

## THE JOURNAL OF VOLUNTEER ADMINISTRATION

- 1 EDITORIAL
- 2 ABSTRACTS
- INTERNATIONAL UPDATE
- 4 **Volunteering and Disasters**  
*Robert Leigh, United Nations Volunteers, Bonn, Germany*
- FEATURE ARTICLES
- 6 **A Social Psychological Perspective on Recruitment and Retention of Hospice Volunteers**  
*Marcia A. Finkelstein, University of South Florida, Tampa, Florida*  
*Susan J. McIntyre, LifePath Hospice and Palliative Care, Tampa, Florida*
- 11 **Maximizing Elder Volunteerism and Service: Access, Incentives, and Facilitation**  
*Madhura Nagchoudhuri, Amanda Moore McBride, Prema Thirupathy, Nancy Morrow-Howell, Fengyan Tang, Washington University, St. Louis, Missouri*
- 15 **In Their Words: Lessons Learned from Volunteers' Reflections**  
*Karen D. Lewis Paciotti, Beaumont Independent School District, Beaumont, Texas*
- 21 **The Volunteer and Staff Team: How Do We Get Them to Get Along?**  
*Nancy Macduff, Macduff/Bunt Associates, Walla Walla, Washington*  
*F. Ellen Netting, Virginia Commonwealth University, Richmond, Virginia*
- RESEARCH IN BRIEF
- 26 **Net Benefits: Weighing the Challenges and Benefits of Volunteers**  
*Mark A. Hager, The Urban Institute, Washington, DC*  
*Jeffrey L. Brudney, University of Georgia, Athens, Georgia*
- 32 **Persons with Disabilities: Barriers and Rewards to Volunteering in Hospice Programs**  
*Beverly M. Black, Wayne State University, Detroit, Michigan*
- COMMENTARIES
- 37 **Résumés and Interviews: Hardly for Volunteers**  
*Nick Levinson, New York, New York*
- 40 **Who Will Lead the Change?**  
*Jill Canano, Tallahassee, Florida*



ASSOCIATION FOR VOLUNTEER ADMINISTRATION

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The Association for Volunteer Administration, an international membership organization, enhances the competence of its members and strengthens the profession of volunteer resources management. Members include directors of volunteer resources in a wide variety of settings, agency executives, association officers, educators, researchers, consultants, students—anyone who shares a commitment to the effective utilization of volunteers.

Membership in AVA is open to salaried and non-salaried persons in all types of public, nonprofit, and for-profit settings who choose to join with AVA to promote and support effective leadership in volunteerism.

AVA is an association run by its members. Active committees include Professional Credentialing, Ethics, Fund Development, Organizational Relations, Communications, Member Services and Network Development. Members also plan the annual International Conference on Volunteer Administration, a major event held each year in a different city in the United States or Canada. This conference provides participants the opportunity to share common concerns and to focus on issues of importance to professionalism in volunteer administration.

Two major services that AVA provides, both for its members and for the field at large, are a professional credentialing program and an educational endorsement program. Through the process that recognizes leaders of volunteer programs who demonstrate professional performance standards, AVA furthers respect for and appreciation of the profession of volunteer administration. Similarly, AVA educational endorsement is given to those workshops, courses, conferences, and training events that provide opportunities for professional growth in volunteer resource management.

Finally, AVA produces publications including informational newsletters and booklets and *The Journal of Volunteer Administration*.

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*The secret of leadership and transformation of a group, or of another person, is the quality of the relationship one person has with another. Thus the effective group leader will be a person who learns how to listen to other people.\* (Savage, 1996)*

This issue begins with an update from Robert Leigh, Senior Policy Specialist, United Nations Volunteers, concerning the January 2005 World Conference on Disaster Reduction, where the role of volunteers was dramatically highlighted by the recent response to the Tsunami disaster. While conference attendees did not listen to the actual voices of volunteers, they did hear about their actions.

Many of the articles in this issue reinforce the importance of listening to volunteers and managers of volunteers to more fully understand and appreciate the motivations, perceptions, beliefs and behaviors they bring to their work. There are suggestions for recruiting and retaining volunteers, incorporating volunteers with disabilities, building volunteer and paid staff relationships, and measuring volunteer program performance. There are also challenges regarding volunteer management processes, procedures and systems.

The first three articles focus on older adult volunteers. Finkelstein and McIntyre presented this first manuscript at the 2004 International Conference for Volunteer Administration (ICVA). Their work reflects the collaboration between a researcher and a practitioner that has led to programmatic improvements as well as insights to help foster active, committed volunteers.

Recognizing the increasing numbers of older adults, *Maximizing Elder Volunteerism and Service* seeks to identify effective strategies for recruiting and retaining older volunteers. The third article, based on non-structured conversations with hospital volunteers, explores factors that motivate older volunteers as well as factors that contribute to personal satisfaction and volunteer retention.

*The Volunteer Staff Team*, featured at ICVA 2004, explores the critical relationship between paid staff and volunteers. Using an online survey of managers of volunteers, the authors identify current practices for building paid staff acceptance and cooperation with volunteers.

Hager and Brudney, also featured presenters at ICVA 2004, introduce a new evaluation measurement that weighs the benefits of volunteer involvement against the difficulties of managing volunteers to calculate net benefits of the volunteer program for the organization. Beverly Black explores the perceptions of managers of volunteers about the benefits and rewards of engaging persons with disabilities as volunteers.

The two commentaries challenge managers of volunteers to think in new ways. Nick Levinson offers a provocative analysis of the usefulness and appropriateness of résumés and interviews in the volunteer selection process. Jill Canono, Chair of the 2005 ICVA, encourages managers of volunteers to create new management models to transform our organizations and programs.

Mary V. Merrill, Editor

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\*Savage, J. (1996). *Listening and Caring Skills in Ministry*. Nashville: Abingdon Press.

## Feature Articles

- ***A Social Psychological Perspective on Recruitment and Retention of Hospice Volunteers***

*Marcia A. Finkelstein, University of South Florida, Tampa, FL*

*Susan J. McIntyre, LifePath Hospice and Palliative Care, Tampa, FL*

Two theoretical approaches to understanding long-term volunteering, motivational analysis, and role identity were tested in a sample of hospice volunteers. The results partially supported a conceptual framework that integrates the two approaches. Consistent with identity theory, a volunteer self-concept and others' expectations predicted both amount and length of volunteer activity. Initial motives for volunteering showed a weaker than expected relationship with time spent volunteering and duration of service.

However, as predicted by the motivational perspective, satisfaction with the volunteer experience was correlated with time spent volunteering. The implications of the results for volunteer recruitment and retention strategies were explored. The findings show that social psychology theory and research can be helpful in fostering active, committed volunteers.

- ***Maximizing Elder Volunteerism and Service: Access, Incentives, and Facilitation***

*Madhura Nagchoudhuri, Amanda Moore McBride, Prema Thirupathy, Nancy Morrow-Howell,*

*Fengyan Tang, Washington University, St. Louis, MO*

With an increase in the number of adults who are living longer healthier lives, volunteer administrators have a growing pool of potential volunteers. What strategies effectively recruit and retain older volunteers? In focus groups with 43 older volunteers, their perceptions of institutional access, information, incentives, and facilitation are assessed. Findings suggest that older adults may access volunteer opportunities through direct agency contact or social networks, more so than formal ads. They report that interest in the organization's cause and meaningful task assignments serve as incentives for volunteering. Flexibility in task assignment, verbal appreciation, and transportation facilitate role performance. These findings suggest that informal strategies and respect for older adults' expertise and current capabilities are important in recruitment and retention of older volunteers.

## Research in Brief

- ***In Their Words: Lessons Learned from Volunteers' Reflections***

*Karen D. Lewis Paciotti, Beaumont Independent School District, Beaumont, TX*

This article is an excerpt from a qualitative, narrative non-fiction story study consisting of non-structured conversations and observations of 5 Southeast Texas hospital volunteers to present the motivations and perceptions of volunteers in an urban, Southeast Texas Catholic hospital. The interview data was set in the context of previous research that indicates persons aged 55 years or older: 1) volunteer the most hours per year, and 2) are motivated by social obligation, personal fulfillment through service, and religious faith.

- ***The Volunteer and Staff Team: How Do We Get Them to Get Along?***

*Nancy Macduff, Macduff/Bunt Associates, Walla Walla, WA*

*F. Ellen Netting, Virginia Commonwealth University, Richmond, VA*

Both practitioner and research literatures were reviewed to determine items relevant to developing volunteer and paid staff relationships. An online survey targeted to members of the Association of Volunteer Administration and the CYBERVPM electronic mailing list was conducted. Respondents included 557 volunteer program managers. A nine-item volunteer and paid staff climate instrument was completed, followed by a 27-item behavioral scale. Respondents reported that expressing appreciation, welcoming volunteers, and being present at association meetings are almost always/usually done. These civility items were closely followed by communicating clear information on roles and expectations. Although all items were relevant to at least some programs, instrumental tasks that engaged paid staff and volunteers in the same training events, projects, and meetings occurred in fewer organizations.

- ***Net Benefits: Weighing the Challenges and Benefits of Volunteers***

*Mark A. Hager, The Urban Institute, Washington, DC*

*Jeffrey L. Brudney, University of Georgia, Athens, GA*

Evaluation is a popular means by which nonprofit organizations, their funders, and their constituents can measure and demonstrate progress and effectiveness. Nonetheless, evaluation is not regularly conducted in most volunteer programs. In this article we introduce a new measure of volunteer program performance that we call "net benefits." The measure is a general summary statistic that weighs the benefits of volunteer involvement against the problems that volunteer administrators encounter in recruitment and management. The net benefits value is easy to calculate and lends itself to comparison and benchmarking across a variety of volunteer programs and sponsoring nonprofit organizations.

- ***Persons with Disabilities: Barriers and Rewards to Volunteering in Hospice Programs***

*Beverly M. Black, Wayne State University, MI*

This study examines the perceptions of volunteer coordinators about persons with disabilities serving as volunteers in hospice programs. Safety and transportation issues were viewed as the strongest barriers to having persons with disability serve as volunteers; increased diversity and understanding were viewed as the strongest rewards. Perceptions about the rewards of using volunteers with disabilities in hospice programs significantly related to the expressed willingness to make adaptations for them. Concerns about safety issues significantly related to the percent of persons with disabilities volunteering in a hospice program. Suggestions for incorporating volunteers with disabilities into hospice programs are offered.

## **Commentaries**

- ***Résumés and Interviews: Hardly for Volunteers***

*Nick Levinson, New York, NY*

Fulfilling your group's mission usually demands committed people, and that calls for volunteers. Eliminating impediments to the use of most volunteers is critical to success. Résumés, interviews, and applications appear useful but actually function as barriers with almost no use. Reasons and recommendations, and the main exception, are explored.

- ***Who Will Lead the Change?***

*Jill Canono, Highest Potential Consulting, Tallahassee, FL*

In this commentary, the author advocates for all individuals within the volunteer administration field to become leaders and to work collectively to create new volunteer management models that will result in a transformation of current systems and practices.

## Volunteering and Disasters

Robert Leigh, United Nations Volunteers, Bonn, Germany

Early morning, on 17 January 1995, the city of Kobe in Japan and its surrounding region suffered the terrifying Great Hanshin-Awaji earthquake that killed over 6,400 people, injured some 40,000 and left over 300,000 homeless. The Government of Japan, impressed by the fact that over a million people responded by volunteering, decided to propose that the United Nations declare an International Year of Volunteers (IYV) in 2001 which resulted in a major shift in the way that volunteerism is recognized and supported around the world.

Exactly ten years after the Kobe earthquake, the city was the site of the World Conference on Disaster Reduction (WCDR), attended by over 4000 delegates, aimed at guiding and motivating governments to pay more attention to natural disasters and to identify practical steps to address the need for sound disaster risk management.

