serving	opportunities
G	I think one of the other things is. I had a few of my friends had left the military. One of my friends you may or may not know him. A chap called <name> he was an <military> nurse. One of my closest friends. He left just a year before I did and walked straight into a brilliant job and settled in <name> not far from me. So</name></military></name>	Knew other people who had left the military and then been very successful in civilian roles.	colleagues succeeding in civilian work	opportunities

G	Oh massive. So seeing him doing (incomprehensible) and have the same difficulties and concerns that I did really helped things. And also there was a couple of other friends that did the same thing as well. So plenty of other people were leaving when I left, because morale was low and a lot of the juniors were leaving and put their notices in. So about 5 or 6 or my colleagues within a year had put their notice in and gone. Now every single one of them had walked into a decent job very quickly.	Saw other people viewed as junior in the military but then move into good civilian jobs at a time of low morale.	colleagues succeeding in civilian work	opportunities
G	Every single, one of them went to Australia. Straight into a job. Several others, one went off shore. Most of them went in to fairly senior <coughs> decent jobs soreally me making the transition decision cause I knew that I worked alongside these people and had similar if not a better CV because of all me extra stuff I did.</coughs>	Most peers left and went into good jobs. Realised that had as good if not better CV than most of them.	comparing self to others who left	opportunities
G	I'd been in the <military> for xx years and really the issue for me was, I was a <junior rank=""> with a,I'd done the advanced practice masters</junior></military>	The tipping point was that had served a long time, was junior in rank but very senior clinically.	conflict between rank and qualification	values
G	All be it well band 5 band 6. I had got a charge nurse role, which they gave to kind of appeased me. But I wasn't working at the level I had studied to. And when I brought it up with my bosses I was kind of told to wind my neck in	was offered a more senior role in the military but it still did not reflect the role could achieve as a civilian.	conflict between rank and qualification	opportunities
G	I didn't want to leave the Navy I wanted to do my 22 years. So actually I felt that I was forced out. So I left with a lot of regret.	Did not want to leave but felt that had no choice, so left on a negative note.	conflict in military workplace	Values

G	So I already had lots of fingers in lots of pies	Had spread his work interests beyond the forces	creating options	opportunities
G	Well, you are scared. I mean, I am not thatI use the word job opportunities andbut I was so used to being in the <military> and everything being regimented. But actually, I did a lot of stuff outside of the <military>. Whereas a lot of people did their Navy job or their RAF or army job and then went home. Whereas I worked for the <name> care team. which is a medical charity which I am still involved with, responding for (incomprehensible). I did, I worked in a walk in centre as a Band 8 ANP. I did Band 8 work for agencies at festivals. So I had fingers in lots of pies, and I still kept up my skills in my portfolio</name></military></military>	Found it scary to leave. Even though was used to civilian employment was also used to the hierarchy and regimented nature of the forces.	Did civilian work prior to leaving	Values
G	And the other thing is my bosses aren't going to turn around and say to me. Oh by the way <name> in three months' time your off to (incomprehensible) you know your off to West Africa or your off to Libya or wherever. Your off to Syria. They are not going to say that.</name>	Feels that new employers have less say over employment choices so cannot impact upon family life with deployments etc.	Family stability as a reason for leaving	instability
G	I had civilian friends. I had a civilian social network. Albeit and family albeit (incomprehensible) we had a good support network, so it wasn't that difficult for me. And I think that is quite important that if you are leaving you keep a foot in civilian life and have civilian ties, whether it's (incomprehensible) I just think we quite often within the military keep ourselves to ourselves	Had already developed a wide social network of civilian friends. Felt it was important to have a foot in civilian life.	foot in civilian life	Values

