

The new volunteerism in Norway

*An evaluation of Norway's
first Volunteer Center*

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1. INTRODUCTION

Over the past decade, there has been an ever-increasing interest in volunteerism in Norway. The various political parties have all expressed their interest and support for the new wave of volunteerism. There is, nevertheless, much to be done before the rhetoric turns into action, particularly in terms of involving the municipalities, trade unions, and professional groups in accepting the new ideas.

The new volunteerism in Norway is most easily observed through the recent experiment with volunteer centers. In 1991, the first of 100 new volunteer centers opened in Norway. This report is an evaluation of the first volunteer center which opened in Oslo in March, 1991. The purpose of this report is to tell the story of the development of a volunteer center and to present a method of evaluating the goals of the center. We hope, through this report, to be able to learn more about how to successfully promote volunteer action.

This paper presents the findings of the two year process evaluation of the project Volunteer Center - Region 3 (Ullevål/St. Hanshaugen), and covers the time period March, 1991 through February, 1993. The evaluation was carried out at the request of Volunteer Center's steering committee and was presented to the Norwegian Ministry of Social Affairs

2. BACKGROUND

2.1 Historical Background

A commission to study the role of volunteerism in the public sector in Norway was appointed in August, 1985. The Commission's stated purpose was to examine the activities of volunteer organizations and to offer suggestions which could lead to increased cooperation and involvement between the public health and social service sectors and volunteer organizations. This Commission, headed by Lars Korvald, former Prime Minister of Norway, was composed of 14 members from both the public and volunteer sectors. Various work groups were formed, each headed by a member of the Commission. The results of the Commission's work were presented during the last months of 1987 and are compiled in the publication entitled: Norges Offentlige Utredninger - Frivillige Organisasjoner (NOU 1988:17). This 400 page document pointed to the need for increased efforts between volunteer organizations and the local municipality; a structured and formalized means of interaction was seen as being desirable. The Commission referred specifically to umbrella organizations existing in other countries which serve as a connecting point for volunteer organizations and the public sector and which function to stimulate interest and activity between the two sectors. The Commission also stressed the importance of increasing the availability of public funds to volunteer organizations.

The Commission, in their comprehensive historical review of the development and change in volunteerism and voluntary organizations in Norway, commented on the stagnation within the volunteer sector during the late 1960's and 1970's in terms of the development of the Welfare State. Within the ideology of the Welfare State, it was seen as the State's responsibility to provide for the health and social welfare needs of the people. These services should be available to all through the public sector, thus making the need for volunteer services in the health and social service sector superfluous. As a result, it could be

argued that the growth of the Welfare State contributed to a reduction in the need for voluntary efforts in the health and social service areas. As an example, the Commission reported that in 1970/71, eighty-seven percent (87%) of the 1400 health centers in Norway were run by voluntary organizations. In 1972, a law was passed making the health centers a responsibility of the municipality. By 1977/78 the number of health centers being run by voluntary organizations was reduced to 4 percent. While volunteer organizations continued to be involved in all areas of health and social services, the economic and practical responsibility came increasingly under the auspices of the public sector.

The increased involvement of the public sector in the health and social service sector has proven to be expensive. In the past 20 years, Norway has seen the cost of public employees in the health and social service sector increasing tremendously. Just in terms of man year of work, the increase has been over 200%, from 74,000 in 1970, to 245,000 in 1990. With a projected increase in both the population and the number of elderly in Norway, one can only expect that these numbers will grow unless changes in policy are implemented. At the same time, weak economic growth is predicted, making increased emphasis on alternative means of providing services desirable.

While economic factors are certainly important in terms of increased interest in the involvement of volunteer services in the health and social service sectors, the Commission pointed to other, equally important factors. Volunteer organizations and voluntary activities were seen as having an intrinsic value in themselves. Voluntary organizations have historically been creative in their identification of and solutions for problems, and they are often quite flexible in their ability to implement change within their organizations to meet these needs. This stands in contrast to the public sector which is often more bound to rules and guidelines and generally has less flexibility. Voluntary efforts were also seen as being a realistic alternative to public services in areas where the public sector had difficulty providing services, for example because of skepticism from clients. Voluntary efforts were also seen as functioning to correct the movement in the Welfare State toward creating clients and emphasizing professionalism. Voluntary efforts could provide services within the context of ideological values and beliefs which might be difficult to do within the public sector because of the need within the public to remain neutral in questions of religion and life philosophy. A move toward strengthening the use of voluntary services could also be understood in terms of "humanizing" the health and social service sector by renewing the focus on values of caring, neighborliness, and an interest in helping oneself by helping others.

The Commission's conclusion was that a strengthening of the involvement of the voluntary services in the health and social service sector was desirable, at the same time that it was acknowledged that it would not be a solution to the problems in the health and social service sector. The voluntary sector was seen as having made important contributions within the health and social service sector, and it was seen as having the potential to make even greater contributions. The Commission's recommendation was that efforts be made to find new ways of organizing voluntary efforts which could function to further strengthen the services provided by the public sector.

2.2 Background for Volunteer Centers

The concept of Volunteer Centers received further impetus from ideas presented during a think-tank organized under the auspices of the Department of Social Affairs in February, 1990. Following this think-tank, which involved nearly one hundred organizations, the Syse government recommended the allocation of 30 million kroner to stimulate the development of locally-based Volunteer Centers during 1991. The purpose of these centers would be to coordinate efforts among the already established volunteer organizations in local communities and to provide voluntary services to individuals in these communities needing short-term assistance. The centers would function as a contact point for those providing and receiving volunteer services within the community. The services provided would be a supplement to those provided by the public sector.

The funds (30 million kroner) were made available in the budget presented by the Brundtland Government in 1991. During the course of 1991 and 1992, the funds were distributed to 95 newly-established Volunteer Centers located in the 19 municipalities of Norway for the purpose of developing practical models for mobilizing volunteerism within the health and social service sector.

2.3 Volunteer Center - Region 3

In May, 1990, following active involvement in the Korvald commission and the think-tank of February, 1990, and with many years of experience in the area of volunteer efforts in the health and social service sectors, representatives for City Mission (Kirkens Bymisjon) and Norwegian Red Cross (Norges Røde Kors) presented a proposal for a "Store-front Volunteer Center" ("Landhandel for Frivillige").

