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ASSOCIATION FOR VOLUNTEER ADMINISTRATION

The Association for Volunteer Administration (AVA) is the professional association for those working in the field of volunteer management who want to shape the future of volunteerism, develop their professional skills, and further their careers. Members include volunteer program administrators 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. AVA is open to both salaried and nonsalaried professionals.

AVA also has a special membership category that enables organizations with mutually compatible goals to AVA to become Affiliate Members. Affiliates range from local associations of directors of volunteers, to statewide volunteer groups, to national organizations. Affiliates, each with its own membership base, broaden the networking possibilities open to all AVA members.

AVA is an association run by its members. Active committees include: Public Information; Professional Development; Resource Development; and Public Policy. 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 volunteerism.

AVA is divided into twelve geographic regions, each of which develops a variety of programs to serve its members. These can include annual regional conferences, periodic local workshops, newsletters, and informal "cluster group" meetings.

Two major services that AVA performs, both for its members and for the field at large, are Certification and Educational Endorsement.Through the Certification process, which 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 volunteerism.

Finally, AVA produces publications, including several informational newsletters and booklets, and THE JOURNAL OF VOLUNTEER ADMINISTRATION.

For further information about the ASSOCIATION FOR VOLUNTEER ADMINISTRATION, contact AVA, P.O. Box 4584, Boulder, CO 80306.

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PREFACE: Volunteerism's Vital Speeches

The Journal of Volunteer Administration is pleased to introduce a new occasional feature, "Volunteerism's Vital Speeches," in this issue.

There are many in our field who are asked to speak on topics related to volunteers, volunteerism, or volunteer program management. Some of these are people whose names we recognize instantly; others are not so well known, but challenge us to think in new ways, or reflect on the past or future, inspire us, or even laugh at ourselves.

Although *The Journal* has published speeches given at the Association for Volunteer Administration's (AVA's) International Conference on Volunteer Administration, this publication has not had the opportunity to publish any of those given elsewhere throughout the year. There are excellent ideas being shared, and we think this feature may help serve to communicate these ideas.

We are privileged to begin this feature with a speech by noted author-consultant-trainer Eva Schindler-Rainman. Read more about Dr. Schindler-Rainman and her speech immediately following this introduction.

If you are considering submitting a speech for publication in *The Journal*, please review these guidelines:

1. Follow the regular guidelines with regard to format (*i.e.*, double spaced, typed, three copies).
2. Only the speech-*giver*, him or herself, may submit a copy of the speech and give *The Journal* permission to publish it.
3. Limit the length of the typed copy to no more than ten pages. You may edit your manuscript to make it appropriate for easier reading.
4. Please include details describing the circumstances under which the speech was given: date, place, occasion, for example.
5. Unless exceptions are worked out with the Editor-in-Chief prior to publication, *The Journal* retains the copyright and should be referenced when appropriate.
6. As with all articles being considered for publication, speeches will go through the blind review process.
7. The Editor-in-Chief retains the right to limit the frequency with which an author/speech-giver is published.

We hope you, the readers, enjoy this new feature and will consider sharing your own speeches.

Anne S. Honer
Editor-in-Chief

P.S. Is anyone ready to try being guest editor for an upcoming issue? Why not use the experience to generate articles of particular interest to you?

Volunteerism's Vital Speeches

Given as a luncheon keynote address at the American Red Cross National Volunteer Conference, "Volunteer 2000–The Future Is You," November, 1988 in Washington, D.C.

Volunteerism Is Changing!

Eva Schindler-Rainman, Ph.D.

We are living in exciting, complex, rapidly changing times. We are part of a small planet called Earth—closely interrelated to many nations and people. We are interdependent, dependent, and independent! We can do almost anything we want to, if we know our values and our mission and if we become more flexible, open, and caring.

The themes of our times could be summed up in the 10 Cs. They are:

Change
Challenge
Choice
Creativity
Competence
Communication
Cooperation
Collaboration
Courage
Caring

Our symbol could be the butterfly—evolving from a cocoon into a beautiful, free-flying creature. It unfolds and transforms; it is a spiritual symbol—a symbol of creativity and loveliness, and a symbol of new birth and life.