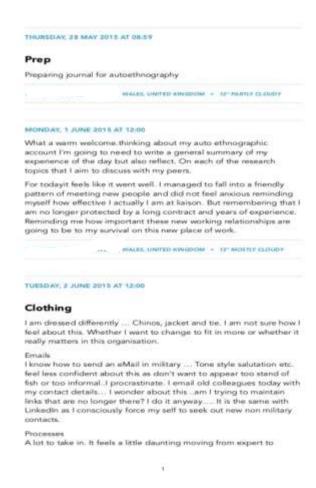
G	Yeah, I am saying exactly that actually. I found that a very big help. Just knowing that, so people hadn't left and were saying oh I wish Ithere wasn't one person that said I regretted that I wished I had stayed in. very single, one of them went to Australia. Straight into a job. Several others, one went off shore. Most of them went in to fairly senior <coughs> decent jobs soreally me making the transition decision cause I knew that I worked alongside these people and had similar if not a better CV because of all me extra stuff I did. So it, I just <coughs> sorry about the coughing I am</coughs></coughs>	the message from peers was that they did not regret leaving, which was useful to hear.	Hearing how other people were doing helped the decision to leave	opportunities
G	So that, seeing that and knowing that kind of encouraged me a bit to say well, if they have got jobs, I should manage as well. So that really really helped. Saying that after I left one of me other friends <name> a chap called <name> he left about 6 months after I left or a year, well about 6 months after I did. After seeing how well I'd got on. He put his notice in as well and made his decision to (incomprehensible).</name></name>	Other colleagues also chose to leave after seeing how well he was doing in his new job	comparing self to others who left	opportunities
G	And the other thing is my bosses aren't going to turn around and say to me. Oh by the way <name> in three months' time your off to (incomprehensible) you know your off to West Africa or your off to Libya or wherever. Your off to Syria. They are not going to say that.</name>	New job is more predictable and employer cannot easily impact upon personal life with things like foreign deployments.	Instability in forces	instability

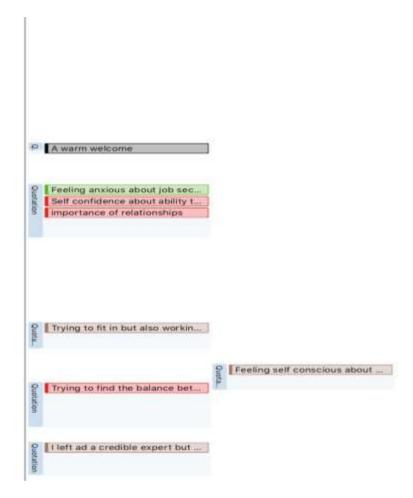
G	I think that is an absolutely cracking, although I have had somethe last year or two of my career I had a massive dose of the fuck ems. I have no regrets for being in the <service> I think of all my colleagues that have left for all the good times and bad times. You kind of forget about the bad shit and look back fondly with pride.</service>	Looks back upon career fondly and does not regret joining the forces	not bitter	values
G	I wasn't valued at all. And I felt very undervalued. In fact, I started getting into trouble. I ended up getting two warnings. Coz I had a massive dose of the fuck ems to be honest.	Did not feel values at the point of leaving and had begun to get into disciplinary trouble.	Not valued in military	values
G	well it was a weight off my shoulders (incomprehensible). One of the good things is, as you know you have like the transition. So I still had like 3-4 months of wages. So I actually leftI wasn't due to leave until I think it was January 14, round about like the 20th. so like the 3rd week of January 2014. So with my terminal leave and leave owed, I left in September 2013. I had a month off and then did some job hunting. And I had 3 months to do job hunting, and within 2 weeks I got offered the job <coughs>, in fact within a week I got offered the job. I had <coughs> excuse me. I decided to say <coughs> I had 2 weeks so I had 3 weeks so I had 4 weeks off and then I went and started my new job in my civvy place whilst on the on terminal leave</coughs></coughs></coughs>	The transition period was helpful because it meant 3-4 months of wages whilst job hunting. Found a new job in 2 weeks of looking.	securing job made transition easier	opportunities