The "Store-front Volunteer Center" ("Landhandel for Frivillige"), as the project was originally named, had as its goals: "To coordinate and strengthen existing volunteer efforts in the health and social service fields in one or several city regions ("bydel") and "To mobilize individuals without association with volunteer organizations to become involved in volunteer activities". City Regions 5 (Grünerløkka/Sofienberg) and 3 (St.Hanshaugen/Ullevål) were suggested as possible target areas in part because the City Mission (Kirkens Bymisjon) was involved with centers for the elderly in these areas and because Red Cross (Norges Røde Kors) had active memberships in these areas which could be mobilized for support. Contact with the administration in Region 3 resulted in an agreement to place the Volunteer Center in that area.

3. MODEL

3.1 Different Models

Kirkens Bymisjon and Røde Kors recognized during the planning process that their plans for a Volunteer Center were different enough as to allow for testing out two separate models. The Department of Social Affairs was interested in trying out various models and supported the funding of two separate Volunteer Centers.

The model proposed by Kirkens Bymisjon and Region 3 was that of a "Storefront". The Volunteer Center was conceptualized as a locale strategically placed in the local community with easy access for the residents and local organizations. One of the roles of the Center was to identify the various organizations in the community utilizing volunteers and to assist in channeling the already existing resources to meet identified needs. The Volunteer Center could function to stimulate the passive organizations to greater and more effective activity within the Region by identifying areas of need and developing projects to meet needs. Another role was for the Center to function as a contact point between those who would like to provide volunteer services or "neighbourly help" and the many individuals living in the Region who were in need of assistance. The emphasis was to be on finding new volunteers and tasks within the health and social service sector in the Region which could be carried out by the volunteers. The volunteers would have the Center as their contact point or could be referred to organizations or agencies needing volunteers.

This model was to vary from the model used in Region 10 where the focus was to be on providing new volunteers for already existing organizations. The concept of "one telephone, one person and an office" was in contrast to the "Storefront" concept of the Center as a meeting place.

3.2 Which Model for Region 3?

The proposal for the Volunteer Center in Region 3 used the "Storefront" concept as its starting point. It was emphasized that actual experience would be the determining factor in terms of how the Center developed and that the model could be modified over time. Over the two year period the Volunteer Center has been in operation, it has maintained the profile of "Storefront". Various volunteer activities have taken place at the Center including legal assistance, a holiday crisis telephone, a painting class, monthly meetings for volunteers, publication of the newspaper Oss I Mellom (Between Us), a self help group, and free economic advise, among others. The concept of the Center as a drop-in center for people interested in meeting people and exchanging ideas has not, however, developed. While there has been interest expressed in having this type of Center by a number of volunteers, it has not been made a priority by the Steering Committee. This is an issue which can be drafted within the Advisory Committee and the Steering Committee.

4. EVALUATION AND METHOD

4.1 Background for Evaluation

In the initial proposal for "Store-front Volunteer Center", the need for evaluation of the project was presented. An evaluation was seen as being necessary in order to chart the effort underway and to assure that the experiences obtained during the project could be carried further. A researcher was to be hired for the project from the very beginning and was to continue through the two year project period. The researcher was to describe the activities of the project, the efforts at coordinators these activities and the efforts at mobilizing volunteers. The methods used were to be primarily participant observation and collection of information. The evaluation was to be process oriented.

A researcher from Diakonhjettets Forskningsavdeling was hired in April, 1991, in a 20% position over two years to conduct the evaluation. During the two year evaluation, working papers were prepared after each six month period and were presented to the Steering Committee as a part of the evaluation process. These working papers were maintained as in-house documents to be utilized by the Steering Committee and the Co-ordinator of the Volunteer Center. The intention of these papers and the evaluation process as a whole was to provide a mirror of the events occurring during the development of the Volunteer Center which would then, in turn, allow those involved with the project to make necessary changes underway.

4.2 Process Evaluation

Evaluation is generally thought of as a method of determining the degree to which a planned program achieves the desired objectives. Since the early 1930's, the concept of "goals" has been an important aspect of evaluation. One strives to assess whether the initial goals of a program have or have not been met and to explain why this has happened. This information can then be used to guide future program planners towards a successful project. Evaluation involves the systematic collection of information regarding the goals, activities, and results of a project.

For the Volunteer Center, it was requested that a process evaluation be carried out. According to Vislie (Anne Vislie, 1987), "Process evaluation means that one focuses on the process, on what happens during the course of the project and the interaction between the various participants in order to explain why a particular result that has occurred. This can be done by focusing on the process underway but can also be done retrospectively. Thus, process evaluation can also be summative."

In a process evaluation, the evaluator follows the project closely over a relatively long period of time and is instrumental in forming the project. An important goal is to understand what is happening during the course of the project. In order to do this, qualitative methods of evaluation are the primary tools used. Participant observation, interviews (face to face, telephone, or written), review of written material, keeping a journal, and regular contact with the project are important aspects of this type of evaluation. In process evaluation, an external researcher collects information and, instead of keeping the information and judgement until

the final evaluation report, tells people involved of the impressions and conclusions that emerge as the research progresses. These ideas and recommendations can then be incorporated into the work of the project and the evaluation continues. This kind of evaluation will ideally develop into a constant process of information exchange and feedback. One of the purposes of process evaluation is to open for the possibility of change at any point during the project period.

4.3 Problems in Process Evaluation

Regardless of the type of evaluation to be carried out, there are inevitably problem areas to be confronted. In a goal-oriented evaluation, the issue of real versus official goals must be tackled. Are the written goals, in fact, the real goals of the program and are they realistic, that is, not too idealistic? For example, one of the initial goals for the Volunteer Center - Region 3 was "to coordinate the existing volunteer care in the Region". This goal was not included in the final project goals as it was seen as being an unrealistic goal for the two year project. The assumption that a newly founded Volunteer Center would have as its goal to coordinate already existing volunteer organizations was seen as an undesirable goal from the perspective of these organizations.