By a quirk of fate, in the final run-up to the WCDR, another even more devastating disaster occurred, severely affecting the lives and livelihoods of coastal populations of several countries bordering the Indian Ocean. As with the 1995 Kobe earthquake, the volunteer response to the Tsunami Indian Ocean disaster was immediate and massive. In the case of the UN Volunteer programme, for example, some 40 UNVs have been fielded so far, several within 48 hours of the Tsunami striking, and nearly US\$8 million has been raised so far from donors for further volunteer placements. Of course there is almost

always a volunteer response to disasters, largely from citizens of the countries and communities hit. In the case of the Tsunami there was more media attention than usual given to volunteers arriving from all over the Western World due to the large numbers of foreigners among the victims. But the reality is that the volunteer response to disasters on the part of citizens from developing countries and communities affected by disasters here and elsewhere dwarfs volunteer contributions from the developed world.

The issue of volunteering in disaster situations was discussed at various points during the WCDR. It was recognized that the hundreds of thousands of permanent, affiliated and trained volunteers who make up a reserve army of national and international disaster relief agencies, and the considerably larger numbers of generally unskilled, untrained, and unaffiliated ordinary citizens who represent a surge of volunteerism in times of disaster, constitute an enormous resource. It was also observed that much volunteering in times of disasters is ad hoc and uncoordinated. At best, this results in a considerable loss of effectiveness and at worst, undirected volunteers can become part of the problem in disaster situations. It was felt that the key lies in adopting a strategic approach. This translates into deliberately factoring volunteering into the planning and implementation of policies and programmes concerned not only with disaster response procedures but also with disaster preparedness where volunteers

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play a much bigger, but often unsung, role.

The negotiated WCDR outcome document titled “Hyogo Framework for Action 2005-2015,” adopted by 168 countries, contains a series of recommendations to strengthen the capacity of disaster prone countries to address risk and invest heavily in disaster preparedness. These include important recommendations such as a call for the strategic management of volunteer resources in schemes aimed at promoting community participation in disaster risk reduction; drawing attention to the roles of volunteers in enhancing local capacities to mitigate and cope with disasters; involving volunteers in disaster preparedness training; promoting the strengthening or establishment of national, regional and international volunteer corps; and highlighting the need to build on the “spirit of volunteerism” in communities.

Taken together, the above references to volunteering constitute an important step forward in recognition at the international level of the role and contributions of volunteers in disaster situations and lay an excellent basis for incorporating voluntary action into national disaster policy settings. It has taken a long time but, finally, note has been taken of the world’s oldest and most widespread disaster management mechanism — the volunteer.

## A Social Psychological Perspective on Recruitment and Retention of Hospice Volunteers

Marcia A. Finkelstein, University of South Florida, Tampa

Susan J. McIntyre, LifePath Hospice and Palliative Care, Tampa

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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*Marcia A. Finkelstein, PhD*, is Professor of Psychology at the University of South Florida where she has served on the faculty since 1981. Her current research examines the factors underlying prosocial activities such as volunteerism. She also publishes in the field of engaged scholarship, the effort to bring faculty researchers and community partners together to work on problems of mutual concern.

*Susan J. McIntyre* is the Corporate Volunteer Services Specialist at LifePath Hospice and Palliative Care Inc. in Tampa, Florida. LifePath is the world's largest nonprofit hospice. Susan has worked in volunteer management with the organization since 1989.



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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# Maximizing Elder Volunteerism and Service: Access, Incentives, and Facilitation

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Volunteering or service among older adults is associated with a range of positive outcomes including better health, greater life satisfaction, and extended longevity (Morrow-Howell, 2000; Musick, Herzog, & House, 1999; Oman, Thoresen, & McMahon, 1999; Van Willigen, 2000). Volunteering provides older adults with an opportunity for personal growth as well as a sense of purpose and productivity in later life (Morrow-Howell, Kinnevy, & Mann, 1999; Bundens & Bressler, 2002). Their actions are also associated with positive outcomes for those who are served (Wheeler, Gorey, & Greenblatt, 1998).

U.S. Census projections indicate that more than one third of Americans will be over the age of 50 by 2020 (Prisuta, 2004). They are expected to be better educated and have longer and healthier lives than previous generations (Gerteis, Winston, Stanton, Moses, Grodner Mendoza, & Roberts, 2004); hence productive, active engagement in later life is more likely. Their participation in volunteerism may be predicated on organizational efforts targeted specifically to the creation of volunteer opportunities and management practices for older adults (Kovacs & Black, 1999).

We apply an institutional perspective to the study of later-life volunteering (Hinterlong, McBride, Tang, & Danso, in press; Morrow-Howell, Hinterlong, Sherraden, Tang, Thirupathy, & Nagchoudhuri, 2003). This perspective focuses on the link between institutional capacity to host volunteer roles and individual capacity. How can volunteer opportunities be made available such that older adults have access and incentives for participation, and information and facilitation for role performance? This article summarizes results of a two-phase project on institutional capacity for elder service.

The first phase included telephone interviews with 22 volunteer administrators of nonprofit organizations that host older volunteers (Morrow-Howell et al., 2003). Volunteer administrators report a range of strategies to recruit and retain older volunteers. The top recruitment strategies include word-of-mouth, other agency referrals, and targeted solicitations through letters or newspaper ads. In terms of role facilitation, a majority of administrators note a commitment to role accommodation and facilitation, e.g., variation in hours, supports for those with physical dis-

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abilities, and training. This research note reports on findings from the second phase of the project, which assessed older adults' perceptions of volunteer roles and institutional efforts in recruitment and retention.

## METHODS

Four focus groups were conducted with a total of 43 older volunteers from 13 organizations in the metropolitan St. Louis area. The volunteer administrators, who participated in the first phase of the study, identified possible respondents who were 60 years of age or older with at least one year of volunteer experience. Focus group sessions ranged from 60 minutes to 90 minutes, consisting of seven to 14 people. The focus group sessions were audiotaped, transcribed, and coded separately by two coders. A hierarchical coding structure was developed with major codes reflecting the institutional perspective. The codes and quotes were analyzed for key themes. Divergent perspectives and relationships were noted, and the coding scheme was revised and condensed. Counts were developed for each theme, and applicable quotes were selected as examples.

## FINDINGS

The findings are categorized according to access and information regarding volunteer roles, incentives to begin and continue volunteering, and facilitation for role performance. Overall, findings suggest that older volunteers may perceive informal strategies for recruitment and retention as more important than formal ones.

### Access and Information

Access pertains to role requirements and a person's eligibility and ability to fill the role as well as how information about the role reaches potential volunteers. The likelihood of seeking volunteer opportunities is influenced by prior familiarity with the organization or the organization's cause (n=18). This familiarity developed from having been clients in the past or having relatives who were clients of the organization. As one respondent stated,

*Many years ago an organization like*

*NAMI [National Alliance for the Mentally Ill] in New Jersey came to my rescue when I desperately needed help. And about 10 years ago I was walking down the street and I saw the NAMI sign and I wandered in.*

Another respondent reports,

*I love kids, and I was a pediatric nurse before I retired at 55. So when I was looking for a place to volunteer, it led me right here to Cardinal Glennon [children's hospital].*

Older adults often learned of volunteer roles through family members or friends (n=13) who were involved with the organization. To a lesser extent, respondents also gained access to volunteer roles through formal volunteer recruitment efforts such as advertisements (n=7).

### Incentives

Incentives include the rewards or perceived benefits possible through the volunteer role. Respondents report personal motivations for seeking volunteer roles, including interest in the cause (n=5) and volunteering overall (n=12). The underlying sentiment was that volunteering helped them ease into their later-life transitions. When asked about possible formal incentives such as training or stipends, respondents indicated that their decision to continue volunteering had more to do with personal satisfaction and quality of the volunteer experience. In addition, incentive to continue volunteering was influenced by the support received from the organization. Respondents (n=17) emphasized that responsiveness and inclusion in decision-making greatly affected their motivation to continue volunteering. One respondent stated that, "You get the satisfaction and motivation by helping others. But our organization is like a family... We are treated as volunteers and we are treated as part of a team."

### Facilitation

Facilitation refers to supports or flexibility for role performance offered by the organiza-

tion. Respondents focused on respect and inclusion in decision-making (n=17), verbal appreciation by staff and clients (n=16), and flexibility in task assignment and willingness to allow breaks (n=9). A few discussed the role and importance of training (n=7). Appreciation for respect and inclusion was expressed by this respondent: "They're willing, if I come up with an idea, requiring purchase of something... I've gotten nothing but a positive response, like, 'Let's go with it... or let's do this, it's a good idea.'" In regard to flexibility, one respondent stated that, "If someone is not able to do the [hospice] caregiving at homes, there are other options. There's people that come in who can help in the office."

Some respondents indicated that the organizations were particularly cognizant of the increasing age and growing health limitations of the volunteers, and made special efforts to accommodate their needs. One respondent stated, "I don't drive because of my eyes. They even come and pick me up and take me home. I wanted to quit when they moved, because it would be too far to walk and this woman said, 'We'll always pick you up and take you home.' And besides, they have luncheons and get-togethers and things like that [which make her want to continue volunteering]." Related to the social aspect of volunteering, several respondents said they like open work environments and shared workspace, where they can be with other volunteers, staff, and clients.

## DISCUSSION

While implications from this study should be drawn with caution, given method limitations and the small sample size, several key points are worth noting for future volunteer management research. Findings from this study emphasize consideration of unique volunteer recruitment and retention practices for older adults. Given their social networks, life experience, expertise, and interests, older adults' access to volunteer roles, their feelings about the instrumental value of volunteering, and role performance may be different than young adults' (Morrow-Howell & Tang,

2004).

Older adults may be more likely to access volunteer roles through informal means. This may require that organizations put their formal efforts into facilitation of informal outreach methods, like training and encouraging current clients, family members, and volunteers to recruit others. Recruitment materials may need to reflect this informal recruiting strategy. Recruitment may benefit from inclusion of messages that older adults consider to be motivating. Information about the role may need to emphasize the mission of the organization and how the volunteers' efforts will support it. When older adults enter the "volunteering marketplace" seeking role replacement, it may also be important to emphasize respect of their experience and their inclusion in agency processes.

These findings suggest that accommodation and flexibility facilitate sustained volunteerism by older adult volunteers. Volunteer administrators may need to evaluate volunteer functioning at the beginning of and throughout their task assignment. Task assignment may need to change, depending on the volunteer's functional level, or additional supports may be needed, e.g., transportation. Obviously, these supports beg consideration of costs, but so does loss of a skilled, trained volunteer. Older adults in this study also discussed "facilitators," such as social opportunities and verbal appreciation for contributions, as motivators. These are low-cost strategies that may have high payoffs.

In conclusion, utilizing older adults as volunteers may require a unique approach. Further research should study effective recruitment and retention strategies for older volunteers, so that volunteer administrators can focus their efforts. These findings provide fodder for hypothesis development and theory building, emphasizing access, incentives, and facilitation.

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# In Their Words: Lessons Learned from Volunteers' Reflections

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According to the U.S. Bureau of Labor Statistics, of the 64.5 million Americans who volunteered during the year ending September 2004, 7.5% worked for health organizations. Women volunteered at a higher rate than men (Independent Sector, 2001; United States Department of Labor, 2004).

Data from the U.S. Department of Labor show that persons 55 years of age and older volunteer the most hours, even though they account for only 54.7% of the volunteer population. In fact, persons aged 55-64 years volunteered a median of 60 hours during the period September 2003 to September 2004, with the age group of 65 and over volunteering a median of 96 hours. In comparison, the median number of hours for the total volunteer population was only 52 hours (United States Department of Labor, 2004).

Volunteers came to organizations through various means. Two out of five volunteers initiated the contact; 42% were asked to become a volunteer, most often by someone within the organization (United States Department of Labor, 2004). Another national survey (Independent Sector, 2001), showed that 50% of volunteers had been asked to volunteer, and that persons invited to volunteer were "much more likely to volunteer (71%) than those who had not been asked (29%)." Although some volunteers will contact an organization on their own, personal contact is important in recruitment.

