

VOLUNTEERS IN ENGLAND

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INTRODUCTION

Living in London during the first six months of 1972 afforded me the opportunity to learn something of the exciting world of volunteerism in England. Volunteers and voluntary agencies are much in evidence. While volunteering is an old English custom, there has evolved since the establishment of National Health in 1948 a new, creative partnership between voluntary organizations and government health and social service agencies. These government agencies, usually referred to as statutory agencies, are constantly increasing their investment in the organized utilization of volunteers. A booklet, "Opportunities for Voluntary Service in London," published by the London Council of Social Services lists 200 organizations seeking voluntary help.

An American should not be surprised that the tradition of people helping people through voluntary action is one he shares with his English cousins. One recalls that Jane Addams, volunteer and pioneer social worker, went in the late 1800's to London's Toynbee Hall, the first settlement house, in order to prepare herself for her later work at Hull House. While the English expect their government to provide basic health service and social security, the hundreds of voluntary organizations and the thousands of volunteers are strong testimony to the value they place on individual and group initiative in improving and enriching the welfare of all.

In my six months visit I could only scratch the surface in learning about volunteer programs. Thanks to the generosity of my English colleagues, I visited about a dozen hospitals and community psychiatric agencies. I talked with many organizers of voluntary services as coordinators are called in England. I visited with volunteers, directors of volunteer bureaus and with officials of several voluntary agencies. I attended several lectures and conferences, and I participated in a short course for new coordinators of voluntary service. Some excellent books and reports, along with regular reading of the LONDON TIMES or MANCHESTER GUARDIAN continually broadened my awareness of the scope of the volunteer movement.

THE ROLE OF VOLUNTEERS

Volunteers in England, as in the United States, come in all ages and find expression for their desire to help through essentially the same

avenues—clubs, churches, schools, specialized agencies, and social and political action groups. There, as here, many volunteers prefer to work as individuals rather than through organizations. The voluntary agencies and organizations range from the traditional, non-controversial type to the militant and radical. As in the U.S. there is increasing involvement of the less affluent and of clients themselves as in such organizations as the Claimants Unions which work to make sure that all who are entitled to the benefits of the welfare system do indeed receive them. Volunteers are found in general and psychiatric hospitals, schools and child care facilities, information bureaus, emergency services, courts, correctional facilities and housing associations. In these they usually work in fairly traditional positions but some volunteers are pioneering more experimental and unconventional roles.

GOVERNMENT-VOLUNTEER COOPERATION

Today the attitude of government is one of encouragement and support, but this represents a change which has come about gradually since the establishment of the National Health Service in 1948. Then, with the socialization of medical services, it was widely held that professionals could meet all patient needs. In 1948 the word "volunteer" carried unhappy connotations as it was often associated with charity hospitals and with upper class women of the lady bountiful type. In 1948 hospital staff members were forbidden to participate in the organization of volunteer activity. But organizations, such as the Leagues of Friends, continued to do important work in hospitals, and individuals from the community kept asking to play meaningful roles. By the 1950'ties the Department of Health and Social Security began to recognize that the community did belong in the hospitals, that patients had needs which staff alone could not meet. By 1962 the Department gave positive direction to hospitals to involve volunteers. The employment of voluntary help organizers was urged a few years later. A recent directive, January 1972, details the organization of volunteer programs within hospitals and sets forth the primary objective of seeking voluntary help "sustaining a humane and total service to patients and providing an extra link between hospital and community." As National Health moves toward major changes involving unification of hospital with local authority services in the mid-1970'ties, the Department of Health and Social Security urges that channels for the delivery of integrated volunteer services to clients both in and out of hospital settings be developed, and in some communities real progress has been made toward this goal.

Prime Minister Edward Heath in a recent speech to the National Council of Social Service demonstrated that the partnership between government health and welfare services and volunteers is to be further strengthened by promising increased allocation of government funds to aid in the establishment of a National Voluntary Center, more volunteer bureaus, more involvement of volunteers in community relations pro-

jects, prisons and borstals (schools for older delinquents), and more funding of service by young people. The National Center to which Mr. Heath refers, also will have sizable private funding so as to keep it from being subservient to government.

Initially the Center's aims will be to collect and disseminate information about the recruitment, use and preparation of volunteers in statutory and voluntary agencies, the training of organizers of voluntary help and other staff who use volunteers, and the promotion of research and development of work done by volunteers.