In a process evaluation there are special problems to be considered, particularly when the project is composed of one employee with responsibility for all areas of the project. In a two-year process evaluation such as the one carried out here, close contact with the co-ordinator is required. It requires that specific types of information be gathered by the co-ordinator and made available to the evaluator; it means that the co-ordinator will have an observer at many of the meetings, it means regular meetings with the co-ordinator where information will be exchanged in both directions and ideas will be discussed; it requires that the evaluator interview those having contact with the co-ordinator to exchange information regarding how the project is developing; it means reading all of the written material prepared by the co-ordinator; and it means evaluating the project and ultimately the co-ordinator. All of this is time-consuming and brings up the issue of evaluating the co-ordinator along with the project. For some, this can be an uncomfortable process.

The human, interactional aspects of a process evaluation must be taken into consideration. Issues of control can easily come into play with any type of evaluation, but particularly with a process evaluation. For example, when the evaluator observes a meeting, interviews one of the participants of the meeting, and is then to provide feedback to the co-ordinator, the potential for conflict is there. A great deal is dependent on the original contract between the evaluator and the project's co-ordinator (clear expectations) but also on the individual working styles of the evaluator and administrator. For the evaluator this means awareness of one's own working style and its impact on others, skills at conflict resolution, and degree of closeness or distance to the project. For the co-ordinator, it means the ability to be open to new ideas and to avoid a defensive stance.

A process evaluation can be a time-consuming endeavor for a program co-ordinator. This evaluation was no exception. Initially, an information logging system was developed and had to be faithfully carried out during the two years of the project. The process of recording all contacts with all individuals, organizations and agencies, whether by telephone, letter or

face-to-face, and to make this information readily available to the evaluator was in itself a time-consuming process. It should be noted that the project did not acquire a computer until its second year so that all information was hand-written. In addition, regular weekly meetings were scheduled between the evaluator and co-ordinator, and the evaluator was present at meetings scheduled by the co-ordinator with various volunteer and public service agencies in the Region. For a co-ordinator who does not like someone looking over his shoulder or for an evaluator with a "pushy" personal style, this type of evaluation would present many possibilities for conflict.

With respect to the current evaluation, the working relationship between the Co-ordinator and evaluator functioned well. The evaluator's own knowledge of volunteer work and perspectives from different cultures was understood as an asset by the Co-ordinator and provided a valuable basis for discussion and exchange of ideas. The Co-ordinator's professional background in the health field and personal working style were such that the process evaluation format was not perceived as an issue of control. While it was necessary at various points during the two year period to renegotiate certain aspects of the working relationship, this was done in a satisfactory manner and allowed for a continued, positive working relationship.

In planning a process evaluation for further projects, the above mentioned issues should be kept in mind. Of absolute importance is the need to have clear contracts and expectations with the evaluator and the co-ordinator regarding the evaluation (as was the case with this evaluation) - for example, that project time is going to be used for the evaluation, thereby leaving less time for the project itself and that the evaluator will be "shadowing" the co-ordinator. Also, ideally, the evaluation process should begin before the program itself is underway. This would allow for the evaluator to be involved in the program planning process and to be involved in developing the system for information gathering.

The primary purpose of the evaluation has been to document the project, both with respect to the original goals and the modifications that have taken place underway. The steering committee was also interested in learning to what degree the conditions in the local community influenced the outcome of the project, how the administrative conditions functioned, who the volunteers were and what factors affected their motivation, and what kind of working relationship the Volunteer Center was able to develop with the public sector and the volunteer organizations in Region 3.

4.4 Project goals

The goals for the Volunteer Center - 3 were specified in the program plan for the first six months of 1991. This plan was approved by the Steering Committee on April 15, 1991. The primary goals for the project were stated as follows:

- 1) To map the organized and non-organized volunteer work in the health and social service sector in the Region.

- 2) To map the various jobs in the health and social service sector that could be carried out by volunteers.
- 3) To be a contact point between volunteers and users of volunteer services.
- 4) To improve the existing volunteer efforts and to make available new volunteers.
- 5) To inform about the project.

4.5 Method and gathering of Data

In obtaining data for the evaluation the following methods were used:

Review of written material: From the outset of the project, all contacts by the administrator were recorded in written form and organized in various notebooks. Each telephone call, letter or personal contact was listed according to organization, agency or individual name. These notebooks were reviewed on a regular basis, as were various forms of correspondence, registration forms, notes from meetings, etc.

Participant Observer: The evaluator attended meetings of both the Steering Committee and the Advisory Committee during the two year period of the project. In addition, the evaluator was in regular attendance at many of the meetings the Co-ordinator scheduled with employees in health and social services in Region 3, individuals working in voluntary organizations in the Region, co-ordinators of other Volunteer Centers, and meetings with various organizations to discuss potential projects.

Meetings with the Administrator: Initially, the evaluator met with the Co-ordinator several hours weekly to review the entire weeks activities and to provide feedback and to discuss the projects activities. After three-quarters of a year, these meetings were reduced to every other week and by the end of the project the meetings had been moved to once a month.

Interviews: Interviews with various participants in the project were carried out during the 2 year project period. The evaluator or social work students supervised by the evaluator interviewed members of the Advisory Committee, members of the Steering Committee, members of the Regional Board (Bydelsutvalget), employees in the public sector in the Region, individuals who had volunteered with the project, individuals using the services of the project, those involved in various volunteer organizations in the Region, and residents of Region 3. Interviews were carried out either by telephone or on a face-to-face basis.

Questionnaires: Questionnaires were sent to all individuals who had registered as volunteers with the Volunteer Center and to a sample of individuals working in the public sector in health and social services.

Journal: The evaluator maintained a journal of all contacts regarding the Volunteer Center at which the evaluator was present. Process notes were kept for all steering committee meetings, meetings of the advisory committee and other meetings between the Co-ordinator and individuals working in Region 3. Notes were also kept for the meetings between the Co-

ordinator and the evaluator. This journal provided a running commentary of the development of the Volunteer Center from the evaluators perspective.

5. ORGANIZATION, LOCALE, PERSONNEL AND ECONOMY

5.1 Personnel

The Volunteer Center was manned with one salaried position. Assistance to the Co-ordinator was obtained through volunteer help.

The Co-ordinator position required an individual with higher education and experience in administration. The individual was also expected to have experience in working with the municipality, project work and volunteer organizations.