Personal fulfillment through service is an important motivation for volunteers. Zweigenhaft, Armstrong, Quintis, & Riddick (1996) report that, in their survey, the greatest response for volunteering was, "It gives me a good feeling or sense of satisfaction to help others." Older volunteers are more likely than any other group to cite social obligation as

their motivation (Gidron, 1978; Zweigenhaft et al., 1996). Social obligation comprises the desire to give back because of good fortune, the hope that someone would do the same for them or their families, the experience of someone close to them having been in a similar situation, or the experience of themselves having received help in the past (Zweigenhaft et al., 1996).

Older volunteers' motivations were more likely than other groups to be religious in nature (United States Department of Labor, 2004). When Park and Smith (2000) investigated the effect of religion on formal voluntarism of churchgoing Protestants, they found that "the 'family's importance of faith' was significant in increasing the odds of non-church-related volunteering" (p. 282).

To sum up, older volunteers devote the most time in volunteer activities. They are motivated by personal fulfillment through service, social obligation, and religious faith. Therefore, hospital administrators should address these motivations when recruiting volunteers, and provide a choice of placements as well as a satisfying environment, thereby increasing volunteer retention.

Since there is little qualitative research about the motivations and satisfaction of hospital volunteers, I participated in conversations with five dedicated volunteers from a major trauma hospital in a Southeast Texas city of over 100,000 inhabitants, to present their stories, (Clandinin & Connelly, 2000) first because they deserve to be heard, and second to provide additional insight for hospital administrators regarding recruitment and satisfaction. I employed a qualitative, narrative nonfiction story method because stories are "a way of understanding experience" (Clandinin & Connelly, 2000, p. xxvi).

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This type of narrative has an inductive, emergent design (Polkinghorne, 1995), utilizing the language of the participants to convey their authentic, lived experiences (Barone, 1995; Polkinghorne, 1995).

At the time of this study, 300 persons were listed on the volunteer rolls, although 196 volunteers were actively serving at the hospital. Of the active volunteers, 40 were men, 147 were women, and nine were couples who volunteered as teams. The Director of Volunteer Services arranged interviews with five of the hospital's most dedicated volunteers in three volunteer areas of the hospital: the Day Surgery Waiting Room, the Lobby Patient Information Desk, and the Intensive Care Unit (ICU) Waiting Room. In-depth conversations during three days allowed the volunteers' stories to unfold naturally (Clandinin & Connelly, 2000). Pseudonyms were used to protect the participants' privacy. To briefly illustrate the volunteer characteristics and motivations mentioned in the previously cited research, following are some of the volunteers' stories.

## THE STORIES

### **Sarah and Emily**

Sarah is a retired bank officer who has volunteered in the Day Surgery Waiting Room for approximately 8 years. Emily has volunteered here for 1.5 years; she also volunteers as a "Goodwill Ambassador," greeting patients and visitors, giving information, and escorting visitors. Sarah and Emily like to work as a team, and today they have what they refer to as a "light" load of 27 patients.

Sarah volunteers in the Day Surgery Waiting Room because during her own hospitalizations, there had been no hospital support system for her family, and she wants to provide this care to others.

*I've had about fifteen surgeries myself, and my former husband used to sit by himself, ... they didn't have waiting rooms like this back then. Sometimes it was just a room back somewhere ... in a corner, and nobody there particularly to answer any questions... So, if I can help some other family, it's a good feeling.*

Sarah also revealed some of her secondary motives for volunteering:

*As one of the side perks, so to speak, I've really made some good friends, that I would not have ... met before. And ... it keeps your mind active ... my mother had Alzheimer's, so I'm very conscious of trying to keep active.*

Emily laughingly shared that she originally volunteered soon after her husband retired! She also spoke more seriously about the personal fulfillment she receives:

*I feel like we do a good service, but I think I get more out of it than the people I come in contact with. And you know it's nice when you hear people say they appreciate what you're doing. You go home and you just feel like you're a better person; that you've maybe made a difference for somebody that day... [Sometimes] I go home, and I've smiled so much [that my face is tired.] But then I think that might be the only smile a person had that day.*

Emily and Sarah characterized their volunteer work as mostly routine and pleasant; yet, although Sarah felt that most people were cooperative, sometimes she and Emily had to be stern with family members who tried to use cell phones or who expected special treatment.

Emily remarked, "You know you have people that are very emotional, and when you're under lots of stress you handle things differently anyway, and we try to take into consideration that everybody here is under a lot of pressure."

Emily described one of their more light-hearted moments. "I call us the 'tooth fairies' because we get more calls to take dentures back to people [after surgery]. It's funny, the women want theirs right away when they wake up; the men couldn't care less usually."

Emily described two serious situations:

*A family had come from ICU. ... That was my first experience with anybody who was quite upset ... They were cry-*

ing, so I offered them [tissues] and some water. They did say later that the patient wasn't going to make it, and they did go back to ICU. But that doesn't happen too often.

*Another time, I saw a young lady and, when I was first married, her family had lived near us. She said that her brother had died, and they were harvesting his organs that day. When her mom and dad came in, ... it was so sad. It was so good to see them, but it just broke my heart, and you don't even know what to say.*

*Normally, ... the surgeons fix whatever the problem is. The patients come out, they look good, and they're going to be fine — they're going home. It never even dawned on me that anybody in here could be experiencing something like [organ harvesting].*

Sarah and Emily both observed that they enjoy the fact that no two days are alike. "To me that's what makes it interesting," remarked Sarah. "Just as there are no two patients alike, there are no two mornings alike."

"That's what makes it so great ... you never know what is going to happen," added Emily.

### **Richard and Elizabeth**

Richard, who is retired, has volunteered at the hospital for 2 years and works about 9 hours per week. Previously, he had been a dedicated volunteer at another nearby hospital, where his wife had worked. Elizabeth is also retired and has worked for 2 years for at least 6 hours per week. They both work as Goodwill Ambassadors, but their placement today is the Patient Information Desk in the busy hospital lobby.

The phones rang frantically, so it was several minutes before we could talk. When things quieted down, Elizabeth told me she had answered a newspaper ad placed by the Director of Volunteer Services. "I worked here in the late '60s and enjoyed working

here so much that once I retired, that decided it. I happened to see the ad, so I just said, 'I'm calling.'"

Richard also contacted the hospital of his own accord, and his primary motivation was one of social obligation.

*I was in a real bad motorcycle accident. I was hospitalized for four or five months, and the way I was treated ... I just felt like, when I retired, that maybe I could give back what I received. So, when my wife retired, I got hold of the Director of Volunteer Services.*

As we continued to talk about life experiences that led to their volunteer work, I learned that Richard's religious upbringing had influenced him to become a volunteer.

*I think that was probably instilled in us as kids. I can remember the transients coming to the door, and Mama would bring them in and feed them. I think a lot of it was due to being brought up in the church.*

Elizabeth then explained the pleasure she receives from helping people.

*People seem to appreciate it so much — that's the thing that makes us do it. I had a little lady that was lost Friday, so I took her out the Emergency Room door. Then she knew immediately [where her car was]. She hugged my neck. That makes you feel appreciated, when someone does that.*

Richard agreed, "I don't know how many times people... thank you and say, 'Oh, we're so glad you're here.'"

Adding to their satisfaction is the fact that they were able to work with the Director to choose their placements. Although Elizabeth had been asked if she would like to work in the surgery waiting rooms, she chose not to "because I lost my husband in an accident. I do not handle trauma well, and I know that. So, I have to do something that I'm comfortable in and enjoy." Richard agreed with Elizabeth.

## Mary

Mary is a 68-year-old retired elementary schoolteacher who volunteers an average of 16 hours per week in the emotional Intensive Care Unit (ICU) Waiting Room. She decided to volunteer at the hospital because she had appreciated the help of volunteers when she sat in the hospital with her niece, who had cancer. Also, three people in her church volunteered at the hospital. "Two of them kept after me, 'You need to come and volunteer with us.'" When she retired, she contacted the Director of Volunteers, and began volunteering.

Although this is an emotionally intensive placement, Mary loves it, and her faith helps her to cope with the sadness that often accompanies it.

Throughout the day, Mary greeted people, escorted them to the ICU, and offered comfort. We talked about how difficult it is to see families struggle with the decision to remove their loved ones from life-support machines, and she described her personal experiences and their effect on her interactions with families in the ICU:

*I think you're keeping them alive for yourself more, and it's hard to let them go. My mother had cancer, and the doctors had told us they didn't think she'd live three more weeks. ... [she was suffering,] and I actually would stand there and pray, "Lord, let her live," then, "Lord, if she has to suffer like this, take her Lord," then, "Don't take her from me."*

*You are torn like that, and that's the reason it's hard up here. Sometimes I can look at one of them, and say, "You need a hug right now," and I'll just give them a hug. I can look at their faces and see if they've just reached that stage where they need someone.*

*One day we had a young man who was with his mother, and I kept ... sitting with him because he was trembling all over. And that's when you feel like you're doing some good. I guess that's why I like this place better than others, even*

*though it's sad — because I feel like I'm there for them when they need someone.*

Mary's desire to comfort the family members derives in part from her personal experiences of the Unit. She shared this moving story:

*My best friend passed away here. He was a schoolteacher, and had been shot while deer hunting and was blinded. He kept right on teaching, with a seeing-eye dog who went to school [with him] every day.*

*When he took sick and had to have open-heart surgery, his friend Sandy called me, so I came and stayed. He went home. [But then the doctor] said, "Your fluid tablets aren't working, so we're going to put you in the hospital and get it straightened out in a couple of days." She called and said, "Get up here quick. They've put him in ICU."*

*We sat here for 36 hours before she told them not to keep him [on the machines]. That's one of the toughest decisions to make. All of Eric's organs were shutting down. ... So she decided [to take him off the machines].*

*They brought his seeing eye dog up. Noble would never leave Eric. But since Eric had been in the hospital, Noble had been taken to the vet. Sandy said, "Noble's got to come up and see Eric so there will be closure. Otherwise, he's going to think Eric just deserted him." We brought him in, and his tail was wagging. Sandy kind of lifted him up, he sniffed Eric, his tail was in mid-wag, and then it stopped. He lay down under the bed. And when we left the room, he ... went with us. He knew.*

*You see things like that up here, and it just gets to you. And yet, you feel like you are doing some good. You have real good stories that come out. The young man that I told you about that I sat with for two hours? Doctors kept telling his family, "There's no way she can live*

*through the night." "She's going to live," he insisted.*

*She went home! She got completely well and went home! I went up to see her in her room and told her how thrilled we were that she was going home. I said, "Your family never gave up hope for you." So you see things like that, and it makes all the difference.*

It was apparent that Mary's faith was a source of her empathic caring for the patients and their families. She explained that she was brought up in a faith-filled home:

*I think my faith helps me to continue volunteering. My parents always taught us that you do for other people. As my aunt used to say, "The bread that you spread on the water comes back to you tenfold."*

As we ended our day together, she said one last time, *"I can't explain it. It's just fulfilling. I could skip a lot of things, but I don't skip my volunteer days.*

## REFLECTIONS

As I reflected on the stories that the volunteers had shared, I realized they encompassed the motivations that the research has described. All of the participants were in the 54 and over age group that is responsible for the most volunteer hours, and their stories weave a tapestry of caring characterized by the desire to give back what they have been given, and by the personal fulfillment they receive. Richard and Mary also referenced their faith as a basis for service.

Each of these dedicated volunteers expressed their enjoyment and satisfaction with their hospital work. As I thought about the insights I had gained from their stories, I wondered what hospital administrators can learn about the recruitment and retention of valuable volunteers such as these.

Because older people contribute the most volunteer hours, administrators should consider recruiting heavily among people 55 years of age and older. While an advertisement in the paper attracted three of the inter-

viewed volunteers, they either had prior experience working at a hospital, or friends who had encouraged them to apply. Recruitment should not rely simply on newspaper ads, but should also include personal contact.