G	So actually, I kind of worked amongst civilians within a civilian workplace albeit with a uniform on. And at the weekends and in the evenings I would go and do me other (incomprehensible) and I just worked as a civvy. So I wasn't like a squaddie who had been in the barracks, living in the married patch with all his regiment for the last 17 years.	Felt that was working in civilian roles long before left, which made the choice and transition easier as had not been indoctrinated in the same way as a squaddie living and working in barracks with regiment for whole career.	socialised into civilian work	values
G	And I already had, I had been offered a job with the ambulance service which was kind of like another reason why I was like, well there is a job on the outside for me if I leave.	had been offered a job before leaving which made him realise there was a job available if left.	secured a job before leaving	opportunities
G	And said you're a band 5, you're in the <service>, you're a <junior rank="">. Just, do as your told or leave.</junior></service>	Was told by the military that had to put up with the difference between military rank and clinical civilian grade	told to accept lower rank	values

Appendix G: Example of coding diary entries and theme development

Example of Coding:





novice.i am suddenly very impressed by some of my previous locum colleagues who did it so seamlessly.

Linkactin

Getting likes & congrats on my new job from my old contacts feels more important than my valedictory.

WALES UNITED REMIDICAL + 13" RESETT CLOUDY

FRIDAY, 12 JUNE 2015 AT 08:01

Reflections on Week 2.

I feel a bit out of place in terms of understanding the processes, system and time commitments. I was told it is ok to leave at 4pm today. That is good news. Trying to buy a house, get PHD off the grounds, get the right care for child. Every so often I get a pang of uncertainty about the fragility of my new job... no 22 yr contract. what if I stuff up. I remind myself that they employed Me. But remember what I have read about fitting in to a new place of work. I stopped werring a terfor most of the week. Apart from an away day where I wore a suit/ tie as meeting new people fitting in... It feels like being book at echool where it always felt tough.

MONDAY, 15 JUNE 2015 AT 12:00

Work load

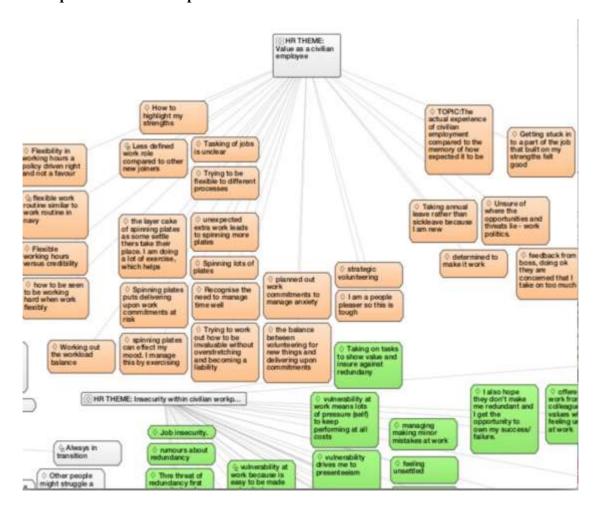
Work load is increasing, which in itself is not an issue. I feel the challenge is not to over commit and not to under commit. I have decided that it is important that I deliver what I agree to. Seems to be space to negotiate, but I am pun certain of how much space.

Emailed to spork for help with a short notice work commitment due to staff absence. This involves approx dozen Personal tutor interviews and making essays/portfolios. Sounds like a lot of work and it is in the area that is newest to me... marking. I check my diary and ca see that the marking timeframe clashes with a lot of other commitments. My dilemma is that I don't want to be seen as obstructive and doe't know whether or not my workload is high or not. My solution was to reply to the email sayin! can do the inserviews. But that my diary diging the marking timeframe is tight and describing my one commitments and how many days I think I can spare. I finish by acknowledging my newness by saying I will take guidance on my work load commitments. I copy in my line manager, as she had been talked to and was mentioned in the original email.

.2

P An observation about what val... Trying 9 Worry about life stressors and... 9 Dealing with life stressors by ... Adjusting to team norms Working out the workload bal. I am a people pleaser so this i... Dealing with requests for addi....