After two years of following the project it was clear that, in addition to the formal education and experience requirements, the Co-ordinator should also have a high level of energy, the ability to balance and juggle a large number of various tasks, the perceptiveness to deal with the interpersonal issues arising with volunteers and between volunteers and users, the ability to recall which, out of 160 volunteers would best fit with a new user, the creativity to plan and develop new projects, and the finesse to market a new concept of volunteerism to already-existing volunteer agencies. The Co-ordinator position required many more skills than were specified in the job description.

Using volunteers to man the office had mixed success. As with any job, there was some degree of turnover. A few volunteers worked in the office for only weeks or a few months, while there have been others have worked during the entire project period. Funding through Employment Office allowed for at least one volunteer to combine volunteer work with a salary and to work for the Center for nearly two years.

The issue of contracting with volunteers and setting clearly specified expectations for volunteers was one area that needed to be more closely addressed by the Volunteer Center. Both with respect to volunteer contacts with individuals needing assistance and in using volunteers to man the Volunteer Center, there needed to be clearer expectations and clarification of duties. While this has always been a controversial area in volunteerism, it is nevertheless an important one. If the office and individuals needing assistance are to be dependent on volunteers, they must be able to know when and how they can depend on them.

5.2 Locale

Experience indicated that the location of the Center is not as desirable as initially thought. The majority of those who used the Center, and the general population in Region 3, resided further south in the Region, and most of those passing the Center were people in transit (either on their way to Ullevål Hospital or making transportation connections). As a result, the Center was not in the correct type of neighbourhood for a "landhandel". The offices were owned by the Region government and plans were underway at the time of the

evaluation report to renovate the building for other purposes. While the timing of this was uncertain, renovations were already underway in a neighbouring building. As a result of these considerations, the Co-ordinator had begun looking for new premises for the Center. The recommendation made by the evaluator was that the Center should be maintained as an independent locale and should not be housed in conjunction with other public service or volunteer agencies. It was further recommended that effort should be made to find a location in a shopping area or other natural gathering area for residents in the Region.

5.3 Organization

The Volunteer Center was organized with a Co-ordinator, a Steering Committee and an Advisory Committee.

The Steering Committee was highly supportive of the Co-ordinator in her efforts to develop a creative and wide-reaching Center. The relationship between the Steering Committee's trust, respect and belief in the Co-ordinator's ability to direct the project, and the Co-ordinator's desire to work independently had to be balanced by the Co-ordinators need for feedback and involvement on the part of the Steering Committee. This was highlighted by one issue that came before the Committee several times over a period of some months. It was not until late in the planning project that the Committee voiced its objections clearly. The project was dropped but not without the loss of many hours and a great deal of hard work. In this instance, a clearer expression of the Committee's reservations to the project would have been valuable.

Both City Mission and Region 3 were represented on the Steering Committee. Both of these agencies had wide-reaching contact in the public service area in the Region and had potential to market the Center in their respective areas. It was recommended that the members of the Committee, and particularly those representing the Region, would need to take on a greater "ownership" role. This would include utilizing their roles and organizations to market the Volunteer Center and to smooth the way for volunteers into the health and social service sector in the Region.

The Advisory Committee was composed of 7 regular members including individuals working in health and social service fields both within Region 3 and in other geographical areas. There was one volunteer on the Committee. The Committee had its first meeting in December, 1991 and met three times during 1992. The purpose of the Committee was to provide inspiration, ideas and constructive criticism. Attendance was variable. Many of the members saw their role as advisors as being useful to the development of the Center, while others wanted the Committee to be a forum for the exchange of ideas and projects regarding their own work-place. The Co-ordinator felt the Advisory Committee was helpful to some extent but that there needed to be a greater influx of ideas and a broader contact with the community. The recommendation of the evaluator was that a regular rotation of the members would be desirable and that "natural helpers" in the community should be included as members of the Committee.

5.4 Economy

The total budget for the two year period has been just over 1 million kroner. An extra 80,000 kroner was provided by Ministry of Social Affairs for the newspaper Between Us.. Seventy-three percent of the funds available were used for salaries. The economic framework for the Center limited the flexibility of the Center but, at the same time, encouraged the utilization of volunteers to carry out various tasks. This was a desirable result of fiscal frugality. The negative outcome was to limit the Co-ordinator's opportunities to visit other Centers both within and outside of Norway and to participate in external seminars. The funding ceiling limited the potential for publicity, thus restricting accessibility to all households in the Region. The lack of funds for a computer, software and computer training for the Co-ordinator resulted in an inordinate amount of time being used to hand-log all contacts with users, volunteers and various organizations and agencies. It was not until well into the second year of the project that software was made available by the Department of Social Affairs. The evaluator recommended that up-to-date computer hardware and software, plus appropriate training in the use of the system be made available to the Co-ordinator and volunteer office personnel.

6. VOLUNTEER ORGANIZATIONS

During the first year of the project the Co-ordinator had as a goal to map the various volunteer organizations in the Region. A major portion of the Co-ordinators work hours during the initial six month period was directed toward identifying, contacting and developing a working relationship with these agencies.

The Co-ordinator contacted a total of 147 volunteer organizations and special interest groups during the first year of operation. During the first six months alone, the Co-ordinator had over 350 telephone, postal or face-to-face contacts with the various agencies. In spite of numerous contacts with the various organizations, little developed in terms of co-ordinated by the completion of the evaluation period. While a number of organizations were active in Region 3, including Kiwanis, Lions Club, and the Retired Peoples Organization (Pensjonistforening) among others, they had little time or reason to become involved with the Volunteer Center. There were some exceptions. Telephone Contact was one volunteer agency with which the Center had regular contact and with which it developed a working relationship. The Volunteer Center and Telephone Contact together developed a co-operative effort with respect to the telephone crisis line (REM). The Volunteer Center's efforts to develop a traffic safety program in Region 3 brought them into contact with some of the local volunteer groups (Velforeniger). Kiwanis expressed an interest in working with the various Volunteer Centers on a project in conjunction with Services for Criminals in the Free (Kriminal Omsorg i Frihet).