Personal contact could be achieved in several ways. Mary's church friends invited her to become a volunteer, which has the added advantage of incorporating the faith piece that is important to some volunteers. Managers of volunteers can seek out churches, which often have social groups for retirees, to recruit older volunteers. Or, they could encourage current volunteers to recruit friends from church or other organizations to which they belong. Elizabeth recruited her entire church to work on the national Veteran's History Project. The hospital can sponsor a social gathering inviting current volunteers to bring a friend who might be interested in volunteering.

No matter how effective recruitment is, a viable hospital volunteer program must achieve retention. The volunteers with whom I spoke enjoyed what they were doing, and that is why they continue to work. Managers of volunteers must listen to the volunteers themselves and ascertain whether they are motivated by socialization, the desire to give back what they have received, the desire to be emotionally involved with patients and their families, or the desire to serve through clerical work, etc.

Hospital volunteer work encompasses a range of emotional involvement, and each placement brings comfort and service; this should be communicated to potential volunteers. Several participants mentioned that the Director discussed their interests and allowed them the flexibility to choose their assignments. The Director also allowed them to work on a trial basis in several areas of the hospital before entering a permanent placement with training from an experienced volunteer.

The participants shared that hospital staff show appreciation to the volunteers through scheduled activities during Volunteer Appreciation Week, as well as throughout the year, helping the volunteers to feel part of a community. An annual banquet recognizes volun-

teers for their service. Volunteers are given privileges in the hospital cafeteria. And, if a volunteer with over 100 hours of service during the previous year becomes a patient, the hospital forgives up to half of hospital expenses that are not reimbursed by insurance. While these forms of recognition are not primary motivators, the volunteers enjoy being appreciated.

Communication skills are management tools for identifying interests and skills, making effective placements, and evaluating and improving performance. There is also much to be learned from the more informal practice of listening to the stories of volunteers. Stories often reveal information that managers of volunteers can use to help volunteers continue to enjoy their placements and ward off potential problems. Stories are a part of every volunteer's life, and having the opportunity to share them can allow volunteers to feel more a part of the hospital community.

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# The Volunteer and Staff Team: How Do We Get Them to Get Along?

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Paid staff acceptance of and cooperation with volunteers has long been recognized as a crucial ingredient to volunteer program success (Wilson, 1973). Today, in an era of dwindling resources, positive relationships between paid staff and volunteers are particularly needed in planning and implementing events, projects, and programs. Conversely, when relationships are strained, volunteers will likely be driven away (Macduff, 2001). Understanding how to create and maintain strong volunteer and paid staff relationships is a desirable and potentially productive aspect of the successful management of a volunteer program.

This paper briefly reviews what is known about volunteer and paid staff relationships, drawing from both the practitioner and research literature and reports the results of a national study of volunteer managers as it relates to positive relationships.

## THE PRACTITIONER LITERATURE

Practitioner literature is quick to alert volunteer program managers to the need for healthy relationships between volunteers and paid staff (Brudney, 1990; Macduff, 2001; McCudden, 2000; Marin, 1999; Wilson, 1973). Regardless of the author, the description of the symptoms of poor relationships are remarkably similar, including lack of communication, "us" and "them" language, and working in "silos" rather than jointly.

Volunteers can be perceived as a threat to job security or as lacking professional credentials to do the work (Marin, 1999; Pearce, 1993). Marin strongly recommends bringing

unspoken worries into the discussion and working to reduce their destructive aspects. The uneasiness of paid staff can lead to "resentment, suspicion, and disrespect" from both volunteers and paid staff (Marin, 1999, p. 1). Most authors on this topic agree with Marin on the negative impact of poor volunteer and paid staff relations.

Practitioners outline elements needed to effect positive volunteer and staff relationships: communication, training, inclusive planning processes, clearly defined roles, mutual responsibilities, and support. (Brudney, 1990; Ellis, 1986; Macduff, 2001; Marin, 1999; McCudden, 2000; Pearce, 1993; Wilson, 1973).

## THE RESEARCH LITERATURE

In 1983 Pearce pioneered the study of paid staff and volunteer relationships with her work, *Volunteers: The Organizational Behavior of Unpaid Workers*. In that book she asked researchers to study the "tension that can exist between volunteers and employee co-workers [that] remains one of the unpleasant secrets of nonprofit organizations" (Pearce, 1993, p. 77).

While there is not a great deal of empirical evidence related to this area of managing volunteers, some data are beginning to emerge. Netting, Nelson, Borders, and Huber (2004) categorized the available studies as those that (1) examine job attitudes and motivations between volunteers and employees, (2) focus on volunteer participation and withdrawal, and (3) debate the optimal mix of paid staff and volunteers.

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In terms of job attitudes and motivations, Liao-Troth (2001) responded to Pearce's call for research, extending the study of volunteers and paid staff into a medical center setting in which he found that paid staff and volunteers have similar job attitudes. Focusing on participation and withdrawal, Van Dyne and Ang (1998) studied contingent workers and employees in Singapore, finding more commitment by paid workers than by volunteers. Similarly, Farmer and Fedor (1999) found major differences between volunteers and other workers in how they psychologically contracted with voluntary organizations. Nelson, Netting, Borders, and Huber (in press) studied volunteer long-term care ombudsmen in one state and reported that the quality of supervisory support from paid staff was an important factor in their decision to leave or stay in their volunteer position. In other research, volunteers and paid staff had slightly different views or used different words, but in the end it appears that communication and trust are critical elements to positive relationships and the longevity of the volunteer's service (Macduff, 2001; McCudden, 2000; Wilson, 1973).

## THE STUDY

This study was designed to address the following research questions:

- What is the perceived climate between volunteer and paid staff in organizations with volunteer programs?
- What behaviors/strategies are being used to facilitate volunteer/staff relationships?

Using the literature cited above, the authors designed a two-part survey. The first was a nine-item assessment of the volunteer and paid staff climate as currently perceived by the manager of volunteers. The second part was a Likert type scale of 25 items identified in the literature as relevant to promoting volunteer and paid staff relationships. Respondents were asked to rank their organization on all items.

The survey was distributed in late summer 2004 to members of the Association for Volunteer Administration and subscribers of the CYBERVPM electronic mailing list for managers of volunteers. An email announced the availability of the survey at the Web site, [www.SurveyMonkey.com](http://www.SurveyMonkey.com).

Five hundred and fifty seven (557) persons responded to the survey, 490 (88%) female managers and 56 (10%) male managers (11 did not indicate gender). Number of years managing volunteer programs ranged from 1-16+, and education ranged from high school to doctorates. The majority (n=260; 46.7%) of respondents indicated bachelor's degrees as their highest education;

**TABLE 1**  
**Volunteer & Paid Staff Climate**

Category	Yes	No	Not Sure
Staff say "thank you" to volunteers publicly.	520 (93.4%)	11 (2.0%)	6 (1.1%)
The leaders of the organization (paid staff and/or volunteers) are visible at volunteer association events.	455 (81.7%)	57(10.1%)	23 (4.13%)
Volunteers & staff both use words like "together, we, our project" when referring to the work they do.	427 (76.7%)	70(12.6%)	43 (7.72%)
Projects are planned collaboratively between staff and volunteers.	383 (68.8%)	126 (22.7%)	27 (4.85%)
Reports on volunteer activities during paid staff management meetings come from other staff, not just the person responsible for volunteer coordination.	370 (66.4%)	140 (25.1%)	29 (5.21%)
Volunteers and paid staff engage in relating the history of the organization through the telling of stories.	359 (64.5%)	84 (15.1%)	93 (16.7%)
Volunteers are visible in leadership decision-making committees.	329 (59.1%)	190 (34.1%)	20 (3.6%)
Volunteers say "thank you" to staff publicly.	329 (59.1%)	190 (34.1%)	20 (3.6%)
Volunteer are asked to give input and assistance in most organizational projects.	295 (53.0%)	195 (35.0%)	48 (8.62%)



those with master's degrees were the second largest group (n=150; 27%).

Volunteer programs were primarily located in nonprofit organizations (n=399; 71.6%), following by governmental agencies (n=100;

18%), other (n=37; 6.6% ); corporations (n=7; 1.3%) and military (n=6; 1.1%). "Other" included organizations such as art museums, faith-based organizations, and educational institutions.

**TABLE 2**  
**Volunteer/Staff Relations Behavior**

Behavior	Almost Always / Usually	Sometimes	Not Often / Rarely	Not Sure/ No Response
Paid staff express appreciation to volunteers regardless of their length of service.	430 (77.2%)	63 ( 11.3%)	14 ( 2.5%)	50 (9.0%)
There is an official procedure for welcoming volunteers.	419 (75.2%)	43 ( 7.7%)	33 ( 5.9%)	62 (11.1%)
Volunteers are informed about the inner workings of the organization as it relates to their work.	402 (72.2%)	78 (14.0%)	25 ( 4.5%)	52 (9.3%)
There are regularly scheduled award recognition events to highlight work by volunteers and paid staff.	394 (70.7%)	45 ( 8.0%)	51 ( 9.2%)	67 (12.0%)
Volunteer position descriptions are readily available to paid staff and volunteers, and describe appropriate roles.	389 (69.8%)	64 (11.5%)	44 ( 7.9%)	60 (10.8%)
Paid staff are informed about the inner workings of the volunteer program as it relates to their work.	384 (68.9%)	90 (16.2%)	27 ( 4.8%)	56 (10.1%)
Different types of volunteer positions or projects have operating guidelines that spell out duties.	374 (67.1%)	72 (13.0%)	47 ( 8.4%)	64 (11.5%)
Volunteers and paid staff have easy access to a handbook that spells out expectations for volunteers related to policies and organizational structure.	370 (66.4%)	56 (10.1%)	55 (9.9%)	76 (13.6%)
The organization is rich with "stories" of the organization's history as it relates to volunteers and paid staff, as well as consumers of services.	346 (62.1%)	92 (16.5%)	52 ( 9.3%)	67 (12.0%)
Volunteers sign a confidentiality agreement.	324 (58.2%)	39 ( 7.0%)	75 (13.5%)	119 (21.4%)
Paid staff members participate in training sessions for volunteers.	317 (56.8%)	100 (18.0%)	74 (13.3%)	66 (11.8%)
Volunteers use words like "we, us, together, all of us" when referring to their relationship to paid staff.	307 (55.1%)	124 (22.3%)	68 (12.2%)	58 (10.4%)
There are regular communication mechanisms to keep volunteers and paid staff informed about each other's work.	302 (54.2%)	92 (16.5%)	97 (17.4%)	66 (11.8%)
There are follow-up procedures in place to contact volunteers who have not been seen for a week or two.	298 (53.5%)	101 (18.1%)	91 (16.3%)	67 (12.0%)
Paid staff use words like "we, us, together, all of us" when referring to their relationship with volunteers.	289 (51.9%)	140 (25.1%)	74 (13.3%)	54 ( 9.7%)
The organization maintains a library of material on the management of volunteers. Books, journals, and periodicals are available to all paid staff.	258 (46.3%)	69 (12.4%)	133 (23.9%)	97 (17.4%)
Changes are made based on recommendations of volunteers.	245 (44.0%)	183 (32.9%)	59 (10.6 %)	70 (12.6%)
There are awards for volunteers who work effectively with staff.	230 (41.3%)	91 (16.3%)	122 (21.9%)	114 (20.5%)
Paid staff are comfortable discussing confidential matters with volunteers.	226 (40.6%)	149 (26.8%)	91 (16.3%)	91 (16.3%)
Paid staff attend orientation of new volunteers.	219 (39.3%)	88 (15.8%)	152 (27.3%)	98 (17.6%)
The organization maintains a "brag board" where news articles about volunteers and paid staff are posted.	211 (37.9%)	90 (16.2%)	147 (26.4%)	109 (19.6%)
Volunteers do a formal assessment of the training they receive from staff.	189 (33.9%)	90 (16.2%)	171 (30.7%)	107 (19.2%)
Volunteers and paid staff spend time jointly planning programs that affect them.	178 (32.0%)	192 (34.5%)	127 (22.8%)	60 (10.8%)
Volunteers and staff attend one another's meetings.	117 (21.0%)	162 (29.1%)	196 (35.2%)	82 (14.7%)
Minutes from meetings of volunteer committees or staff committees are posted for everyone to see.	95 (17.1%)	86 (15.4%)	230 (41.3%)	146 (26.2%)
There are awards for paid staff who work effectively with volunteers.	75 (13.5%)	61 (11.0%)	256 (46.0%)	165 (29.6%)
Volunteers participate in training for staff.	44 (7.9%)	104(18.7%)	265 (47.6%)	144 (25.9%)

Numbers of volunteers in respondents' programs ranged from 1-501+, with the largest category being over 500 (n=206; 37%). The remaining programs were fairly evenly spread over the other categories. Number of years volunteers had participated in these programs ranged from 1-20+, with the majority of programs having used volunteers over twenty years (n=328; 58.9%).