Example of Theme Development:



Appendix H: Heuristic Inquiry research guide

A) Self

- Gather all data from own diaries
- Immersion in data
- Step back from data for a while
- Review data again
- Create individual depiction of the experience –themes
- Check with raw data does the individual depiction fit with raw data; what needs to be added or removed?

B) Each participant

- Gather all data from one participant
- Immersion in data
- Step back from data for a while
- Review data again
- Create individual depiction of the experience themes
- Check with raw data does the individual depiction fit with raw data; what needs to be added or removed?

C) All participants

- Gather data from all individual depictions
- Immersion in data
- Step back for a while
- Review data again
- Develop a composite depiction common qualities and themes; Core meanings by individuals and groups; Include exemplary narratives, quotes, illustrations

D) Typologies

• Develop typologies by using raw data, depictions and biographical materiel

E) Creative synthesis of the experience

• Develop a rendition of the experience that reflects the themes and experiences of the phenomenon – can use narrative, story, metaphor, analogy, tale etc

How to present the data in the thesis: Initial outline plan

- Vignette (self)
- Individual depiction (self):Themes
- Typologies
- Composite depiction (Others):Themes
- Creative synthesis

Adapted from Moustakas (1990)

Appendix I: Research ethics committee application and approval



Applicant: Dean Whybrow

Supervisors: Sue Cartwright and Christine Milligan

Department: Health Research FHMREC Reference: FHMREC16081

24 April 2017

Dear Dean

Re: Military Healthcare Professional's experience of transitioning into civilian employment: A Heuristic Inquiry

Thank you for submitting your research ethics amendment application for the above project for review by the Faculty of Health and Medicine Research Ethics Committee (FHMREC). The application was recommended for approval by FHMREC, and on behalf of the Chair of the Committee, I can confirm that approval has been granted for the amendment to this research project.

As principal investigator your responsibilities include:

- ensuring that (where applicable) all the necessary legal and regulatory requirements in order to conduct the research are met, and the necessary licenses and approvals have been obtained;
- reporting any ethics-related issues that occur during the course of the research or
 arising from the research to the Research Ethics Officer at the email address below
 (e.g. unforeseen ethical issues, complaints about the conduct of the research, adverse
 reactions such as extreme distress):
- submitting details of proposed substantive amendments to the protocol to the Research Ethics Officer for approval.

Please contact me if you have any queries or require further information.

Tel:- 01542 592838

Email:- fhmresearchsupport@lancaster.ac.uk

Yours sincerely,

Dr Diane Hopkins

Research Integrity and Governance Officer, Secretary to FHMREC.

Dean Whybrow 30712971 PhD Student Lancaster University 12 Apr 17

Chair FHMREC

Dear Chair of the FHMREC,

I would be grateful if you could review the attached research proposal and consider approving the minor amendments that I have made. The primary amendment is to request permission to ask the research participants if I can use direct quotes from their transcripts within my thesis and subsequent publications. In addition, I have adapted the research methodology following feedback from my Confirmation Panel.

Yours sincerely

Dean Whybrow

Cc:

Professor S. Cartwright Professor C. Milligan

FHMREC Application Form

Faculty of Health and Medicine Research Ethics Committee (FHMREC) Lancaster University

Application for Ethical Approval for Research

Instructions

- 1. Apply to the committee by submitting
 - ✓ The University's Stage 1 Self-Assessment Form (standard form or student form) <u>and</u> the Project Information & Ethics questionnaire. These are available on the Research Support Office website: <u>LU Ethics</u>
 - ✓ The completed FHMREC application form
 - ✓ Your full research proposal (background, literature review, methodology/methods, ethical considerations)
 - ✓ All accompanying research materials such as, but not limited to,
 - 1) Advertising materials (posters, e-mails)
 - 2) Letters of invitation to participate
 - 3) Participant information sheets
 - 4) Consent forms
 - 5) Questionnaires, surveys, demographic sheets
 - Interview schedules, interview question guides, focus group scripts
 - 7) Debriefing sheets, resource lists
- Submit all the materials electronically as a <u>SINGLE</u> email attachment in PDF format. Instructions for creating such a document are available on the FHMREC website (<u>http://www.lancs.ac.uk/shm/research/ethics/</u>).
- Submit one <u>collated</u> and <u>signed</u> paper copy of the full application materials. If the applicant is a student, the paper copy of the application form must be signed by the Academic Supervisor.
- Committee meeting dates and application submission dates are listed on the
 research ethics committee website
 http://www.lancs.ac.uk/shm/research/ethics. Applications must be submitted
 by the deadline stated on the website, to:

Diane Hopkins Faculty of Health & Medicine BO3, Furness College Lancaster University, LA1 4YG d.hopkins@lancaster.ac.uk

5. Attend the committee meeting on the day that the application is considered.

4

	are Professional's experien	ce of transitionin	ng into civilian	e G
employment: An A	lutoethnography			
If this is a stud relevant box:	ent project, please indicate	what type of pr	oject by ticki	ng the
☐ PG Diploma SRP	☐ Masters dissertation	□MRes	□MSc [☐ DClinPsy
□PhD Thesis ✔ Thesis	PhD Pall. Care/Pub. Hith/0	Org, Hith & Well I	Being □MD	□DClinP
☐ Special Study M	odule (3rd year medical stud	ent)		
3. Type of study				
✓ Involves direc	t involvement by human sub	jects		
☐ Involves existing continuing.	ng documents/data only. Co	ntact the Chair o	f FHMREC befo	re
Applicant informa				
4. Name of application Dean Whybrow	ant/researcher:			
	osition held by applicant an ty of Health And Medicine	d Division within	FHM	
6. Contact Inform	ation for applicant:			
E-mail:				
Address:				
7. Project supervi	sor(s), if different from app	licant:		
Name(s) (1) Prof	Susan Cartwright; (2) Prof (hristine Milligan		
E-mail(s):				
8. Appointment he	eld by supervisor(s) and inst	titution(s) where	based (if app	licable):
	Centre for Organizational Ps Faculty of Health and Medic			University
9. Names and app where app	ointments of all members o licable)	f the research te	eam (including	degree
n/a				
The Project				
NOTE: In addition and all supporting	to completing this form you	must submit a de	tailed research	protocol
arra arr supporting	materials.	- Ot		

The aim of this proposal is to carry out evente an autoethnography heuristic research based upon about the author and other veteran's experience of transitioning into civilian employment. To better understand the context of this personal relationship with leaving the forces, the author's data shall be triangulated with other people's experiences by interviewing other healthcare professionals and analysing their narratives as well as exploring the themes within a publicly accessible forum that includes topics related to resettlement from the military. Healthcare professionals' transition stories shall be described in relation to the genre that summarises the style of narrative, the plot that ties the story together and the key themes related to their experience. The study is underpinned by a positive psychology theoretical stance whereby the aim is to understand the trials and tribulations encountered in order to better understand how people flourished. This knowledge may inform serving members of the military as they prepare to leave the forces. The full proposal is in Appendix A.

11. Anticipated project dates

Start date: Aug 2015 End date: Aug 2016-Jun 2019

- 12. Please describe the sample of participants to be studied (including number, age, gender):
 - a) The author, who is a military healthcare professional transitioning to civilian employment
 - b) Other military healthcare professionals contactable via a social networking site or recommended by their peers. The inclusion criteria are healthcare professionals who have retired from the UK armed forces. The aim is to achieve a minimum number of six and a maximum number of twelve other professionals. Given that the study is applying a convenience/snowball sampling strategy there are no a priori requirements reference age, gender, length of service, years since left service. However, demographic data will be gathered, which will facilitate post hoc comparisons.
 - e) Historical entries to two publicly accessible military forums:

6

- 13. How will participants be recruited and from where? Be as specific as possible.
 - a) Individuals for the narrative research component Participants shall be recruited via a LinkedIn advertisement, LinkedIn message or recommendation from their peers (Appendix B). Participants will have an existing LinkedIn connection to the researcher, be a member of a LinkedIn group that the researcher is also a member of or be referred to the study by a peer. Upon receipt of a positive response from a potential participant, a participant information sheet (Appendix C) shall be emailed along with an invitation to arrange a date/time to meet for the interview (Appendix D). This shall be followed up by one reminder email two weeks later offering to arrange an interview (Appendix E). Following this, no further contact will be made unless the potential participant gets back in touch.
 - b) No other recruitment is required

14. What procedure is proposed for obtaining consent?

- a) Narrative research: A participant information sheet shall be sent to all potential participants. Written consent shall be sought from all participants before carrying out an interview (Appendix F). In order to ensure that participants are fully aware of the nature of the interview a list of broad interview topics shall be sent to the prior to the interview (Appendix G) and basic demographic data shall also be gathered at the start of the interview (Appendix H). Participants shall be offered the option to confirm the accuracy and make any revisions to the completed transcripts
- b) Forums: Only data available to the general public shall be used. The website administrators have granted permission to make use of this materiel that is published on their website. People using the website have a username, which shall be anonymised for the purposes this study:

- 15. What discomfort (including psychological), inconvenience or danger could be caused by participation in the project? Please indicate plans to address these potential risks.
 - a) There is a risk that participants will describe difficult events or experiences that are upsetting to them. Within the information sheet, participants will be advised to access their GP or Combat Stress (a third sector support organisation for veterans) should they consider that they wish further help.
 - b) There is a risk that participants might be identifiable from their narratives. To mitigate this risk, participants will be offered the option of checking transcripts for accuracy. Should they choose to check their transcripts then they will be afforded two weeks to make any changes or to withdraw their data. Only-c Composite participant characters, paraphrased quotes or direct quotes may shall be used in the final autoethnography, unless the quote originates from the author to report the findings.
- 16. What potential risks may exist for the researcher(s)? Please indicate plans to address such risks (for example, details of a lone worker plan).
 - a) There is a risk that the researcher might hear an upsetting story that continues to bother him after the interview is complete. The researcher may also find the process of transition difficult at times and that this may take priority to carrying out the study. To mitigate this risk, the researcher will have access to academic supervision, a GP service and can self refer to Combat Stress.
 - b) There is a risk that the author is too transparent within the autoethnographic component to the heuristic inquiry process, a reflective process and academic supervision shall be used to moderate this risk.
- 17. Whilst we do not generally expect direct benefits to participants because of this research, please state here any that result from completion of the study.

N/A

18. Details of any incentives/payments (including out-of-pocket expenses) made to participants:

N/A

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19. Briefly describe your data collection and analysis methods, and the rationale for their use

Data Collection

- a) The data for the autoethnographic account shall be gathered from a reflexive diary of both the author's transition to civilian employment and experience of gathering/analysing the data from the other healthcare professionals and military forums. The author shall also construct written accounts of memories of key milestones in the transition process.
- b) Other healthcare professionals, who meet the study inclusion criteria and have consented to participate, shall be invited to an unstructured telephone/online interviews. The participants will be sent a list of broad interview topics so that they are aware of the purpose of the interview (Appendix G). These will serve as a guide during the course of the interview. Participants will be encouraged to make notes related to the interview topics prior to attending the interview. The interview shall be recorded and transcribed. Transcriptions will be returned to participants to be corrected or updated before being included in the data analysis. Should the participant not be available for interview but wish to participate, then they will be invited to create a written narrative of their responses to the interview topics. Data gathered shall be kept confidential within the constraints of the research project. However, should it become apparent that the participant is a risk to themselves or others then the researcher will reserve the right to breach confidentiality. This is outlined in the consent form (Appendix F) but will also be made clear to each participant prior to interview.
- e) The data from the two military forums shall be gathered by searching the forums? employment. The threads shall be saved and used as transcripts in the same way as

the above interviews.