In general, however, the efforts to develop a working relationship with the various volunteer organizations was successful on a very limited basis. This issue was discussed in a Steering Committee meeting in 1992. The consensus at that time was that there were many areas to focus on for the Co-ordinator, that it was impossible to put extra effort into all of these areas at the same time and that the relationship between the Volunteer Center and the Volunteer Organizations would require time to develop. It was agreed that the Co-ordinator would

continue to maintain contact with the various organizations and to focus on those organizations where interest had been expressed.

It is useful to note this development in terms of the choice of a model for a volunteer center in Region 3. One can speculate as to how the Volunteer Center in Region 3 would have developed had the primary focus been on developing the Center as a contact point between the already existing volunteer organization and those needing volunteer services. The volunteer organizations in Region 3 indicated that they had more than enough to focus on with their own organizations and had little time or initiative available to work with new projects. It was anticipated that over time a greater degree of co-operation would be possible.

7. EMPLOYEES IN THE PUBLIC SECTOR AND POLITICIANS IN REGION 3

7.1 Contact with the Public Sector

A primary goal during the initial phases of operation for the Volunteer Center was that of contacting the various health and social service agencies in order to develop a working relationship. During the first six months of the project the Co-ordinator contacted a total of one hundred twenty-six (126) various agencies within the Region. This number was expanded to 191 during the second half of the year. The Co-ordinator was in contact with all of the public services agencies, centers and institutions for the elderly, day care centers, schools, programs for the mentally retarded, and the private health care providers in the Region. Meetings were scheduled at the various agencies and telephone and postal contact was made. Brochures and posters were sent to all of the agencies. Letters were sent routinely from the Volunteer Center to inform the various agencies of activities at the Volunteer Center to invite the agencies to refer to the Volunteer Center. Through the advisory committee and contact with representatives of the public sector, efforts were made to obtain and further develop ideas for utilization of volunteers in the public sector in Region 3. The long term results of these efforts were mixed. While the public service agencies made referrals to the Volunteer Center and the center provided volunteers, there were other areas, for example with self-help groups, where the Center and the public sector were not successful in developing a working relationship. To obtain a better overview of the relationship between the Volunteer Center and the public sector, a survey was planned and implemented during 1992.

7.2 A Survey of the Health and Social Service Personnel in Region 3

As part of the evaluation of the Volunteer Center, contact was made with more than 90 individuals employed in the public sector in Region 3. Individuals working in the following areas were included in the study: Department of Social Services, Home-based services, schools, physical therapists, services for children and youth, congregations, health services (physicians, nurses, hospital employees) and those working in the administration for the Region. Both senior employees and grass roots employees were included in the interviews. The majority of the interviews took place during the Spring and Fall of 1992, while others took place before or after this period.

The following issues were of particular interest for the evaluation:

- * Were those who are currently employed in the public sector in Region 3 informed about and involved in the initial planning for the Volunteer Center?
- * Did the public service employees know about the Volunteer Center in Region 3?
- * What were the employees attitudes toward the Volunteer Center in Region 3?
- * How did the referral process functioned from the viewpoint of the public service employees?
- * Did the employees in the health and social service sector referred people to the Volunteer Center in Region 3? What are the employees attitudes toward volunteer work within the health and social service sector?
- * What were the employees attitudes toward the projects the Volunteer Center is planning? Is there support for these projects?
- * How informed were the employees as to the Volunteer Center in Region?

7.2.1 Were Those Currently Employed Informed About and Involved in The Initial

Planning for the Center?

Yes 23%
No 77%

The majority experienced that they had not been informed about the plans for the Center and had attended what they experienced as an information meeting. They did not perceive the planning meeting to be a planning meeting at all. Those interviewed reported that their input was sought only after the Center was opened, when the Co-ordinator contacted them and asked directly for ideas and

The Center was seen by many to be a potential source of competition for their services. The Center was not initially experienced as being an agency that could supplement the public health and social service agencies.

7.2.2 Did The Employees Know About the Center?

80% knew that there existed a Volunteer Center in Bydel 3.
65% were familiar with the Center, knowing of its location, the name of the Co-ordinator, and its purpose.

Of the 20 % that did not know of the Center, most were employed in either children and youth services or Ullevål Hospital.

The majority of those who were informed had received their information through the efforts of the Co-ordinator from the Volunteer Center. This information was strengthened through information from the media.

While information was received repeatedly by all of the agencies involved in the survey, it appeared that information did not always filter down within the agency.

7.2.3 What Were The Employees Attitudes Towards Volunteer Work Within the Health and Social Service Sector?

73% were positive toward using volunteers in the public sector.
6% were clearly negative toward using volunteers.

For those who were negative toward the use of volunteers, the reasons presented included a belief that everyone should be paid for their work, that the municipality/state had an obligation to provide the necessary services and volunteerism would reduce the pressure to meet this obligation, and that the use of volunteers would mean a reduction in competence.

Many of the 73% who were positive toward the use of volunteers, had certain conditions to their acceptance. These conditions included many of the same reservations presented by those who were negative to the use of volunteerism in the public sector. There was particular concern for competition - specifically that volunteerism would allow for a shirking of responsibility on the part of the municipality/state. There was concern that certain programs, for example "Big Brother/Sister" would be turned over to volunteers and, as a result, that the degree of professionalism would be reduced.

7.2.4 How Did The Referral Process Function?

50% indicated that they had made at least one referral to the Volunteer Center. In 50% of the cases the referral agent had received information back regarding the referral.

The agencies reported that they generally encouraged the client to make the referral themselves and did not step in and act as the referral agent. This was done 1) to put the responsibility in the hands of the client where the public service worker felt it belonged and 2) to reduce the time demands involved in what was seen as cumbersome paperwork for a referral.

When the employee made the referral, they received feedback in one form or another in 80% of the cases. When the client was given responsibility for making contact with the Center, feedback was received in only 20% of the cases.

7.2.5 Did the Public Service Employees Refer to the Center? What Were Their Attitudes About the Center?

Referrals from public service agencies in 1991 totalled 65. The majority came from Home-based health and general-care services. There were 56 referrals in 1992, the majority again coming from Home-based health care and centers for the elderly. There were fewer referrals from Home-based general care.

Employees in health care in the Region indicated that reorganization in the Region put additional demands on their time. This made the referral process for the Center additionally difficult. Others referred to conflicts around the needs of the individual client and the experience that the employees, clients and Volunteer Centers volunteers' perception of need varied.

