

A Social Psychological Perspective on Recruitment and Retention of Hospice Volunteers

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This study represented a partnership between social psychology theory and its application. The work is the first step in an ongoing effort to use theoretical and empirical research on prosocial activities to address practical issues of volunteer recruitment and retention.

The work integrated two traditionally separate approaches to research on sustained volunteerism. The motivational approach, as exemplified by Snyder and his colleagues (e.g., Clary et al., 1998; Omoto & Snyder, 1995; Snyder, 1993), holds that individuals volunteer in order to satisfy certain needs or motives. Whether the volunteer activity continues depends on the extent to which the experience fulfills the relevant motive(s). Clary et al. identified six motives for volunteering:

- Values (express values related to altruistic concerns for others; see also Flynn & Feldheim, 2003);
- Understanding (acquire new learning experiences and/or use skills that otherwise would remain untapped);
- Social (strengthen social relationships);
- Career (gain career-related benefits);
- Protective (reduce negative feelings about oneself or address personal problems); and
- Enhancement (grow and develop psychologically).

The second approach to understanding sustained volunteering emphasizes role identi-

ty (e.g., Callero, Howard, & Piliavin, 1987; Grube & Piliavin, 2000; Lee, Piliavin, & Call, 1999). In this view, one often begins volunteering because of the (implicit or explicit) expectations of others. Over time the individual incorporates the role of volunteer into his or her self-concept, and it is this identification as a volunteer that sustains the activity.

Penner (2002) integrated the motivational and role identity perspectives into a single conceptual framework. He proposed that the decision to begin volunteering is largely determined by motive(s) and the perceived expectations of others. A high and involving level of activity then leads to the formation of a strong volunteer role identity and satisfaction with the experience (e.g., Omoto & Snyder, 1995). Identity and satisfaction, in turn, underlie continued volunteering.

Consistent with Penner (2002), Finkelstein and Penner (2004) showed that aspects of both the motivational and role identity theories explained another example of ongoing helping behavior: Organizational Citizenship Behavior (OCB). The term refers to workplace activities that exceed the prescribed job requirements and that are not recognized by the formal reward system. Like volunteerism, OCB is a discretionary behavior that contributes to the effective functioning of an organization. The present investigation represented the first empirical application of Penner's conceptual view to volunteer activity.

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The study examined four variables central to Penner's (2002) framework: motive, expectation, identity, and satisfaction.

THE VOLUNTEER ORGANIZATION

Participants were recruited from LifePath Hospice, a community-based organization serving Floridians since 1983. Services are available to individuals who are in the last 12 months of a life-limiting illness and who no longer seek curative treatment. In 2003, 6,274 individuals and their families received care from LifePath, and 5,926 received grief support services.

The volunteers who serve the hospice are essential to the effective operation of the organization. Their hours of service have steadily risen in recent years. In 2001, 850 volunteers donated a total of 39,335 hours; in 2002, the number increased to 1,087 volunteers and 51,767 hours; and 2003 saw 1,142 individuals contribute 58,833 hours. Opportunities for volunteers are plentiful. They range from those requiring close contact with patients and/or their families (e.g., patient support, nursing home visitation) to those involving virtually no contact (e.g., office support, Speakers' Bureau).

LifePath Hospice offers an example of a successful volunteer-dependent organization. Nonetheless, more assistance is always needed, and the ability to retain existing volunteers and recruit new ones is a perpetual concern. Thus from a practical perspective, it was hoped the results would suggest mechanisms for increasing and sustaining the volunteer pool. From a theoretical viewpoint, the objective was to test the ability of the role identity and motivational theories to predict volunteer participation.

METHOD

Participants

Surveys were mailed to all 1,030 volunteers listed in the hospice's volunteer database. Of those, 302 responded (230 female and 56 male; 16 did not indicate gender). Forty-one percent of respondents were over the age of 65, and 64% were employed less than 20 hours/week. Forty-eight percent had been volunteering with the hospice for longer than

2 years, and 52% volunteered at least once a week. The majority (228) volunteered to some extent in capacities that brought them into close or moderate contact with hospice patients and/or their families.