We, too, must evolve, and see how we can tap into the new, yet not lose all that has made us what we are, from the past and from the old.

This paper is divided into:

1. some global thrusts pushing us to change;
2. some implications for not-for-profit systems; and
3. linkages we must strengthen or develop.

Eva Schindler-Rainman, Ph.D., is a national and international consultant, trainer, speaker and behavioral scientist with special expertise in the areas of diversity, human resource development, voluntarism, and nontraditional organizational and community design and development. She also has written a fair amount on the technology of productive meetings and conducts seminars and training courses in that subject as well as consulting skills, communication, interventions in large, complex systems, making change happen, training theory and practice, and roles of decision makers. Recently she has been working with programs with high potential in the corporate world. Dr. Schindler-Rainman is the author or co-author of eight books; contributing author of numerous books, anthologies, and workbooks; author of more than 300 published articles, and creator and/or narrator of multimedia packages, radio and television shows, and videotapes. She holds a BA in social welfare from the University of California at Berkeley and the Master's and Doctor's of Social Work from the University of Southern California.

GLOBAL CONCERNS AND THRUSTS THAT AFFECT US

The first thrust is *Pollution*, both environmental and human pollution. Among the environmental concerns are those of acid rain, green space, the ozone factor, atomic energy, the preservation of the Rain Forest, and our waters and wildlife around the world.

Among the concerns that might be called human pollution are those of AIDS, hunger and starvation, substance abuse, stress and its effect on mental health, and homelessness.

It is clear that these concerns call for new actions and the drawing on a vast army of human beings interested in and willing to work on these challenges. They will need to include, as in the many places they already do, both paid professionals and volunteers.

Another global concern is the *Importance of Diversity.* It has become clear throughout the world that diversity is a rich resource that can be utilized in a variety of creative ways. Diversity includes: diversity of age, of race, of gender, of ethnic background, of religion, of people who are relatively well to those who are less abled, and people who are heterosexual as well as those who choose a homosexual lifestyle.

We see the importance of diversity through such revolutions and evolutions as the work of the Armenians to be an independent group, as well as similar strivings by the Palestinians, the Turks, the Israelis, the Basques, and the Blacks in South Africa.

We are seeing an emphasis on the importance of the beauty of difference, rather than the emphasis on conformity.

Population Planning in a crowded world has become another very important concern and item for action. It is calling on millions of volunteers and health professionals to help people understand and to accept cultural and belief differences in relation to population control.

The advent of the *Information Society* and the need to link people and systems through advanced technologies is another trend. There is the ability to acquire these technologies, as well as the opportunities to learn the skills to operate them. Part of the challenge is to know what technologies are needed by whom and how to mobilize the necessary human resources to operate these technologies for the best quality of life for all people.

Certainly, *Educational Concerns* are worldwide. There is the thrust through many literacy efforts to help children and adults learn to read. There is a growing movement that believes that there should be access to educational opportunities for all. These opportunities may be through television, radio, or through children and adult schooling opportunities. There is also a thrust to share knowledge gathered through research, so that the same research does not have to be done all over again in different places on the earth. Many more volunteers could be harnessed to make the leap from intention to action, so that educational opportunities can be available to more people in more places.

Collaborative Thrusts are certainly another visible dynamic. It has become clear that in order to contain hostility and violence, nations must collaborate. On another front, there is the need to link, so that open trade for goods and services can become a reality. It is clear through such organizations as the International Conference on Social Welfare, the International Association of Volunteer Effort, and the Red Cross, for example, that not-for-profit organizations are very much involved in linkage and collaboration in order to improve relationships between nations. But governmental bodies are also involved in such activities as space exploration and the problems of disposal of human and technological waste. The international industrial systems are also concerned with and involved in collaborative efforts.