Respondents were asked to answer nine items designed to assess the volunteer/paid staff climate in their programs. Table 1 lists these items in the order of those receiving the most "yes" answers. Publicly saying "thank you" to volunteers was marked yes by 520 (93.4%) respondents, and "leaders being visible at volunteer association events" came in second with 455 (81.7%) responding "yes." Least evident was "volunteers being asked to give input and assistance in most organizational projects."

After having completed the climate assessment, respondents rated twenty-seven statements as to their applicability to their volunteer programs. These items are based on organizational and individual behaviors identified in the literature as relevant to positive paid staff and volunteer relationship building. Table 2 summarizes these results in the order in which the items are most likely to happen in these volunteer programs. Table 2 provides an overview of these results.

## DISCUSSION AND IMPLICATIONS FOR PRACTICE

The purpose of this study was to ask the experts what actually happens in their programs to influence volunteer and paid staff relationships. The sample represented experienced respondents, the majority of whom manage large-volume programs with more than 300 volunteers.

The highest-rated items on both the climate inventory and the behavioral tool were related to expressions of appreciation. One might call these items the civility of running a program, but it would seem face-to-face interaction is indeed important to healthy volunteer and paid staff relations. Saying thank you, expressing appreciation, officially welcoming people, and being present at asso-

ciation events appear to pay off even though they are time consuming.

In addition, 65% of the respondents indicated that volunteers are almost always or usually informed about the inner workings of the organization as it relates to their work, that position descriptions are readily available, that paid staff are informed about the inner workings of the volunteer program as it relates to their work, that volunteer positions have operating guidelines that spell out duties, and handbooks that spell out expectations. The respondents appear to indicate that standard information about programs and duties need to be given to volunteers and staff alike so that no one is taken by surprise.

Of interest is the fact that items related to more instrumental volunteer and paid staff interaction do not appear to happen quite as often in all programs. For example, the lowest item on the climate scale is "volunteers are asked to give input and assistance in most organizational projects" and only 44 (7.9%) managers indicate that volunteers almost always or usually participate in training for staff. Similarly, one-third of respondents indicate that volunteers do not say thank you to staff publicly nor are they visible in leadership decision-making committees.

## CONCLUSION

Although much has been surmised about staff resistance to volunteers, it is obvious that program managers in this study are taking a number of actions to welcome volunteers, establish the ground rules, and inform both staff and volunteers about what is happening. Interestingly enough, the behaviors that seem to be particularly evident in these programs focus on paid staff taking the time to be welcoming and to be present and visible in creating a positive climate in which volunteers and paid staff can relate to one another.

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## Net Benefits: Weighing the Challenges and Benefits of Volunteers

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Outcomes measurement and program evaluation are making inroads in the nonprofit sector (Poister, 2003; Wholey, Hatry, & Newcomer, 2004). Both individuals and institutional donors, such as foundations and government, demand that nonprofit organizations document their effectiveness, and evaluations are a means toward documenting outcomes. Nonprofit managers and trustees also stand to gain from program evaluation, since knowledge of the effectiveness of programs and practices can help them do their jobs better. Consequently, more nonprofits are spending time defining and measuring their activities.

While individual volunteer duties defy direct comparison across different organizations, common elements in volunteer administration and the benefits that volunteers bring to nonprofits lend themselves to measurement and comparison. Systematic measurement and comparison are valuable both for gauging progress over time and for determining where volunteer programs stand in relation to peer organizations.

In this article, we introduce a measure that seeks to account for both the challenges of volunteer administration and the benefits that volunteers bring to the organization. We call this measure the "net benefit" of volunteer involvement because it takes into account both the benefits and challenges that volunteer programs encounter. Typically, process

evaluations focus only on benefits of volunteer involvement, while challenges do not receive equal consideration. We believe that a composite measure better reflects both the needs and progress of volunteer programs.

### EVALUATION OF VOLUNTEER PROGRAMS

Despite widespread endorsement of evaluation, few volunteer programs actively evaluate their progress. In a national (U.S.) sample of cities that used volunteers in service delivery, only one in nine programs had conducted an evaluation (Duncombe, 1985). More recently, Brudney and Brown (1993) report that only five percent of Georgia cities and counties with volunteer programs had conducted an evaluation. Still more recently, a survey of county volunteer programs (Lane and Shultz, 1996) reports that evaluation was the least widely adopted of a listing of eleven administrative practices. Fewer than one in five programs had conducted an evaluation, and only about three in ten had prepared an annual report summarizing volunteer efforts.

When volunteer programs do conduct evaluations, they generally fall into one of two camps: economic evaluations or program assessments. Economic evaluations are based on dollar valuation methods that estimate the financial value of volunteers to organizations or communities. Anderson and Zimmerman (2003) present five ways to estimate the dol-

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lar value of volunteer work. Critics contend that financial estimates are more attuned to the inputs or supports of a volunteer program rather than its results. Recent economic evaluations include Gaskin's (2003) Volunteer Investment and Value Audit; Quarter, Mook, and Richmond's (2003) applications of "social accounting;" and Handy and Srinivasan's (2004) cost-benefit analysis of hospital volunteers. As valuable as these approaches may be, they place a premium on careful collection and analysis of data that is likely beyond the capacity of most nonprofit organizations. As a consequence, individual organizations are unlikely to use economic valuations for internal evaluation or benchmarking purposes.

A second method for evaluation of volunteer programs, which we call the program assessment model, consists of assessments of the common characteristics of volunteer program performance, such as degree of success in delivery of services or the kinds of benefits that volunteers bring to the organization. Services or benefits achieved are taken as indicators of program results (Brudney, 1999b; Duncombe, 1985). The program assessment model places fewer demands on data gathering and analysis than do economic evaluations. In this article we advocate a program assessment measure that is both easily gauged and compared across organizations.

## A SURVEY OF VOLUNTEER MANAGEMENT CAPACITY

The data to undertake the development of this measure were generated from a national survey of U.S. public charities (Urban Institute, 2004; Hager and Brudney, 2004). We drew a sample of 2,993 of the 214,995 organizations that filed Form 990 with the Internal Revenue Service (IRS) in 2000. Since charities with less than \$25,000 in annual gross receipts are not required to file with the IRS, these small organizations are not part of our sampling frame. We selected our sample within annual expenditures strata and major subsector of operation, such as health, social services, and the arts.

We conducted telephone interviews with volunteer administrators or executive

managers in sampled charities during the fall of 2003. We called all organizations to verify their existence, and to obtain the name of a volunteer administrator or someone else who could speak authoritatively about the organization's operations. We mailed an information letter to the 80 percent of sampled organizations with which we completed the initial call. We then called named representatives up to 30 times to collect study information. Interviews averaged 20 minutes. Adjusting for organizations that were defunct or could not be verified as working organizations in the initial call, the response rate was 69 percent. Because of the application of appropriate weights, the results can be used to describe overall conditions in the working population of public charities with at least \$25,000 in gross receipts.

For the purposes of our study, a *volunteer* is any person who works on a regular, short-term, or occasional basis to provide services to the charities we studied, or to those the charity serves. Volunteers are not paid as staff members or consultants. So that the study would not confuse the activities of board and non-board volunteers, we asked respondents to exclude board members when answering our questions about volunteers and volunteer management. We also asked respondents not to count special events participants as volunteers unless the participants were organizers or workers at the events. Study results are based on those charities that engage volunteers, excluding charities that engage no one who fit our definition of a volunteer.

## CHALLENGES OF VOLUNTEER RECRUITMENT AND MANAGEMENT

Nonprofit organizations with very different missions can nevertheless compare their relative success and challenges in recruiting volunteers and engaging them in a well-designed management program. We asked our survey respondents about nine common problems in volunteer administration that had been identified by prior research and field experts (Ellis, 1996; Environics Research Group, 2003; McCurly and Lynch, 1996). We asked whether each issue presented a "big problem," a "small problem," or "not a problem."

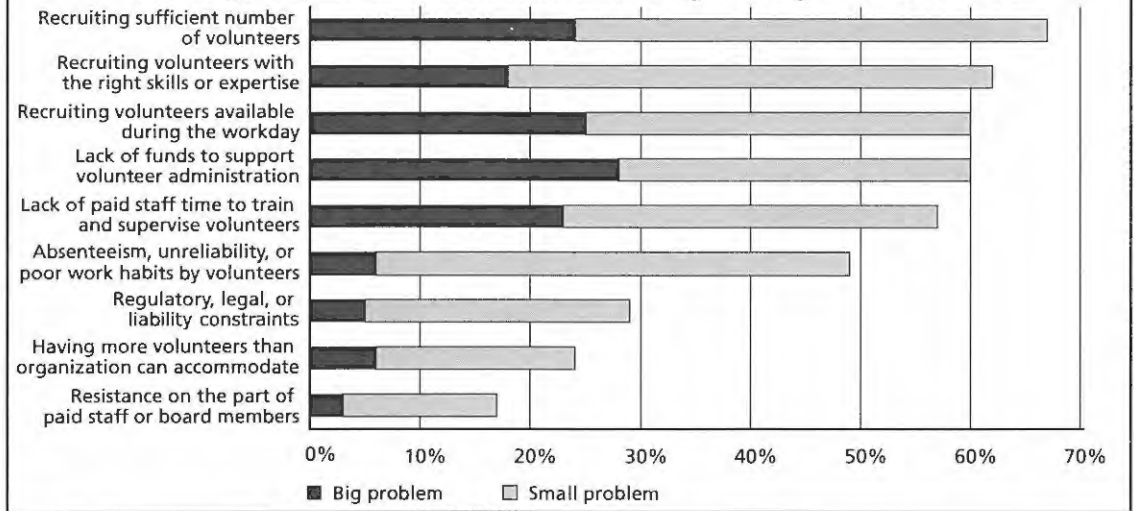
**FIGURE 1****Percentage of Charities that Cite Various Challenges as Big or Small Problem**

Figure 1 shows the nine issues and the extent to which charities identified them as a big problem or a small problem.

Despite recent concerns that efforts to increase volunteerism might overwhelm the capacity of the nonprofit sector to accept volunteers (Brudney, 1999a; Grantmaker Forum on Community and National Service, 2003), three of the most frequently cited challenges concern recruitment of volunteers. Mentioned most often is the problem of recruiting a sufficient number of volunteers, followed by recruiting volunteers with the right skills or expertise and recruiting volunteers available during the workday.

The prevalence of recruitment as a problem for charities strongly suggests that charities more commonly experience the problem of having too few volunteers. By way of confirmation, when asked directly whether having more volunteers than the organization can accommodate was a challenge, relatively few charities responded that an over-supply of volunteers was a problem. The high percentages of charities that report recruiting problems is consistent with past research and observation (Ellis, 1994; Brudney, 1999b) that similarly document the seriousness of this issue.