An example of the relationship of government to a voluntary agency is the partial funding of the National Association of Mental Health by government grants. These grants are never so large as to jeopardize one of the functions of the Association which is to serve as constructive critic of state mental health services.

THE ORGANIZER OF VOLUNTARY SERVICES

Within the statutory agencies the organizer, coordinator, is seen as the key to effective volunteer utilization. Slowly a new professional is emerging—personnel who are selected and trained to administer volunteer programs. The high point of all my experiences was attending a week's residential course for new coordinators sponsored by the King Edward's Hospital Fund, a private agency, and the South West Metropolitan Regional Hospital Board, a government agency responsible for the administration of 200 hospitals. The King's Fund, long a stimulator of new ideas and programs in hospitals, includes among its many consultative and educational services, a volunteer information office. Mrs. Chrystal King, the director of this office, was the first professional voluntary help organizer ever employed by a psychiatric hospital in England, Fulbourne Hospital in Cambridge in 1963. Mrs. King, whose knowledge of volunteer programs and agencies in England is encyclopedic, is the chief organizer of these residential courses which are held three to four times a year. She works closely with hospital management boards, university social science and psychology departments, local authority social service departments and voluntary agencies in planning and implementing the objectives for the courses. Instructors come from all of these sources.

The residential course is offered regularly to make possible an integrated induction process for all new coordinators who, incidentally, tend to come from the fields of nursing, social work, voluntary agency administration and the ministry. Funding is from the King's Fund; transportation costs are borne by the employing agency.

Course participants number between eight and fifteen. The small size assures meaningful participation. Prior to attending the residential course, all in the group have taken part in a one day initial orientation

session sometime during the first three months they were in their new positions. This initial orientation which precedes the week's residential course by three to six months gives the members of the group an opportunity to meet each other and to formulate their questions, and it enables the course instructors to get acquainted with the individual participants so that the residential course can then be designed to meet the specific needs of this particular group of organizers. Mrs. King and other instructors feel that it is essential that the participants have enough experience in their new positions before taking the residential course so that they are familiar with their agencies and aware of local resources. Participants in the course I attended came from pediatric, general, psychiatric, and subnormality hospitals as well as from a local authority social service department and from a nursing home. Several hospitals in Scotland were represented including Dingleton where Maxwell Jones pioneered the therapeutic community approach.

The participants worked hard. With lectures, discussions and a variety of problem solving techniques eight to ten hours a day were spent dealing with such topics as working with voluntary agencies, the structure of hospital management, the function of social service, recruiting, interviewing and supporting volunteers, working with volunteer bureaux, and the utilization of young volunteers. Instructors were highly qualified, discussions were on a very advanced level.

THE STANDING CONFERENCE OF VOLUNTARY HELP ORGANIZERS

The importance of membership in their professional organization, The Standing Conference, is emphasized throughout the residential course. Somewhat comparable to the American Association of Volunteer Services Coordinators, the Standing Conference is open to all organizers who have completed the residential course and who spend at least fifty per cent of their working time administering a volunteer program. Through it new organizers are paired with experienced ones who work with them as "tutor colleagues." In addition to publishing a newsletter, the Standing Conference issues policy guidelines from time to time on such subjects as how to organize volunteer programs, how hospitals can plan for the appointment of an organizer, qualifications and training for organizers, appropriate salary schedules, and the payment of expenses for volunteers. It seeks constantly to help agencies and organizers raise the standards for volunteer services. Conferences are held three times a year, two in London and one in the provinces, which provide continuing education for its members. I was fortunate to attend one of the London conferences where the focus was on the implications for volunteer services of the changes in National Health scheduled for 1974. The Department of Health and Social Security recommends that no statutory agency set up a volunteer program without consulting the Standing Conference.