7.2.6 What Were The Public Service Employees Attitudes Toward The Projects The Volunteer Center Was Planning? Was There Support for These Projects?

There was general support for the need for self-help groups and a crisis telephone in the Region. Those interviewed supported the Center's involvement in planning these projects but expressed the opinion that the activities would be better located in already existing organizations. For example, a crisis telephone for elderly would be more appropriately located in an institution for the elderly than in the Volunteer Center.

7.3 Politicians

Telephone interviews with politicians in Region 3 resulted in a general positive attitude toward the Volunteer Center. The "landhandel" model received support from the majority and there was support for the use of volunteers to supplement the public health and social service sector. The politicians emphasized the need to focus on the Region and to utilize the services of the Center for the residents of the Region. There was agreement that certain activities, for example, self help groups could possibly require cooperation with other Centers in order to obtain enough members for a group. It was generally expressed that providing services for residents outside of the Region should be quite limited. Another issue brought forward in the interviews was the need for additional involvement on the part of the administration of the Region in bringing volunteerism into the health and social service sector. While many of the politicians supported funding for the Center through use of Regional funds, others were clear in their belief that this economic support should be temporary.

8. INFORMING THE PUBLIC

During the course of the first year of the project, the Co-ordinator of the Volunteer Center had been in contact with 367 various organizations represented in Region 3. These included volunteer organizations such as Kiwanis, Lions Club, and local volunteer agencies (velforeniger), special interest organizations such as Parent's Association for Children with MBD (Foreldreforening for MBD Barn), and various public services agencies such as the churches, schools, and health and social service agencies. All of these organizations and agencies were informed of the Volunteer Center and many were contacted on numerous

occasions. A total of 5000 brochures and 500 posters were distributed throughout Region 3 in 1991 alone in an effort to inform both employees and residents in the Region of the Volunteer Center.

In contacting these organizations and agencies, the Volunteer Center was interested in making as many aware of the new Center as possible and to invite those representing the organizations to refer potential volunteers or individuals who might be in need of assistance from a volunteer. They were also encouraged to contact the Volunteer Center in the event their organization or agency could utilize the assistance of a Volunteer or could provide some service.

Efforts were also made to inform the general public regarding the Volunteer Center. Brochures were distributed at local grocery stores and hair salons and posted in stores and on bulletin boards in Region 3. The Co-ordinator contacted various newspapers, magazines, and radio stations and was successful in getting the Volunteer Center publicized through these channels. One local newspaper offered a free column in their paper, Aftenposten ran several articles on the Volunteer Center, a local radio station invited one of the volunteers to be on radio and the Center placed paid announcements in the country's major newspaper. The Volunteer Center was presented as a part of City's Missions' Drive (Kirkens Bymisjons Lyst i Mørket aksjon) in late 1991. A popular magazine ran an article about the Volunteer Center in Region 3. As a part of the evaluation process, students from the Norwegian Lutheran College (Diakonhjemmet Sosialhøyskolen) contacted key individuals in Region 3, thereby informing over 100 residents of the Center. In late 1992, in co-operation with the Ministry of Social Affairs, the Volunteer Center in Region 3, in conjunction with the other volunteer centers, published a newspaper on volunteer efforts which was distributed to 80,000 residents in the various Regions of the city.

In addition to telephone and postal contact, the Co-ordinator scheduled meetings at the Center and at the various agencies and organizations to present the Volunteer Center and to discuss the possibilities for working together in the interest of the residents of Region 3.

As a result of these efforts, the Volunteer Center could report having registered 52 volunteers and 105 users by the end of the first calendar year. By the end of the second calendar year, a total of 152 volunteers and 247 users of volunteer services were registered.

	Volunteers	Users
1991	52	105
1992	<u>100</u>	<u>142</u>
Total	152	247

The Co-ordinator of the Volunteer Center in Region 3 used large amounts of time and funds to publicize the center. The process of informing the public proved to be a long-term process - information had to be sent out regularly and repeatedly. Experience proved that material sent to organizations, schools or other agencies was often read by the person receiving the

material but did get distributed to others in the organization. Telephone contact with various special interest organizations supported this. Many of the organizations which had received brochures and posters, on contact six months later, could not recall having received the material.

9. THE VOLUNTEERS

9.1 Socio-demographic information

During the two year project period, 160 individuals registered as volunteers with the Center. In order to register, each volunteer was interviewed by the Co-ordinator, completed a registration form and signed a form assuring confidentiality.

The volunteers were primarily women (77.8%) between 20 and 40 years of age (50%) or between 40 and 66 years of age (29%). Only 18% of the volunteers were over the age of retirement. The majority were living alone (61.8%) and were either employed or studying (69%). Eight percent were unemployed and five percent were "homemakers".

9.2 How much free time did the volunteers have?

Few of the volunteers had any additional time to give to their volunteer work (20%). The majority were satisfied with the amount of volunteer work in which they were involved (70%).

9.3 How did they learn about the center?

The majority of the volunteers learned of the Center through friends and acquaintances (23%). Others means of learning of the Center were through posters distributed by the Center (18%), through local and national newspapers (18%), and through contact with the public sector in the Bydel (14%). Only 3% learned of the Center through radio programs.

9.4 Did the center recruited new volunteers?

Of vital interest to the concept behind the Volunteer Center was the need to recruit new volunteers - individuals who had never worked as volunteers for other organizations. Results of the evaluation indicated that the Volunteer Center had recruited primarily new volunteers. Seventy-six percent of the volunteers had never been involved in volunteer work prior to their contact with the Center.

Of the twenty-four percent who had previously done volunteer work, only six percent left their work with another organization to begin at the Volunteer Center. The remainder expanded their volunteer work.

9.5 What motivated people to do volunteer work?

The primary internal motivational factors reported by the volunteers were a belief in a more humane society and a desire to "help others". Religious factors and a desire to improve chances in the job market held little importance. One external factor of importance was the type of volunteer jobs available. Making known specific jobs available at the Center would be an important way of involving new volunteers.

The volunteers were a diverse group expressing different motivational factors and interests. Nineteen percent were motivated by a desire to develop new skills, fourteen percent were motivated by a desire to avoid loneliness, and thirty-three percent wanted to meet new people and make new friends. The evaluator stressed the importance of recognizing and supporting these individuals and the differing needs they brought to their work as volunteers.