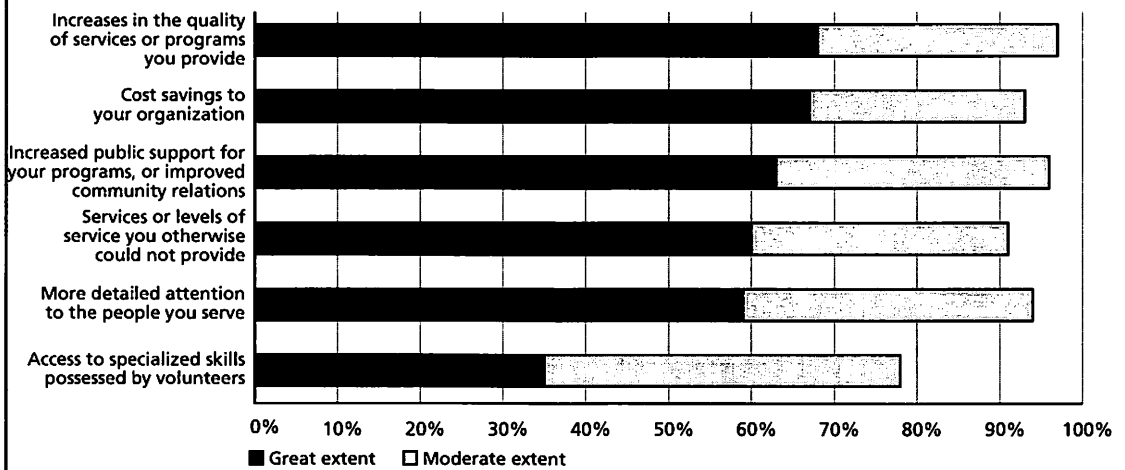
Two other frequently cited challenges pertain to organizational capacity to accommodate volunteers. Of the challenges presented in the study, the lack of funds to support vol-

unteer administration was a big problem to the greatest percentage of charities. Lack of paid staff time to train and supervise volunteers is a big problem for a similar proportion of respondents. Although cited by a smaller number, absenteeism, unreliability, or poor work habits of volunteers are also indicative of a lack of volunteer management capacity.

## BENEFITS OF VOLUNTEER INVOLVEMENT

Challenges represent issues that volunteer administrators face in their management of volunteers. A separate dimension of volunteer involvement is the benefits that volunteers bring to the organization. Just as specific volunteer management challenges are directly comparable across different charities, so are various benefits that volunteers bring to operations and service delivery. Therefore, we also asked about the extent to which charities felt that volunteers are beneficial to their image and operations. The results are presented in Figure 2, which documents the extent to which charities cite benefits from having volunteers to a "great extent" or to a "moderate extent." The remaining charities are those that involve volunteers but say that they experience these benefits to "no extent."

Clearly, volunteers are valuable to these organizations: a majority of charities cited five of the six items as beneficial to a great extent. When including those charities that claimed

**FIGURE 2****Percentage of Charities that Feel Volunteers are Beneficial to Their Operations**

benefits at only a moderate level, more than nine out of ten charities extolled the benefits of their volunteers in increasing quality of service, public support, and level of attention to those served; helping to save on costs; and providing services that the organization otherwise could not provide. Fewer charities say they benefit from specialized skills possessed by volunteers, such as pro bono legal, financial, management, or computer expertise. Nevertheless, one-third feel that specialized volunteers offer a large benefit, while over three-quarters feel that specialized volunteers provide at least a moderate benefit to their operations.

### NET BENEFITS

Looking at challenges and benefits of volunteers separately gives important information about volunteer management capacity and the value of volunteers to organizational operations. Putting both dimensions of volunteer programs into a single measure helps put each into better perspective (Kushner, 2004). The best possible situation for a volunteer-oriented charity is a minimum of challenges in volunteer administration and greatest possible benefits from volunteers. The worst situation is when a charity experiences a full array of problems and gets no benefits in return for its efforts. We expect that most charities fall somewhere in between, and that their relative positions on the scale provide a useful point of comparison.

Therefore, based on the data and questions described above, we created a new measure of volunteer program performance called “net benefits.” Net benefits is the difference between benefits of volunteers and challenges in volunteer administration. First we calculated a sum for eight of the challenges, with a “big problem” contributing a value of 2 and a “small problem” contributing a value of 1. We did not include the challenge of “too many volunteers” because this is a qualitatively different problem that many charities would like to have. We calculated a similar sum for benefits. However, since the survey contained eight challenges items and only six benefits items, we multiplied the sum of the benefits by  $1\frac{1}{3}$  so that the benefits would have as much weight as the challenges in the net benefits measure. Finally, we subtracted the challenges sum from the benefits sum, resulting in a single measure of net benefits of volunteer involvement that potentially ranges from values of  $-16$  to  $+16$ . Figure 3 is a worksheet that helps demonstrate how the net benefits value is calculated.

On the net benefits measure, positive scores indicate a surplus of benefits over challenges, and negative scores indicate more challenges than benefits. Only eight percent of the charities in the sample have negative net benefits, with challenges outweighing the benefits of volunteers. Twenty-six percent have low positive values falling between 0 and 5. The majority, 42 percent, have moderate

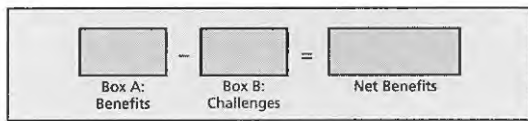
**FIGURE 3**

**Net Benefits Worksheet**

To what extent do volunteers provide benefits to your organization? (Check the appropriate box)

	Great extent	Moderate extent	Not at all
Cost savings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
More detailed attention to the people you serve	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Increased public support for your programs, or improved community relations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Increased quality of services or programs you provide	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Capability to provide services or levels of services you otherwise could not provide	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Access to specialized skills possessed by volunteers, such as legal, financial, management, or computer expertise	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Add up number of checks: (get out your calculator!)	<input type="text"/>	<input type="text"/>	<input type="text"/>
	x2.666	x1.333	x0

Benefits Index:  =  +  +   
Box A



To what extent are the following issues a problem for your organization? (Check the appropriate box)

	Big problem	Small problem	Not a problem
Recruiting sufficient number of volunteers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recruiting volunteers with the right skills or expertise	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recruiting volunteers available during the workday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Indifference or resistance on the part of paid staff or board members toward volunteers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lack of paid staff time to properly train and supervise volunteers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lack of adequate funds for supporting volunteer involvement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Regulatory, legal, liability constraints on volunteer involvement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Volunteers' absenteeism, unreliability, poor work habits or work quality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Add up number of checks:	<input type="text"/>	<input type="text"/>	<input type="text"/>
	x2	x1	x0

Challenges Index:  =  +  +   
Box B

positive values between 5 and 10. The remaining 24 percent have high positive values between 10 and 16.

**THE BENEFITS OF NET BENEFITS**

In this article we have introduced a summary measure of "net benefits" of a volunteer program, one that gauges multiple dimensions of organizational capacity and performance. In contrast to many other measures of performance, it combines benefits and challenges into a single barometer of volunteer program evaluation. The value of this measure lies not only in its ascertaining the balance of benefits over problems, but also in the ease with which it is calculated and the potential it offers to compare the effectiveness of nonprofit organizations and programs with different characteristics. For example, further research with the study sample reveals that

net benefits of volunteer programs vary in predictable ways by organizational size, the scope or extent of volunteer involvement, the number of different volunteer assignments, the adoption of recommended practices in volunteer management, and the presence of a volunteer coordinator, especially one who devotes considerable time to the volunteer program.

Were managers to consistently calculate the net benefits of their volunteer programs, they could monitor their own performance over time and benchmark their program against other programs of comparable size, volunteer involvement, and other similar characteristics. Such monitoring and benchmarking offer substantial opportunity for recognizing and improving volunteer program performance.



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# Persons With Disabilities: Barriers and Rewards to Volunteering in Hospice Programs

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This study examined the perceptions of volunteer coordinators about persons with disabilities serving as volunteers in hospice programs. It addressed the following research questions: How prominent are persons with disabilities volunteering at hospice programs? What do volunteer coordinators perceive are the major barriers and challenges of having persons with disabilities serve as volunteers? What do volunteer coordinators perceive are the potential rewards of having persons with disabilities serve as volunteers? To what degree are volunteer coordinators willing to make adaptations in order to accommodate the needs of persons with disabilities who are serving as volunteers? How do perceptions about barriers and challenges, as well as rewards, relate to a willingness to make adaptations and to the percent of persons with disabilities volunteering in a hospice program?

Volunteer coordinators of 28 hospice programs in the Metropolitan Detroit area were surveyed in 1998 about their use of volunteers with disabilities in their volunteer programs. The 17 hospice programs participating in the study had a monthly patient census ranging from 11 to 112 with an average of 56.97.

The survey instrument asked volunteer coordinators to assess, using a 5-point Likert scale (with 1 being the least and 5 being the most) the degree to which: (1) they perceived each item on a list of 17 barriers and challenges in using persons with disabilities as volunteers; (2) they perceived each item on a list of nine potential rewards in using persons with disabilities as volunteers; (3) they would be willing to make modifications or adaptations in volunteer programs to accommodate persons with disabilities.

## RESULTS

The participating hospice programs reported the number of current volunteers ranging from 6 to 300 with an average of 83.65. Of the 1410 persons reported as volunteering by the 17 hospice programs, 43 were reported as those with disabilities for a total of 3% volunteers with disabilities. Of the 17 programs, 5 programs (29%) had no persons with disabilities volunteering at the current time. One program had 12 volunteers with disabilities.

## REWARDS

Table 1 reports the rank order of potential rewards of using volunteers with disabilities as perceived by volunteer coordinators. They viewed the diversity of volunteers as the greatest potential reward or benefit. The increased

**TABLE 1**  
**Perceived Potential Rewards of  
Using Volunteers with Disabilities**

Potential Rewards	Mean Score (N=17)	Standard Deviation
Diversity	4.12	1.41
Understanding	3.94	1.24
Life Experience	3.82	1.43
Empathy	3.69	1.25
Motivation	3.58	1.42
Expand Marketing	3.47	1.46
Increase Volunteer Pool	3.19	1.60
Patient Identification	3.18	1.24
Expand Options for Performing Tasks	3.06	1.24

### Notes

Mean is the average score with scores ranging from 1 to 5.

N=17; 17 is the number of hospice programs responding to question.

Standard deviation measures how widely or narrowly the numbers are spread out around the average.

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understanding, life experience and empathy that volunteers with disabilities could bring to their volunteer activities were also viewed as potential rewards.

### BARRIERS AND CHALLENGES

Table 2 reports the perceptions of volunteer coordinators as to the barriers and challenges of placing volunteers with disabilities in hospice programs. Concerns for the patient safety received the highest score, followed by transportation issues, and concerns for the safety of the volunteers. They perceived the attitudes of other volunteers and staff as presenting the least barrier or challenge.

**TABLE 2**

**Perceived Potential Barriers and Challenges in Using Volunteers with Disabilities**

Barriers and Challenges	Mean Score N=17	Standard Deviation
Safety for Patient	4.35	0.86
Transportation	4.18	1.13
Safety for Volunteer	4.06	1.30
Cost in Making Adaptations	3.88	1.11
Attitudes of Caregivers/ Families	3.94	1.09
Physical Barrier of Patient Homes	3.77	1.03
Extra Supervision	3.63	1.15
Appropriate Placements	3.65	1.22
Recruitment	3.56	1.03
Attitudes of Patients	3.38	0.89
Extra Training	3.18	1.29
Retention	2.94	.97
Lack of experience/ knowledge in working with population	2.94	1.12
Physical Barriers of Hospice	2.35	1.17
Safety for Staff	2.29	1.21
Attitudes of Staff	2.24	1.15
Attitudes of Other Volunteers	1.82	0.88

**Notes**

Mean is the average score with scores ranging from 1 to 5.

N=17; 17 is the number of hospice programs responding to question.

Standard deviation measures how widely or narrowly the numbers are spread out around the average.