It is clear that the nations of the world, and the people therein, are in transition. They are moving from the no longer to the not yet, and trying to keep that of the old and familiar which is still viable, and to become creative with those opportunities that have not been offered before.

IMPLICATIONS FOR THE VOLUNTEER COMMUNITY . . .

. . . for developing from a cocoon to a beautiful butterfly.

. . . for transiting from the no longer to the not yet.

Trends, pushes, concerns, and needs have implications for actions. Some of these might include the following:

Diversity

There is a need to do *creative tapping into the diverse human resources that surround us.* All people are potential volunteers, be they three or 103 years old, young, middle, or older; be they well or less abled; be they employed or unemployed; be they religious or not; be they native born or newcomer; be they economically well or badly off; be they very formally educated or less so. People of all colors, ethnic and national origins, and backgrounds of all lifestyles are waiting to be more involved in their own and others' welfare.

This also means *changing our use of language* to indicate colleagueship, equalness, respect, acceptance and caring. Let me give a few examples: "to use volunteers" must be translated to encourage volunteers to work with a particular organization, or to recruit volunteers to fill opportunities. But people do not want to be used. Sometimes we say we "allow" people to do things. A better concept would be "to encourage," "to invite" or "to support" people to do things. Often heard is the term "to reach out." Who is reaching out to whom? Why not talk about "opening opportunities" or "making new connections"? "The Handicapped" is the way that people are often described who are differently abled. This is not an empowering connotation, whereas "differently abled" might be much better. Things are either "black" or "white," meaning bad or good. Isn't time to find another way to talk about right and wrong, good and bad?

All this means that we must increase our sensitivity to how we describe situations and people, and try to "step into the shoes" of the people or situations that we are describing.

Meeting Technology

This also means that our *sensitivities to meeting patterns and meeting technology* need to be changed and sharpened. This includes the way people are invited, the time and timing of meetings, the refreshments that are offered, the seating, greeting and meeting patterns that are developed. It is clear around the world that a more participative mode is preferred to one that is nonparticipative. Indeed, there must be reciprocal learning opportunities between teacher and learner, instead of one-way transactions from teacher to learner.

Values and Ethics

Another implication is clearly that there needs to be *a re-examination and re-emphasis of our values and ethics.* It is said that 56% of all the hospitals in the United States now have ethics committees, and some have ethicists in residence. The volunteer world has to look at that model and be clear that the serious issues of liability, malpractice, honesty, and clear contracts with volunteer and staff may also be re-examined. Ethics and values need to be clear and explicit in the volunteer world, as they must be in the corporate and governmental world.

Collaboration

It is necessary to develop *competencies in collaboration.* Collaboration may be defined as an effort by disparate persons and/or systems to work together on agreed upon goals or projects. This means creative compromise, pooling of resources, keeping one's own identity while being open to change, and indeed doing together what would not be possible alone. Collaborative efforts might include the sharing of research data, the developing of family volunteering opportunities, the movement into public advocacy for a variety of causes, the collaborative educating of volunteers, be they service or administrative volunteers. In a productive collaborative effort there are some necessary competencies, such

as sharing of leadership, utilizing temporary systems/committees/groups, etc.; learning to listen to and use different points of views, changing meeting techniques and acquiring new skills, being clear that initiation of an effort does not necessarily mean ownership, and learning the art of recognizing the contributions of each of the parts of the collaborating body.

Leadership

It is necessary to *develop and transform leadership patterns, attitudes, styles, and competencies.* The modern leader needs a clear and understandable value and ethic system and a sense of mission that can be communicated. The leader needs to study and understand and use the environment locally, organizationally, nationally, and globally. A leader needs to have the ability as well as the excitement in visioning what can be and framing visions in terms of understandable actions. This means planning skills and the methodology that goes with developing participative, empowering, doable plans.