VOLUNTEERS IN PSYCHIATRIC SERVICES

In my visits to hospitals and community facilities I found volunteers doing very much the sort of thing we find them doing in psychiatric agencies in America. English mental hospitals tend to be much larger than those I know in my home state of Nebraska. Many have as many as 800 to 1500 patients, and a large number of these patients are elderly. Consequently volunteers are heavily involved in all sorts of projects with geriatric patients. Others work in industrial therapy shops, occupational therapy, canteens, on wards, and in many social-recreational projects. Visits to Croydon, one of the large industrialized boroughs of London, and to the university city of Cambridge gave me a chance to see some of the ways volunteers are being involved in a number of supportive programs in well integrated systems of hospital and community care. In Croydon in-patient and community programs are closely coordinated with the local authority health department. Croydon Voluntary Services, which headquarters in one of the community facilities, is responsible for the delivery of volunteer services to a psychiatric hospital of 800 beds, four day hospitals, several work centers for the handicapped, and a number of former hospitalized patients now living in the community. A staff of four coordinates this large program which includes about fifty volunteers assigned as "befrienders" to individuals needing long-term supportive relationships. An index of the extent of community involvement is the fact that over 4,000 volunteers were mobilized last December in a borough-wide survey to locate handicapped people who might not be aware of various services to which they are entitled.

Orientation or briefing is designed to help volunteers carry out their particular assignments. Support is a word generally preferred to supervision. And in the Croydon program the closest and most frequent support is given by psychiatric social workers to volunteers who work in one-to-one relationships with former patients. In reference to volunteers the term "training" was rejected by many people as it seems to imply an attempt to turn volunteers into poorly prepared professionals. And, it is argued, an attempt to "train" volunteers results in the loss of their spontaneity, enthusiasm and community point of view which are among their most important contributions to the hospital or social agency.

THE RELATIONSHIP BETWEEN STATUTORY AND VOLUNTEER AGENCIES

The delivery of supportive services to former patients in both Croydon and Cambridge illustrates the close working relationship between a voluntary agency, local chapters of the National Association for Mental Health, and government mental hospitals. In both of these communities, as well as in many others, mental health association volunteers sponsor a variety of social clubs and living situations for former patients. In Cambridge I visited several group homes which are defined, in contrast

to hostels, as permanent living situations for four to eight individuals who usually have been hospitalized for rather long periods of time. Some group homes offer a family-like setting while others provide bed-sitting arrangements where each person lives quite independently. Volunteers often manage the financial and maintenance aspects of running the homes as well as providing transportation and sometimes help with gardening. No residential staff is employed but the mental health association or the mental hospital, or sometimes the two together employ a social worker who makes weekly visits. While volunteers supply all sorts of social support, in true English fashion every effort is made to protect the residents' right to privacy.

The creative role volunteers are playing in after-care for psychiatric patients was abundantly evident at a conference I attended on "establishing and running group homes." Sponsored by the National Association for Mental Health, it was a down-to-earth practical meeting where volunteers and mental hospital staff shared ideas designed to make them go back to their communities and join forces in meeting the needs of many former patients for independent but sheltered living.

Another example of the partnership between statutory and voluntary agencies is the St. Columba-Emmanuel Center in Cambridge. Here two nurses provided by the Fulbourn Hospital Management Committee and a number of volunteers with the financial support of two churches, the mental health association, and another voluntary agency operate a day program for people with psychiatric problems, a creche where mothers can leave their babies when they shop or go to the mental health clinic, and a number of discussion groups including one for "anxious moms," one designed for women whose children have recently moved out of the family nest, and another for "men and women over 21 who may be isolated and anxious because of homosexuality."

YOUNG VOLUNTEERS

Teens and young adults are a most important part of England's volunteer force. I found a number of high school age youth manning canteens, visiting on wards and engaged in a variety of social and recreation activities in psychiatric hospitals. Some schools allow students to volunteer during a certain amount of school time. Voluntary agencies such as the Hospital Center and Community Service Volunteers provide consultation to educators on appropriate volunteer work for youth. In some respects Community Service Volunteers might be described as the English counter-part of VISTA. Organized in 1962, funded largely by private foundations, CSV offers volunteer placements, ranging from four to twelve months to young people between the ages of sixteen and twenty-two. At any one time between 800 and 1,000 young people are working as CSV volunteers in hospitals and social agencies. Others are teaching English to immigrants, assisting in schools for delinquents, working on

environmental improvement projects, and designing and building those wonderful institutions for English children called adventure playgrounds. In my visit with a young staff member at CSV headquarters in Toynbee Hall I was impressed with the flexibility of its program and the dedication of its young staff. CSV believes it has the responsibility to find the right project for every young volunteer who really wants to help the community. Some potential volunteers may select out but no serious volunteer is rejected.