Measures

The survey began with questions about the participants' current level of involvement and length of service to the hospice. After providing age, gender, and current employment status, respondents noted the hospice programs for which they volunteered. They then completed measures of the following variables:

Volunteer motives. Motives for volunteering at LifePath were assessed with the Volunteer Function Inventory (Clary et al., 1998). As discussed above, the inventory contains six scales, each comprising five items. A 5-point rating scale was used, with response alternatives ranging from 1 (*Not at all important/accurate for you*) to 5 (*Extremely important/accurate for you*).

Perceived expectations. The perceived expectations of others regarding one's hospice work were assessed with eight items adapted from Callero et al.'s (1987) study of blood donors. The items measured participants' perceptions of the extent to which their volunteering is salient to others and the degree to which important others expect them to continue volunteering. Examples include, "Many of the people that I know expect me to continue as a Hospice volunteer" and "Many of the people that I know are not aware that I am a Hospice volunteer" (reverse scored). Respondents rated each item on a scale from 1 (*Strongly disagree*) to 5 (*Strongly agree*).

Volunteer role identity. Identity as a LifePath Hospice volunteer was measured with a modification of Callero et al.'s (1987) five-item measure of role identity in blood donors. Sample items include "Volunteering for Hospice is an important part of who I am" and "I really don't have any clear feelings about volunteering for Hospice" (reverse scored). Response alternatives ranged from 1 (*Strongly disagree*) to 5 (*Strongly agree*).

Volunteer satisfaction. Satisfaction with one's hospice work was assessed with three items adapted from Penner and Finkelstein

(1998). Among the items are "I am satisfied with my experiences as a Hospice volunteer." Responses again were measured in a Likert format from 1 (*Strongly disagree*) to 5 (*Strongly agree*).

RESULTS

The focus of this study was the relationship between an individual's degree of volunteer activity and factors expected to influence volunteering. Activity level was measured in two ways: amount of time spent volunteering and length of volunteer service. The influences on volunteer participation were based on the two foundations of Penner's (2002) model of volunteer activity: motivational analysis and role identity theory. From the former were derived motives and satisfaction and from the latter, others' expectations and volunteer role identity. Table 1 shows the correlations between the two measures of volunteer participation and each potential influencing variable. That is, the table shows the usefulness of each of these theoretical constructs in predicting amount and longevity of volunteer activity.

That time spent volunteering and longevity of service are separable indices of volunteer participation is indicated by the near-zero correlation between them ($r = -.02$). That is, being a long-term volunteer did not tend to make someone more or less likely to be a very active one. However, as Table 1 shows, the two measures were influenced very similarly

by the theoretical variables that were studied. Both were related most closely to others' expectations (which correlated $r = .33$ with amount of activity and $r = .26$ with longevity) and role identity ($r = .38$ with amount and $r = .17$ with longevity). That is, greater social pressure and the formation of a volunteer self-concept were the best predictors of committed volunteering.

Surprisingly, neither measure of volunteer participation showed a significant positive correlation with any motive. The only significant correlations were the negative relationship between the Career motive and both time ($r = -.20$) and length ($r = -.26$), and the negative association between Understanding and length ($r = -.12$). Because the Career and Understanding motives were positively correlated with each other ($r = .36$, $p < .001$), partial correlations were calculated to determine whether length of service correlated significantly with each motive after removing the influence of the other. The relationship between length and Career motive decreased slightly but remained significant ($r = -.17$, $p < .01$), while that between length and Understanding became nonsignificant ($r = -.05$).

Satisfaction with hospice volunteer work was a good predictor of the amount of time participants devoted to hospice ($r = .21$) but was not significantly associated with longevity as a hospice volunteer.