**TABLE 3**

**Degree of Willingness to Make Adaptations for Volunteers with Disabilities**

Adaptations	Mean Score (N=17)	Standard Deviation
Self-education to increase awareness of this population	4.41	0.94
Accessibility of training facility	4.00	1.23
Training time (hour, duration)	3.82	1.29
Length of training session	3.71	1.36
One-on-one training	3.24	1.25
Equipment and materials	3.18	1.19
Interpreter/signer	3.06	1.44
Transportation for volunteers	2.24	1.44

**Notes**

Mean is the average score with scores ranging from 1 to 5.

N=17; 17 is the number of hospice programs responding to question.

Standard deviation measures how widely or narrowly the numbers are spread out around the average.

### ADAPTATIONS

Volunteer coordinators reported a willingness to make adaptations for volunteers with disabilities. The extent to which they reported their willingness to make adaptations is presented in Table 3. Volunteer coordinators reported that they were most willing to become better educated and increase their awareness about persons with disabilities. They also reported that they were willing to make training facilities more accessible. They reported they were least willing to make adaptations to accommodate volunteers with disabilities in the area of providing transportation.

### PERCEPTIONS OF REWARDS: WILLINGNESS TO MAKE ADAPTATIONS AND PERCENT OF VOLUNTEERS

The volunteer coordinators' scores, about their perceptions of the barriers and challenges faced by programs in which persons with disabilities volunteer, were correlated both with their willingness to make adaptations and with the percent of persons with disability volunteering at the hospice program. Perceptions of volunteer coordinators

about the rewards of using persons with disabilities significantly correlated with their willingness to make adaptations on all measures. The overall score on perceptions about the rewards of persons with disabilities volunteering significantly correlated to their willingness to make adaptations to accommodate volunteers with disabilities ( $r=.790$ ,  $n=17$ ,  $p < .01$ ). However, perceptions of volunteer coordinators about the rewards of using persons with disabilities did not significantly correlate with the percent of persons with disability volunteering at their hospice program overall or on any specific measure.

#### PERCEPTIONS OF BARRIERS AND CHALLENGES: WILLINGNESS TO MAKE ADAPTATIONS AND PERCENT OF VOLUNTEERS

The volunteer coordinators' scores about their perceptions of the barriers and challenges faced by their program in persons with disabilities volunteering were correlated with both their willingness to make adaptations in their program and with the percent of persons with disability volunteering at the hospice programs. Perceptions of volunteer coordinators about the barriers and challenges of using persons with disabilities did not significantly correlate with a willingness to make adaptations for volunteers with disabilities overall or on a specific measure. The overall score on perceptions about the barriers and challenges of persons with disabilities volunteering did not significantly correlate with the percent of persons with disabilities volunteering at hospice programs. However, the three specific safety barrier and challenge scores significantly correlated with the percent of persons with disabilities volunteering at hospice programs. Table 4 expressed concerns about the safety of patients, safety of the volunteer, and safety of the staff significantly related to a lower percent of persons with disabilities volunteering at their hospice programs.

#### IMPLICATIONS FOR PRACTICE

Findings from this study suggest that volunteers with disabilities comprised a small percentage of the volunteers serving at the hospice programs surveyed. They identified

**TABLE 4**

**Correlation of Mean Ratings of Barriers/Challenges and Percent of Volunteers with Disabilities at Hospice Program**

Barriers/Challenges	% of Volunteers with Disabilities N=17
Overall Mean Score	-.458
Safety for Patient	-.661**
Safety for Volunteer	-.676**
Safety for Staff	-.519*

Notes to Table 4:

\* $p < .05$

\*\* $p < .01$

Correlation is the measure of the relationship between two variables. Its value can range between -1 and 1. The closer to -1 or 1 the number becomes, the stronger the relationship between the two variables is. A negative correlation means that as one variable increases, the other variable decreases.

issues related to transportation, access in patients' homes, and the cost of making adaptations as physical barriers in using volunteers with disabilities in hospice programs. They also expressed concern for safety of both the patient and the volunteer as strong barriers. Volunteer coordinators perceived the attitudes of patients as a barrier — more than the attitudes of staff and other volunteers but less than caregivers and family members. The findings suggest that although both physical and attitudinal barriers exist, attitudinal barriers may be more mixed and complex than physical barriers. The complexity of attitudinal barriers may in part stem from their often unconscious nature and may be attributed to others more than oneself (Taylor, 1995).

Despite the complexity of attitudinal barriers, addressing the attitudes of staff and other volunteers is crucial if hospice programs want to successfully integrate persons with disabilities into their programs. Training and education has been found to be effective in increasing the acceptance of persons with disabilities (Mathews, White, & Mrdjenovich-Hanks, 1990) and hospice programs may want to consider instituting these programs.

Volunteer coordinators in the study viewed the strongest reward of using persons with disability as the greater diversity it would bring to their hospice programs. They also

perceived that volunteers with disability would specifically benefit patients in the increased understanding, life experience and empathy that they would bring to their work. Perceptions about these rewards are consistent with the literature suggesting that persons with disabilities may be viewed as more understanding in helping relationships because of their own life experiences (Levine, 1983; Mackelprang & Salsgiver, 1996). Volunteer coordinators may be well served to emphasize these rewards in volunteer training sessions.

Agencies should be willing to make some initial adaptations in order to offer volunteer opportunities for persons with disabilities as they will most likely reap the rewards quickly in the increased volunteer services they will be able to provide. In this study, volunteer coordinators generally expressed a willingness to make adaptations to accommodate the needs of volunteers with disabilities. They were most willing to make adaptations in the area of self-education to increase awareness but they were also willing to make adaptations in areas related to the accessibility of training facility, training time and duration of training sessions. However, they were less willing to make adaptations in areas related to transportation, additional personnel (i.e., interpreter), and the use of equipment. This finding may relate to the fact that volunteer coordinators were more willing to make adaptations in areas where they personally had input and control. Adaptations related to transportation and additional personnel often require additional resources that volunteer coordinators may have viewed as beyond their purview. However, transportation adaptations may not always necessitate additional resources, as some work can be completed in one's home, in a local community center or via the internet if physical mobility and transportation problems preclude going to an agency.

An interesting finding of the study reveals that perceptions about the rewards of using volunteers with disabilities related to willingness to make adaptations, but perceptions about the barriers and challenges of using volunteers with disabilities did not. This suggests

that although volunteer coordinators are clearly cognizant of the barriers and challenges of using volunteers with disabilities in their program, this awareness is not influencing their willingness to make adaptations for volunteers. It is their perceptions of the rewards that relate to their willingness to make adaptations. Increasing the willingness to make adaptations to accommodate the needs of volunteers with disabilities may come more from increasing the understanding of the rewards. This is a hopeful finding since volunteer coordinators expressed their willingness to gain greater education.

It is also interesting to note that perceptions about the rewards of using volunteers with disabilities failed to relate to the actual percent of persons with disabilities comprising the volunteer pool. However, perceptions about the barriers and challenges of using persons with disabilities as volunteers related to the percent of persons with disabilities volunteering in a program. It was only in the area of safety that perceptions about barriers and challenges significantly related to percent of persons with disabilities volunteering in the program. Interestingly, concern for the safety of staff was relatively low, but still related to percent of volunteers with disability in a program. These findings suggest that issues related to the concern about safety appear to influence the number of volunteers with disabilities that a program will have. In today's litigious society, this safety concern may be grounded in strong liability concerns.

The small number of hospice programs included in the study limits its findings. Hospice programs vary greatly and, thus, a study including a larger number of hospice programs would offer a more accurate picture of the role persons with disabilities play in hospice programs. A future study would also benefit from learning more about what activities volunteers with disabilities perform at hospice. This data could provide richer information to assist in the development of volunteer opportunities for persons with disabilities.

Large numbers of persons with disabilities have the health, resources, skills and abilities to bring a great deal to the volunteer experi-

ence. Volunteers with disabilities, similar to other volunteers, must perform duties that are challenging, interesting and important. Many have a strong desire for meaningful and productive activities (Taylor, 1995). Volunteers with disabilities, similar to other volunteers, must also experience successes in their work, receive adequate support for their efforts, have opportunities for friendships, and receive recognition for their contributions (Fischer & Schaffer, 1993). Future research should examine the relative significance of these factors in the recruitment and retention of volunteers with disabilities in much the same manner as it has been examined in the hospice literature with volunteers in general.

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## Résumés and Interviews: Hardly for Volunteers

Nick Levinson, New York City

Volunteers are bursting in. Better print up some applications, collect résumés, and schedule interviews.

No, wait a minute.

They sound like the best practices of volunteer management. They reveal experience, point to relationships with past managers, and are a forum for interests. By forcing applicants into writing, they become clear and accountable, and you select clean volunteers, perhaps the best of the lot. After years of use in paid employment, these should be good tools, facilitating consistent judgments and reducing your liabilities.

I should approve. But I don't.

In my experience as a volunteer, they don't work. I'm uncomfortable with them, and, with few exceptions, I don't think you should use them. As a coordinator, I've never needed them.

*1. Programs that use them tend to apply the wrong model to volunteer selection. They choose volunteers much as they choose paid staff, ignoring a key difference.*

If you have an opening for one child care worker, paid, and you receive ten applications, you select the finest and thank the other nine for coming. The nine leave, even if they're almost as good.

If you have an opening for one child care worker, volunteer, and ten applicants arrive, you put all ten to work. Even if nine lack requisite personalities, maybe they'll drive vans, scout sites for day trips, do renovations, or answer parents' questions.

Strictly speaking, using résumés and interviews doesn't prevent extensive use of volunteers. But, in practice, the mindset of high selectivity dampens volunteer inclusion.

When I'm in charge, I think of what work needs to get done. I see someone around. I ask if they can do it. Asking takes 60 seconds. If they affirm, I set them up and check their work. That's all the résumé I need.

*2. These systems foster competition where none should exist.*

I want to add to agency capabilities, not kick anyone out. When I contact an organization, I want to help where they want it. I don't like being rated above others who are also good, so they get curtailed or terminated. I want us all to stay, so the organization can do more.

I also don't want a rating as less good and therefore useless, if I can add to your output and your fulfillment of institutional goals. Grading on a curve doesn't help either of us. We should both be doing as much as possible, in addition to what everyone else does.

I craft my applications consistently with that value. I downplay my abilities. Since my most advanced experiences and capabilities are mainly from volunteering, downplaying is easier.

This has an unfortunate advantage. Many managers prefer that volunteers be inexperienced, so they won't compete with folks on the payroll. Thus, by downplaying, I look less threatening, and more palatable.

But overreliance on a résumé can make it

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*Nick Levinson* has volunteered over several decades in three dozen centers, including issue-oriented groups and political campaigns, sometimes simultaneously, in the New York City metropolitan area. He prefers walking in, gathering his assignments, and executing them. In some cases, he appointed himself as ad hoc volunteer coordinator, too. Occasionally, he pesters managers.

harder for anyone ever to accept that I can perform a needed task. Waiting until the résumé has been forgotten is harder when they're used for initial classification, and I have to break out of an assigned track.

These first-day screens lay an ambivalent impression. Instead of seeing your professionalism, I fear you won't use most volunteers, and therefore that your organization isn't committed to its goals. I think about leaving, and I've hardly started.

### *3. Résumés tend to hide what's not written.*

I've used mine to acknowledge shortcomings, showing I'm human. But even those don't help enough.

We may have skills we can't talk much about. For example, I have some skills in law, electricity, and plumbing, but I'm not licensed in any of those fields. I can do those kinds of work legally, but I have to choose the environment, relationships, and tasks, and I have to reserve my option to decline. And, for some of it, confidentiality means I can't talk about past successes. So there's not much I can put on a résumé about these fields.

### *4. Interests tend to get confused.*

Résumés are used partly to identify an applicant's pattern of interests.

Yet, what we've done for ages may be something we hate. I've had very good technical skills in computers. But I've wished my computer had a neck, so I could strangle it. Those technical skills have probably saved me thousands of dollars and consecutive months I couldn't afford to lose. I'm glad I've read hundreds of books in cultivating those skills. But, in themselves, computers are not fun. I never volunteer anywhere so I can run their computers. This has jolted quite a few people. What we've done well for eons may not be our interest.