Data Analysis

- a) This study shall apply qualitative narrative research techniques in order to explore the themes, genre and plot that structure the autobiographical narrative within author's journal and written accounts of significant events during their transition process
- b) Where possible, this study shall also apply qualitative narrative research techniques in order to explore the themes, genre and plot that structure the stories that are told by other healthcare professionals or within a military forum.
- c) Comparisons shall then be made between the author's experience of transition and the narratives created by the interviews with other healthcare professionals and themes from the forum entries.
- d) This process of triangulation should lead to an overarching, holistic interpretation of the author's experience of being a military healthcare professional transitioning to civilian work.
- e) The above analysis shall be carried out with the aid of a Computer Assisted Qualitative Data Analysis Software package, in order to more easily manage the large amounts of data.
- 20. Describe the involvement of users/service users in the design and conduct of your research. If you have not involved users/service users in developing your research protocol, please indicate this and provide a brief rationale/explanation.

Service users have not been included in the design of this research project.

- 21. What plan is in place for the storage of data (electronic, digital, paper, etc.)? Please ensure that your plans comply with the Data Protection Act 1998.
 - a) Data shall be held on an encrypted and password protected personal computer.
 - b) Paper copies of transcripts or consent forms shall be scanned into an electronic format, the originals will be held in a locked filing cabinet, the originals will be held in a locked filing cabinet and destroyed at the end of the project.

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c) The electronic data shall be transferred to an encrypted, password protected external hard drive and stored in a locked filing cabinet for a 5-year period following completion of the PhD at which point the contents shall be deleted. ✓ audio 22. Will audio or video recording take place? ☐ no □video If yes, what arrangements have been made for audio/video data storage? At what point in the research will tapes/digital recordings/files be destroyed? a) Digital audio recording will be made of all interviews. The digital recorder is unencrypted so information will be transferred to an encrypted computer as soon as possible. In the mean time the recorder will be stored securely in a locked cabinet. b) The plan is to transcribe all digital audio recordings of interviews into Word documents for further analysis using a Computer Assisted Qualitative Data Analysis Software package. Should an external transcriber be used then they will be asked to sign a Transcriber Confidentiality Form (Appendix I). c) Once the study is complete, all audio recordings shall be destroyed and electronic transcripts held for 5 years before they are also destroyed. d) Responsibility for storage a deletion of the data will remain with the researcher even once they have completed their PhD. 23. What are the plans for dissemination of findings from the research? In addition to the PhD theses, an abridged version may be prepared for publication in a peer reviewed journal and/or conference presentations. 24. What particular ethical problems, not previously noted on this application, do you think there are in the proposed study? Are there any matters about which you wish to seek advice from the FHMREC? N/A

Signatures:

Applicant: Dean Whybrow

Date: 22 Jun 15 7 Apr 17

Email in Lieu of Signature by Project Supervisors: Prof S. Cartwright/ Prof C. Milligan

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Appendix J: Email update about direct quotes

Hello ...,

Last year you very kindly agreed to be interviewed about your experience of leaving the military and civilian employment. As you may remember this formed part of a PhD thesis and I am currently writing up the findings. I previously sent you a transcript of your interview. I have attached an Xcel spreadsheet that includes the themes that I have found and the parts from your interview that I would like to include in those themes. I will send the password in a separate message.

You previously gave your permission for me to paraphrase some of your interview. In the spreadsheet, under each of the themes, you will see your direct quotes, my paraphrased version, the initial coding and the sub theme that I plan to write about. I plan to begin writing up the findings very soon so if you would like me to change any of the paraphrasing then please let me know in the next couple of weeks. If I do not hear from you then I will assume that you are happy with the general content and my use of them. If you need more time, then please let me know.

Finally, it would be very helpful to be able to make use of some of your direct quotes as I think they will add value to the way I report our shared experience of leaving the military and civilian employment. If you are happy for me to use direct quotes in the thesis and future publications, then please could you tell me by return of email as I do not currently have your consent to do so. I will of course endeavour to maintain your anonymity at all times.

Thank you again for all your help with this research project and I wish you the very best for the future.

Yours sincerely,

Dean
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