It is also clear that the modern leader needs to enjoy managing complexity and change, because there are multiple stakeholders, colleagues, clients, board members, staff and volunteer teams with whom to deal. Indeed, participants, both staff and volunteers, come "with many hats," or roles, and it is necessary to accept the fact that most participants have a variety of loyalties. It is also important for a leader to learn how to handle confrontations and differences, as well as hostility, in creative and productive ways.

The leader needs to promote and support creativity and learning in self and others since there is almost no way to keep up to date if this is not an important concomitant.

Humane human resource management competencies are also necessary. It is important to believe and then practice the belief that all people have resources and competencies and that systems must learn how to uncork these, like a good bottle of wine, slowly and caringly, and thus must build empowerment and trust in those with whom the leader works. Building teams of staff and volunteers in order to produce a service and/or product becomes increasingly necessary.

Perhaps an "Up Management" point of view, that is, seeing the possibilities rather than the problems and finding the strengths rather than the weaknesses in people and situations, will be necessary and empowering to the leader.

The modern leader must also be able to enjoy and celebrate and lift the work spirit to new and committed levels.

LINKAGES AND CONNECTIONS NEEDED IN THESE TIMES OF TRANSITION

In order to act on the above, it will be necessary to:

1. link skill and competence.
2. link democratic ways of work with effectiveness and productivity.
3. link analytic thinking with passion.
4. link altruism with accountability.
5. link leading and motivating with caring.
6. link problem-solving with conflict resolution.
7. link leadership with empowerment of others.
8. link artful use and selection of the old and traditional with the new and untried.
9. link carefulness with risk taking.
10. link concern and problem orientation with energetic possibility thinking.

This is a time of change, growth and vitality in the volunteer world, and as staff and volunteer, . . .

we are changing.
we are meeting the challenges ahead.
we are making appropriate choices.

we are creative.
we are creatively compromising.
we are communicating more openly.
we are cooperating more productively, and we shall collaborate with diverse people and systems.
we shall have courage to risk experimenting with the new; and above all,
we shall continue to lead in caring about all others, as well as ourselves.

As a new volunteer world dawns, we can celebrate our movement and progress
from the there and then to now
to a beautiful and bright future.

Perhaps we are on the verge of leaving the cocoon and flying!

ABSTRACT

Organizational communication practices have direct impact on the feelings of commitment volunteers have for their organizations. An analysis of one church's communication practices provides guidelines volunteer organizations can use to initiate and sustain member activity.

Improving Volunteer Commitment to Organizations

Joann Keyton, Ph.D., Gerald L. Wilson, Ph.D., Cheryl Geiger

Organizational commitment is primary to the functioning of organizations which rely upon volunteers. Commitment has been explored in many profit settings, yet it is difficult to transfer the conclusions drawn from work done in those settings to organizations where the workers (volunteers) based their participation solely upon intrinsic rewards.

As a result of this research focus on profit-making, salary-paying organizations, organizational commitment has been equated to professional or job commitment and is often measured through pen and paper tests. In their review of four popular organizational commitment instruments, Barge and Schlueter (1988) show that only one (the Mowday, Steers, & Porter Organizational Commitment Questionnaire) does not include elements relating to pay or salary. They point out, however, that all four treat communication as an antecedent condition to commitment.

Organizational commitment has been explored as part of organizational identity (Cheney, 1983) but some of the elements, such as decision making, do not translate easily to volunteer organizations. In their review of the organizational commitment literature, Eisenberg, Monge, and Miller (1983) define organizational commitment as: "1) a strong belief in and acceptance of the organization's goals and values; 2) a willingness to exert considerable effort on behalf of the organization; and 3) a strong desire to maintain membership in the organization" (p. 181).

Organizational commitment has been linked to absenteeism and turnover, and used as an indicator of organizational effectiveness. Eisenberg, Monge, and Miller (1983) indicate that "there is no simple or direct relationship from either communication network involvement or job involvement to organizational commitment. Instead, communication activity is differentially related to commitment depending upon the level of job involvement of the employee" (p. 193). Once again, the operationalizations of these variables do not correlate to the volunteer context, thus making it difficult to apply these findings.