We may instead volunteer in order to develop a budding pursuit. Your question then is our skill level and degree of responsibility. Evidence of that just may not fit on a résumé, with its emphasis on long experience and earlier schooling.

### *5. Interests are distracting. We're giving service to further your ends.*

You may have no need whatsoever for any of my skills. But I may support your organization's mission and be happy emptying your garbage cans.

I want to know your needs. I'll tell you if I can fulfill any of them, which ones I can't help with, and whether I can refer you to someone else for some of them.

Interviews should allow that, since the interviewer is an insider. But interviewers feel they shouldn't tell me about open projects until everything else has been decided.

Please tell us your wants.

### *6. Titles are in short supply.*

Many places refuse to give titles to volunteers to describe their functions. They're afraid to acknowledge what volunteers do. And some of us refuse titles.

Count on skills, not titles.

### *7. Relationships are important. Past relationships may tell you something about future ones.*

But how much do we ever learn from those named in an interview or on a résumé?

Past managers won't risk litigation.

Praise may damn when organizations compete. And any groups with overlapping constituencies may compete.

As a volunteer, I've experienced omission of my work. In one place, much of it was described as having been done by a staffer elsewhere.

Because volunteers are unpaid, some staff believe we don't do much of value. They downgrade the work we do.

A more invidious assumption is that volunteering is a career stage from which one should escape into a paid position. So, some managers are dubious about our doing more volunteer work. More than dubious, they may misinterpret our choice to volunteer without pay as a refusal to work for them, and feel that our application elsewhere is stabbing them in the back.

Many nonprofits are interested more in our not volunteering elsewhere than in working us while we're there. Their personnel recommendations are going to be tepid, at best. A few recommendations, negative and posi-



tive, are informative. They're infrequent, unfortunately.

8. *Responsibility doesn't need to be measured by a résumé, nor is it so evident from an interview.*

Assign work along an ascending scale of responsibility, and examine relationships and results.

9. *In most contexts, even competitive ones, screening turns out to be completely unnecessary.*

Your worst nightmare might be spies, a spy being someone who wants information about the agency in order to advance the interests of a competing agency. Spies are more frequent in political campaigns. Even organizations that are indirectly involved in politics tend to use many of the same people and methods, and they, too, worry about spies.

Rather than screen them out, turn them to your advantage. If you can work them, you can work nearly anyone. Here's how: Spies want your trust, and usually spy better from inside. Solution: Give them harmless outdoor work. Let them leaflet for your cause, accompanied by a trusted leafletter. They won't risk throwing leaflets away, lest their companion report it. They'll want to be good, so you'll invite them inside as a reward.

Instead, when they come back from a great job educating everyone in town, invite them to leaflet again. And again, and again, for as many times as they're willing. (Rotate the companions.) You're protected and they're getting a needed job done.

10. *Extensive intake simply to keep you busy is a miserable waste of time. The agency needs you more.*

There's plenty to do by focusing on recruitment, retention, assignments, and monitoring managers' use of volunteers.

## SAVING GRACES

There's a legitimate use for all these tools.

Security for sensitive work is a reasonable concern, and for that you should know an applicant's background.

However, the same tools are overused in order to eliminate applicants or narrow volunteers' work for irrelevant reasons.

And if you try to limit these tools to security reviews, managers who see volunteers as taking their jobs will start claiming that security issues lurk in most of our backgrounds.

Many paid managers, staff, and consultants see volunteers as competition for jobs. Our willingness to work for free creates a model that disturbs them. They don't want the CEO influenced into not spending money on people. Therefore, they'll want to prove that volunteers can't do much, except maybe empty garbage cans, and often they're woozy even about that.

You'll need to track how these tools are actually used. You'll have to force managers to incorporate volunteers, perhaps dropping this or that one but ultimately using many, and using them effectively.

Move quickly from screening to utilization. Early during utilization, you and the volunteer should explore more possibilities. Volunteers can advance rapidly, as abilities and commitments warrant.

# Who Will Lead the Change?

Jill Canono, Tallahassee, Florida

During the last decade, not-for-profit organizations have followed the trend of many business models and allocated resources to re-think, re-invent, re-organize, re-tool, and re-engineer our volunteer programs to better fit the needs of “stakeholders.” Interestingly, the prefix “re” is defined in the *Merriam-Webster* dictionary as, “again, back, backward.” Have our efforts and momentum been moving in the wrong direction? If we truly want to elevate the field and build capacity, it is imperative that a new conceptual framework is developed using different thinking, new language, and fresh approaches that are generated, promoted, and used by professionals within the field. Current thinking among experts in organization change management such as Peter Block, Peter Senge, and Margaret Wheatley suggest that it is time to “transform” existing models and their supporting systems. Transformation, as defined in the *Merriam-Webster* dictionary, is a process that implies “major change in form, nature, and function.”

There is a need for significant change within the field of volunteer leadership to better position the profession and change the existing management model. This need has been a growing concern, and well documented in recent reports such as *Positioning the Profession* (Silver, 1999), *A Guide to Investing in Volunteer Resources Management: Improve Your Philanthropic Portfolio* (UPS Foundation, 2003), and *Volunteer Management Capacity in America's Charities and Congregations: A Briefing Report* (Hager, 2004). In these reports specific recommendations have been made; yet, a more perplexing and reoccurring question within the field is, “what will the model be” and “who will lead the change?”

Margaret Wheatley (2004), a renowned

leadership and organizational development expert, uses the analogy of the metamorphosis of a caterpillar into a butterfly to describe the process of transformation in which organizations experience change. As she describes it, a caterpillar first begins its metamorphosis when it starts to produce small, imaginal cells on its body. These cells are perceived by the caterpillar as foreign bodies that are attacking it. The caterpillar's immune system begins to produce antibodies to kill the imaginal cells. Individual imaginal cells are destroyed by the caterpillar until the cells begin to reproduce in small clusters. As the clusters grow in size, the caterpillar is unable to eliminate all the cells. Gradually, the cell clusters begin to envelop the caterpillar's body until it is completely encased and its resistance surrenders to its natural evolution. After a transformative period in the cocoon stage, the butterfly emerges. The new organism is no longer a caterpillar, nor does it bear any resemblance to its previous state. In fact, there is evidence that the DNA of a caterpillar and a butterfly are actually different; thus the transformation becomes complete. The implications of this are huge: if a transformation of this sort can occur in nature, it serves as a metaphor of hope that change is possible in the most resistant of situations.

Wheatley makes the point that not unlike the caterpillar, those within any profession who are the first or isolated voices that call for change are sometimes muted, ostracized, or replaced. However, as more individuals form clusters of conversations and activities, then true change begins. This author agrees with Wheatley that it is time we use our imaginations to create a new state of being—one that does not resemble today's model and systems. Albert Einstein said “Imagination is

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more important than knowledge.” Today, we know we need to change, but it is the full power of our collective imaginations that will manifest a transformation that will result in our evolution.

To transform our models, organizations and programs will require a large number of individuals working together collectively to lead the change. First, it is important that academics produce and incorporate research on volunteerism in curricula and coursework throughout higher education. This will spur their colleagues and students to pursue scholarly investigation of this vital and evolving field. Research for scholarly journals should include naturalistic approaches so that themes, patterns, and trends at the grassroots level can be identified and used to share findings and recommendations. Second, recognized experts have the most influence and clout to promote cutting edge models and new practices to elite and powerful audiences such as CEOs, board members, and funding sources within all sectors. Capitalizing on advocacy and educational opportunities among these elite groups can increase the receptivity and motivation for them to lead change within established institutions. Third, consultants can open the door for change by facilitating the design and implementation of new models with their clients. Entering into contracts to provide traditional strategies and approaches that are merely repackaged does little to further the field or meet the real needs of the organization’s staff and volunteers. Fourth, volunteer management associations are positioned to work closely with their membership to convene, facilitate, formulate, design, endorse, and disseminate new models. As a result of widespread and frequent convening opportunities, collective wisdom could be better garnered to increase and enhance conversations that expedite change within the field. Most important, volunteer leaders can benefit from creating vibrant — or engaging in existing — “communities of practice,” such as local DOVAs or AVA online discussion forums, so they can meet regularly, either in person or via the internet, to discuss, exchange, and develop ideas about ways to design, initiate, and expedite the transforma-

tion. It is through their conversations and experimentation at the grassroots level that we can learn the most and guide new thinking and practices.

New volunteer management models can best be developed from the leadership and contributions of many. Everyone has a role to play on the local, state, national, and international level. The collective wisdom of all will produce the most imaginative and viable models. The time is now, the leaders are each of us within our own spheres of influence, and our mission is to become unified so we can manifest our vision.

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# GUIDELINES

## FOR SUBMITTING MANUSCRIPTS

### Content

The *Journal Of Volunteer Administration* seeks to publish original manuscripts that provide for an exchange of ideas and sharing of knowledge and insights about volunteerism and volunteer management and administration. Manuscripts may focus on volunteering in any setting, in North America and internationally.

*The Journal* is a refereed publication of the Association for Volunteer Administration (AVA) and expands and updates the research and knowledge base for professional volunteer administrators and other not-for-profit managers to improve their effectiveness. In addition, *The Journal* serves as a forum for emerging and contemporary issues affecting volunteerism and volunteer administration. *The Journal* is written, peer-reviewed, edited, and published by professional volunteer administrators, researchers, and consultants, sharing with their colleagues successful applications, original and applied research findings, scholarly opinions, educational resources, and challenges on issues of critical importance to volunteerism and the field of volunteer administration.

Manuscripts may be submitted at any time during the year. *The Journal* is published quarterly. Authors submitting manuscripts to *The Journal* must follow the guidelines in this document. Submissions that deviate from these guidelines will be returned to the corresponding authors for changes. Manuscripts must be submitted for one of five focus areas:

**Feature Article** (reviewed by three reviewers): Discusses applied concepts and research findings of particular interest and significance to volunteerism and volunteer administration both in North America and worldwide. Connects theory to practice and emphasizes implications for the profession. (Maximum length: 3500 words plus abstract, tables, and graphics).

**Research in Brief** (reviewed by three reviewers): Summarizes basic and applied original research results of importance to volunteer administrators. (Maximum length: 1000-2000 words plus abstract, tables, and graphics).

**Ideas That Work** (reviewed by one reviewer): Describes novel ideas, training formats, innovative programs, and new methods of interest to volunteer administrators. (Maximum length: 1,500 words plus abstract, tables, and graphics).

**Tools of the Trade** (reviewed by the editor): Reports on specific materials, books, and technologies useful to volunteer administrators. (Maximum length: 1,000 words plus abstract, tables, and graphics).

**Commentary** (reviewed by the editor): Offers a challenge or presents a thought-provoking opinion on an issue of concern to volunteer administrators. Initiates discussion or debate by responding to a previously published article in *The Journal*. (Maximum length: 1,500 words plus abstract).

### Manuscript Style and Preparation

1. Submit manuscripts as MicroSoft Word 5.0 for Windows or Word Perfect 5.2 or higher, 12-point type, Times New Roman font, double-spaced, 1.5 margins all round. May be submitted by e-mail, floppy disc or CD (labeled with the author(s) names).
2. All manuscripts must have a running head, which is an abbreviated title that is printed at the top of the pages of a published article to identify the article for readers. The head should be a maximum of 50 characters, counting letters, punctuation, and spaces between words.
3. Manuscripts must have all identifying information removed. Include all author's name/s, affiliation/s, address/es, phone number/s and e-mail address/es on a separate cover page that will be removed for the review process.
4. Include a short (3-4 sentence) biography of each author.
5. Include an abstract of 150 words or less.

6. Double space everything: text, abstract, end notes, author's notes/acknowledgments, references, block quotations, appendices, AND tables.
7. References should be italicized, not underlined.
8. Left-justify everything with a ragged right-hand margin (no full justification).
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Authors may be asked to submit a hard copy of the final version of an accepted article. It may be mailed or faxed, double-spaced, 1.5 margins all round, printed on one side of the paper only.

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