DISCUSSION

Of the antecedent variables that were examined, perceived expectations showed the strongest relationship to both time invested and longevity at Hospice. With regard to the volunteer experience, identity as a LifePath volunteer was most closely associated with amount and length of service. That is, those who most strongly internalized the role of hospice volunteer as part of their self-concepts showed the greatest involvement and persistence with the organization. Additionally, although more satisfied volunteers did not necessarily stay with hospice longer, they did contribute more hours while they remained volunteers.

The weak influence of motive was surpris-

TABLE 1
Correlates of Length of Service and Time Spent Volunteering

Variables	Length	Time
Values	.09	.06
Understanding	-.12*	-.02
Social	.09	-.08
Career	-.20***	-.26***
Protective	-.01	.03
Enhancement	-.06	.03
Role Identity	.17**	.38***
Satisfaction	.06	.21***
Perceived Expectations	.26***	.33***

Note. $n = 297-300$. * $p < .05$. ** $p < .01$. *** $p < .001$.

ing, but the finding that Career motives were negatively associated with volunteer activity was not. Recall that the present sample was predominantly older and retired. By controlling for age, the correlations between Career motives and both time spent volunteering and length of service became nonsignificant ($r = -.09$ and $r = -.08$, respectively). That participants largely were retired may also explain the importance of role identity over motives in sustaining volunteer activity. These individuals may have felt the loss of the identity that a job provides and looked to volunteer work for a new way of defining themselves.

Connecting theory and practice/ recommendations

The importance of perceived expectations suggests that they should prove an effective recruitment and retention tool. LifePath Hospice does utilize social influence when recruiting prospective volunteers. Staff and volunteers share their experiences with members of their faith communities and civic groups, answering questions and distributing literature. Similarly, new employees are encouraged to recruit volunteers among friends and family.

LifePath could readily integrate other such practices into its recruitment efforts. For example, organizations (e.g., schools, businesses) that advocate volunteerism might be induced to establish volunteer programs. As some members enlist, their friends and colleagues should perceive increasing normative pressures to help.

The organization assiduously incorporates social norms into its volunteer retention strategies. Support meetings, social outings, and book clubs encourage volunteers to interact with each other. The hospice's retention practices also help foster the volunteer role identity that is important for long-term commitment. For example, each year several appreciation events recognize the efforts of the volunteers. Identity is further nurtured by including volunteers in all mailings about LifePath and the hospice movement: newsletters (each containing a volunteer profile), legislative updates, solicitations to the community, and health care updates. LifePath

employees nominate volunteers for community awards and submit stories about volunteers to the local media. Additionally, volunteers receive items (e.g., t-shirts, license plate holders) that allow them to be recognized for their Hospice affiliation.

The data further demonstrated that the more satisfying the experience, the more time individuals spent volunteering. To this end, LifePath employees strive to forge a relationship with the volunteer during the initial interview, explaining the program and the duties, of volunteers and learning the volunteer's particular goals. Training and orientation programs are designed to provide new volunteers with a rewarding learning experience. Care is taken to adequately prepare volunteers so that they feel competent in their duties, and to match them with the jobs they find most rewarding. Many claim that the training alone changed their lives. One-on-one supervision by volunteer coordinators ensures that new volunteers receive sound guidance and attention from someone who recognizes their donations of time and talent. Through an annual satisfaction survey, volunteers also are given opportunities to voice needs, suggestions, and challenges.

CONCLUSION

Aspects of the motivational and role identity theories of volunteerism showed strong associations with amount and duration of service. The data, in turn, had implications for volunteer recruitment and retention. Perhaps the main contribution of the current study was to demonstrate that theory and practice can be combined to address issues of mutual concern (Finkelstein, 2002). The findings provided the groundwork for a study, currently underway, of volunteers throughout their first year of service to Hospice. This longitudinal investigation will allow conclusions about causal relationships among the variables that underlie sustained volunteering.

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