In the study of social influence associations—volunteer organizations that attempt to influence public policy—membership commitment is reciprocal to the organization's normative social control system (Knoke & Wood, 1981). While we see similarities between these types of organizations and community support volunteer organizations, differences are too significant to consider as parallel the two types of organizations and the commitment of their members. The basic similarity between those two types of organizations is that each gains essential resources from members in terms of skill, time, money, and support. The basic difference is in the goal of the organization. Knoke and Wood (1981) focus completely on volunteer organizations whose goal is to influence social values and shape public policy by directing individual energies toward collective interests to change general societal values (*e.g.*, civil rights groups). There is a need to focus on volunteer organizations which supply community support and services.

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A volunteer organization may be defined as an organization with a formal and public identity. Most members give their time and energy to the organization without monetary expectations or exchange. The output of these types of organizations typically includes services to the organization's community with additional output being the satisfaction of the individual needs of its members.

As rhetorical and interpretive organizational communication research indicates (Putnam, 1982; Putnam, 1983; and Vaughn, 1988), organizations are value-laden structures, and the affinity individuals feel towards the values which organizations espouse may be a primary reason for joining and sustaining membership with an organization. Although values are strong indicators of organizational choice, organizational commitment as it is usually studied also depends upon other factors—monetary reward, status, networking, and interpersonal rewards—as reasons people join and stay with organizations. Clearly, the monetary factor is a major force in organizational choice, but it is absent in volunteer organizations. With the current focus on organizational communication, it is not possible to translate many research findings and quantitative methodologies to the volunteer organization context.

RESEARCH FOCUS

Important questions remain to be explored. Why do people join and support the activities of volunteer organizations? What specifically do volunteer organizations do to entice and retain membership? What are the communication strategies of volunteer organizations and how effective are they?

These are important questions as our culture is entering an era of dependence upon volunteer organizations to provide an ever-increasing load of physical and psychological support and services that cannot be provided by governmental entities. President Bush has encouraged citizens to become involved in their communities. His encouragement appears to have paid off. Kantrowitz reports in the July 10, 1989, issue of *Newsweek*:

> After years of apathy Americans are volunteering more than ever. According to a 1987-1988 survey by Independent Sector, an umbrella organization for most of the major charitable groups in the country, 45 percent of those surveyed said they regularly volunteered—and more than a third of them reported spending more time on volunteer work in the last three years. In all, it is estimated that 80 million adults gave a total of 19.5 billion hours in 1987. . . . They certainly were needed. Bush's compassionate call to service comes after the tightfisted Reagan years, in which public funding of social services was drastically cut (p. 36).

To explore the questions surrounding commitment to volunteer organizations, the researchers took advantage of an unusual opportunity in a midsize southern city to examine the phenomenal growth of a Methodist church. Within the last five years, the church has sustained unprecedented growth, making it the fourth fastest growing Methodist church in the United States. In addition to its unusually high growth rate, the church has one of the highest member attendance percentages for churches. Over four Sundays, the church averages attendance by 85% of its members. This is an extremely active church as each week the church is host to over 40 group meetings, excluding its Sunday Church School Program. While some volunteer organizations are having difficulty in attracting and retaining new members, this organization appears to have developed a strategy that works. Membership and organizational activity continue to increase.

A thorough analysis of this organization will aid in exploring questions about organizational commitment when monetary factors are not present.

Churches are very similar to volunteer organizations in that they rely upon the volunteer commitment of their members. Specifically, this study set out to determine what and how the church was communicating to its potential and present constituents that made them want to become and remain members. Of course, the profession of faith accounts for a large

share of church member commitment. But profession of faith should exist for members of any church. In comparing this church to others of the same faith and others in the same geographical area, this church has a substantially larger and more active substructure. This substructure is a web of small, focused groups that serve individual and community needs. The tasks or concerns of the groups are quite varied; few have a direct connection to profession of faith. Thus, in comparing this church to volunteer organizations, this parallel can be drawn: the church's substructure relies solely upon the volunteer activity of its members.