9.6 Were the needs of the volunteers being met?

Contact with the volunteers was maintained by the Center through monthly volunteer meetings, tri-monthly evaluation forms, and monthly telephone contact with the Center. In addition, the Center was open on Tuesday evening for any volunteer wishing to drop in.

Only 25% of the volunteers reported ever having attended the monthly meetings and only 9% attended them on a regular basis.

Twenty-five percent of the volunteers wished for a different type of social contact with other volunteers. Many of these expressed a desire to have a "open house" system at the Center where it would be possible to stop in for a cup of coffee.

There were a number of volunteers who expressed a desire to be more involved in the running of the Center in order to make the Center a place for volunteers.

Very few were interested in receiving training through the Center.

Many (36%) expressed an interest in neighbourhood contact with other volunteers living in their neighbourhood. The idea of a volunteer-user pair visiting another volunteer-user pair living in the same street was an interesting idea for many.

9.7 Were the volunteers satisfied with the Center?

The majority of the volunteers were satisfied with the assignments they have received through the Center (66% for first assignment and 86% for all assignments) and felt they had received the support they needed from the personnel at the Center (93%). Eighty-one percent evaluated the Center as functioning well while 15% said the Center had some problems. Screening for participants on the crisis line was identified as a problem area.

9.8 Type of volunteer jobs.

The Volunteers were involved in a variety of assignments. The majority provided visitation services or otherwise assisted an elderly person. Other activities included providing legal advice, providing transport, teaching a painting class, handling publicity for the Center, caring for a child, and manning a crisis telephone.

Efforts to start self-help groups were slow and difficult. By the end of 1991, there was only one active self-help group. Several other groups began in 1992, including a painting class, a club called Being Together, and a friendship club for people over 40. Referrals for the various self-help groups were not forthcoming.

During 1992, twenty-five middle school students became involved in volunteerism through their schools. These students gave an average of 60 hours each during the school year to work in centers for the elderly or a day care center.

A holiday crisis telephone was started by Norsk Folkehjelp in conjunction with Telefon Contact, the Volunteer Center in Region 3 and the other volunteer centers in Oslo. The Volunteer Center provided volunteers and organizational assistance in manning the Easter and Christmas crisis line.

The Volunteer Center was able to offer free plumbing assistance in conjunction with a local plumbing company.

A number of other projects were either underway or in the planning at the time of the evaluation- these included a cooperative effort with Criminals in the Free, Baby Holders, Traffic Safety, and Psychological Counseling.

9.9 Hours of volunteer work.

During the course of 1992, the Center provided an average of 10,160 volunteer hours of work time (not including travel time). This was equivalent of 5.9 man hours (man year).

9.10 Goal of the Project.

One of the goals for the Center was to recruit new volunteers and to provide a contact point for volunteers and those needing volunteer assistance. The above information provides a strong basis for saying that this goal was met during the project period.

10. USERS OF VOLUNTEER SERVICES

Upon contacting the volunteer center with a request for volunteer services, the individual or the referring agencies was asked to complete a registration form indicating the type of assistance requested. In many cases these forms were completed by a representative of the referring agency, for example a home service employee. The Co-ordinator spoke with the

individual by telephone and would then assess the request and attempt to match the request with an appropriate volunteer. In order to carry out this matching of volunteers and users it was necessary for the Co-ordinator to have a comprehensive overview of the various volunteers, their interests, and their availability as well as the needs of the individual user. In the absence of an appropriate computer program during the initial project period, the necessary information was maintained in hand-written binders.

Information regarding the users was obtained from several sources. The first was from the records maintained at the Volunteers Center, the second was through the volunteer who maintained telephone contact with the users and the third was through a survey carried out by the evaluator and social work students.

In the Spring of 1992, the evaluator, along with a group of last year students in social work at the Norwegian Lutheran College School of Social Work (Diakonhjemets Sosialhøyskole), contacted all of the users registered with the Center between March, 1991 and February, 1992. The users were asked to participate in interviews to answer questions regarding their contact with the Volunteer Center. At the time of the study, there were sixty (60) users registered with the Center and having contact with a volunteer. The students, using a questionnaire, visited a number of the users to interview them personally. The information obtained from this survey is presented below. Because of the age and general health and life situation of many of the "users" it has not been possible to obtain the same extensive information that was obtained regarding the volunteers. Many of the users had difficulty seeing and writing and the majority were not interested in being interviewed by or completing questionnaires for people they did not know. The option of having each volunteer interview their own users was discussed but dropped due to time and manpower constraints.

10.1 Demographic information

The users of volunteer services totalled 247 by the end of 1992. This included 223 individuals and 24 organizations.

The majority of those requesting volunteer services were elderly women (91% women; 72% over the age of 70 years). All of the users live within Region 3, with an overrepresentation of users from the area south of the Volunteer Center. An exception to this was with respect to the crisis telephone aid.

10.2 Initial contract

The majority of the referrals for users were made by the individuals herself or a family member (56%). Twenty-five percent of the referrals came from either home-based nursing or home-based care.

10.3 Matching users and volunteers.

In eighty-five percent of the referrals the Center was able to find a volunteer for the individual requesting assistance. In twenty-three percent of these cases, the user withdrew their request after a volunteer was assigned. Reasons for their withdrawal varied but it was clear that many of the elderly were uncertain about having a stranger come to their homes.

10.4 Contact with users.

In order to maintain contact with all of the users, the Center provided a monthly telephone service. Once a month a volunteer permanently assigned to the task called each of the users to hear how the volunteer-user arrangement is functioning and to provide a degree of continuity with the center.

A survey with the users was attempted in 1992 but few of the users were willing to participate. Of those who did participate, the majority had heard of the center through the public sector. The majority wished for even more contact with the volunteer than they now had. Seventy-seven percent were very satisfied with their contact with the Center and the volunteer. None expressed that they were dissatisfied. The majority received assistance from the home-based care services in the Region but they felt that the volunteer help was an important supplement to this.

11. CONCLUSIONS

The results of the information obtained through the process evaluation were weighed against the initial goals for the Volunteer Center. The conclusion of the evaluation report was that the goals for the Volunteer Center, as stated in the initial proposal, were met.