Last year about 168 of CSV volunteers were police cadets who were allowed to serve as volunteers as part of their police training. Many police officials see that learning to understand social problems at first hand and learning to function without benefit of uniform is an invaluable experience for the neighborhood policeman. A recent CSV project has been the successful involvement of young offenders who are paroled to CSV from borstals to work in selected volunteer programs.

VOLUNTEER ORGANIZATIONS OLD AND NEW

The more traditional type of volunteer organizations like the Red Cross function very much as they do in the U.S. The Red Cross and St. John's Ambulance Brigade supply services needed in emergencies and disasters. Several St. John volunteers were usually present at theaters ready to provide first aid should it be needed. I spent a most interesting afternoon learning about the work of the Women's Royal Voluntary Service. Growing out of the work of women during the Battle of Britain, WRVS now has thousands of volunteers assisting in a wide range of projects from meals-on-wheels (where the volunteers assist in local authority projects), clubs for the elderly, play centers for young children, emergency clothing centers, and hospital canteens. WRVS also operates 25 residential homes for the elderly.

One volunteer organization's work so caught the imagination of the people that it was the subject of a series of dramas entitled "The Befrienders" which were presented on BBC TV while I was in England. These dramas illustrated the work of the Samaritans whose primary function is to help the suicidal and the despairing. Founded in 1952, the Samaritans has its headquarters in the beautiful Christopher Wren Church of St. Stephen Walbrook built in 1672. It now has 14,000 volunteers functioning in branches throughout Britain. The effect of the TV series, at least in the short term, was to double the number of requests for help and to greatly expand the number of potential volunteers. Careful interviewing, screening and preparation have been vital in the success of this now well-established program.

There are a number of other emergency services utilizing both volunteer and professional help designed to assist with all sorts of problems—drugs, legal aid, and housing. One called Task Force is run by young people to give practical help to the elderly and lonely. Many of these

voluntary organizations are listed in the various guides to London so tourists may also call on them for help.

Volunteers are much involved in work with prisoners and in prison reform. The latter is handled through the more conventional means of educating the public and Members of Parliament to direct action such as picketing. Volunteers working with released prisoners have been well studied and reported on in a book called **VOLUNTEERS IN PRISON AFTER-CARE** by Hugh Barr. From a former warden of Wandsworth Prison I learned about a self-help group called Recidivists Anonymous which has been helpful with some chronic criminals. This group had been used in one prison to introduce and make more acceptable "straight" volunteers. I visited with a volunteer from a group called Prisoners' Wives Service which offers an array of practical but non-monetary helps to the families of prisoners. Volunteers who are carefully screened serve in a kind of advocacy role for prisoners' wives. One local of this organization in Birmingham, just across from Winston Green Prison, runs a counseling and baby-sitting center where the wives of prisoners may safely leave small children and return after their visits with their husbands for a cup of tea and help with practical problems. Staffed entirely by volunteers this center operates for \$1250 a year!

The borough of Camden boasts the oldest volunteer bureau in London, and since its founding five years ago by the Council of Social Service volunteer bureaus are springing up all over London and in some places in provincial England. One of the most stimulating, grass-roots-type meeting I attended was called by the Volunteer Bureau of Hammersmith for the purpose of bringing agency representatives together for the purpose of determining ways to more effectively utilize volunteer skills.

WHY VOLUNTEERS

Volunteers are taken seriously in England. While the limitations of funds for both statutory and voluntary agencies encourages the utilization of volunteers, everyone I talked to recognized even more important reasons for volunteer involvement than supplementing staff services. Volunteers are seen as helping to normalize hospital and social service environments. They can share experiences with clients in ways not allowed to professionals. An English psychiatrist said, "The patient has to come to terms with the community again so the more contact he has with ordinary human beings the better." They can interpret need to the community often more effectively than professionals. They are needed to help shape the policies of the agencies. A speaker at one meeting of volunteer bureau organizers said, "Volunteers should be able to take on the role of critic of the local authority. They should not be tamed by their users but be independent figures acting as a ventilation of the bureaucratic system." Jeff Smith, a young social worker and member of the prestigious Aves Committee set up to evaluate the role of volunteers put it this way, "Volunteers at best are people coming in meddling, saying what are you doing it this way for?"