The Co-ordinator, through her contact with the 150 various volunteer organizations and more than 190 public agencies had both informed the public and mapped the various needs and services in the Region. Working relationships were developed with a number of these agencies, both in the public sector and in the volunteer organizations. This was no easy accomplishment, particularly with respect to the volunteer agencies. Few of the volunteer organizations in the Region responded to the Centers invitation to cooperate on projects. The organizations were involved in their own projects and own membership. Nevertheless, steps were taken in the right direction. After numerous contacts with the various neighborhood organizations, interest was building to work with the Center on a traffic safety project for the Region. This was an area where it was clear that additional time, effort and creativity would be required to get a program underway. The mapping of needs within the public sector in the Region was another area where continued effort was desirable. In addition to contact through the Advisory Committee and through referrals received from the public sector, the Center had a member of the Region administration on the Steering Committee as a source of information regarding the Region. In that the new PRO director for the Region would be sitting on the Steering Committee, it was anticipated that there would be even greater opportunity to obtain feed-back from the Region. It was deemed important that the Center obtain information regarding the type of services which were needed and what kinds of

services or projects would be redundant. The administration of the Region was also in a position to legitimize the role of the Center within the health and social service sector.

The Center functioned as a "connector" between the volunteers and users of volunteer services. At the end of the project period a total of 160 volunteers and in excess of 250 users of volunteer services were registered with the Center. The majority of the users received the type of assistance requested and the majority of the volunteers maintained contact with the center. The volunteers were well satisfied with their assignments and with the Center as a whole. During the course of the project period, the volunteers provided 15,240 work hours. During 1992, they provided 5.9 man hours of work (excluding travel).

The Center functioned as a contact point for the volunteers through its monthly meetings, regular telephone contact and assessability. A group of volunteers expressed an interest in having the Center as an informal meeting place and being more involved in the operation of the Center. These were issues that needed to be addressed by the Steering Committee at a later time.

The Center also met its goal of improving the existing volunteer efforts in the Region by providing for unmet needs and by recruiting new volunteers. The volunteers recruited were primarily new volunteers who had never before been involved in volunteer work. Only six percent had left other volunteer organizations to begin with the Center. The work of the volunteers was primarily to assist the elderly in the Region. Many were already receiving home-based care through the public sector but were in need of additional assistance which was not available through the Region. The Center, through its efforts in involving middle school students in volunteerism, provided 25 volunteers in a child care center and in centers for the elderly in the Region. The Center provided volunteers to Criminals in the Free which is located in the Region and to the REM telephone which provided holiday crisis telephone help to residents of the Region. The Center was also active in starting self-help and special interest groups for residents of the Region. Free economic, legal and psychological help are other services now being provided to residents of the Region through the Volunteer Center.

The final goal of informing those living and working in the Region of the Volunteer Center was also met. The majority of those surveyed who were working in the public sector were aware of the Center as were the several hundred who contacted the Center during the two year project period. The Co-ordinator was active in devising ways to inform the public. The dissemination of information was accomplished through meetings, public talks, brochures, posters, local and national media, publication of a volunteer newspaper, church bulletins, contact with schools, television announcements, stands at local shopping areas, and many more. It was determined that the time now was ripe for a national campaign supported by the Department of Social Affairs and in conjunction with a new local effort. Informing the public requires visibility and repetition.

12. VOLUNTEER CENTER TODAY

The Volunteer Center continues to function as a center for stimulating and developing volunteer efforts for individuals, groups, and organizations in Region 3 in Oslo, Norway. Three major changes have occurred since the completion of the evaluation report in 1993.

As planned and hoped, the Volunteer Center has acquired new offices, located more strategically in the heart of the populated area of the Region. The move took place during the fall of 1994, and the Center is still settling into its new surroundings. During the moving period, some activities had to be temporarily discontinued or moved to other Centers, and there was a temporary decrease in the number of active volunteers. The annual report which was distributed in late January, 1995, showed that the number of volunteers was again on the increase, up 32% from the previous period.

A second major change that occurred was in the funding source for the Center. At the end of the evaluation period, the Volunteer Center was receiving 21 % of its funding from Region 3. Beginning in 1995, that funding was discontinued. The Volunteer Center no longer receives any funding from Region 3. City Mission has increased its contribution to the Center to compensate for the lost funding. While the discontinuation of funding from the Region was unexpected, there were some early signs that the Region would reduce its contribution to the project. Some of the politicians in Bydel 3 indicated as early as 1993 that they anticipated that the Volunteer Center would seek financial support from areas outside the Region. In June, 1994, there was a turn-over in the administrative position in the Center. The new leader over-lapped the previous administrator by one week. At the same time, there was a change in office personnel.

As of December, 1993, the Volunteer Center had 79 active volunteers. By December, 1994, the number had increased to 142. The majority of the volunteers were women, for the most part under the age of 40 years. The activity level of the volunteers increased from 1992 to 1994. During the course of 1992, the volunteers provided 5.9 man-hours of work. In 1994, this number had increased to 7.5 man-hours.

The total number of users of volunteer services increased from 111 in December, 1993, to 115 in December, 1994. As reported in the evaluation report, the majority of the users are still women over the age of 60 years. There has been a noticeable increase in the number of institutions and organizations utilizing the services of the Volunteer Center.

The services provided by the Volunteer Center in early 1993 were still available in December, 1994. In addition, the Center developed a baby-holders program which has provided volunteers to the pediatric unit at the regional hospital. While this program is small, it is anticipated that it will develop further over time. One goal of the center is to work together with the hospital and follow-up services to allow for the volunteers to continue contact with the baby and the baby's family after discharge from the hospital. The Volunteer Center has made contact with the refuge center in the Region in an effort to develop a local support network for the refuges. Another project which is underway is an effort by the Volunteer Center to utilize the skills of retired individuals in schools, preschools, and congregations in the Region. The hope is to put young people and elderly people in contact with each other.

The Volunteer Center has now been in existence for 4 1/2 years. There have been numerous changes during this period with respect to locale, funding and leadership. The concept of regional volunteer centers in Norway appears to be successful but it remains to be seen how the project will develop over time.