METHODOLOGY

To begin an exploration into volunteer organization commitment, five focus group interviews (three female groups and two male groups) were conducted. Typical focus strategy is to conduct enough (generally two or three) focus group interviews to get consensus in the data and to continue to conduct focus group interviews (seldom more than six to eight) until the information obtained becomes redundant (Krueger, 1988; Morgan, 1988). All three researchers agreed that the focus groups met the consensus and redundancy criteria with the five focus groups. Interviewees were randomly selected from the church membership roster. They were screened over the telephone and invited to attend a group discussion about their church. The following questions became the focus of those group interviews:

1. We all have ideas or theories about why things happen the way they do. From what I've read about your church, it's my impression that it is experiencing growth in church membership right now. What's your perception of the growth of the church and what do you believe accounts for any growth that the church has seen?
2. How do you see yourself participating in the growth process?
3. Where do you think this growth will lead?
4. What are the positives and negatives about your organization's growth?
5. Why were you initially attracted to this particular church when there were other churches to choose from?
6. What's the attraction now since you're a part of this church?
7. Has that attraction changed since you've joined this church? How?
8. People sometimes use these phrases—sense of community, commitment, identify with, loyalty to, belonging—to describe their feelings toward an organization. How would you describe your feelings toward this church?
9. What people or groups of people in the church have had an impact on the development of your feelings towards this church?
10. What do you do to show your sense of community/commitment/identification/loyalty/belonging?

To broaden the focus to other volunteer organizations, the focus group discussants were asked specifically to compare their religious organization to other volunteer organizations. The following questions were the center of that discussion:

1. How are community/civic/volunteer organizations different from or similar to this church as an organization?
2. Does sense of community/commitment/identification/loyalty/belonging for these other types of groups differ from your commitment to this church?
3. How could other community/civic/volunteer groups benefit from the growth experiences of this church? What advice would you give them about attracting and retaining members?

The focus group interaction was recorded, transcribed and verified. Several general themes became apparent in the focus group discussions. To further explore these, eight one-on-one interviews were conducted with other church members who had not participated in the focus

group discussions. These members were selected from the church membership directory, screened over the telephone, and invited to a personal interview to discuss their church and volunteer organizations. These interviewees were screened to ensure that they were volunteers or had recently been volunteers in other organizations.

The one-on-one interviews were conducted to provide validation of the group discussions, to allow the interviewers to more specifically explore earlier responses, and to make direct comparisons between religious and other volunteer organizations. Like the focus group methodology, the one-on-one interviewing was stopped when the information became redundant. These interviews were also recorded, transcribed, and verified. The following questions served as the outline for the part of the interview focusing on individual member commitment to the church:

1. How did you come to this church?
2. Why do you think this church is attractive to visitors?
3. Why do you attend this church?
4. What words can you think of that describe why you attend this church regularly? Some people have used these words to describe their experience with the church—accepting, active, blessed, caring, close, comfortable, dedicated, loving, wanted, welcomed. Which of these words, if any, do you see as describing your experience?
5. What did people in the church do or say that causes these words to come to mind?
6. How do you see yourself participating in the growth process of this church?

The following questions were used in the individual interviews to encourage interviewees to compare their volunteer activity outside the church to the activity in the church:

Focusing now on your involvement in another volunteer organization such as the American Red Cross (or the Cancer Society, your volunteer work at the hospital, etc.):

1. How did you come to this organization?
2. Why do you think this organization attracts members?
3. What words can you think of that describe why this organization attracts members?
4. Why do you attend meetings, functions, or activities of this organization?
5. What words can you think of that describe why you attend meetings/functions of this organization?
6. What kinds of things did people do or say that cause these words to come to mind?
7. How do you see yourself participating in the growth of this organization?

RESULTS

From the focus group and the eight personal interviews, three themes about the church's communication style persisted. They are:

1. All members of the church know the philosophy of the church and can tell others that philosophy in their own words.
2. Members of the church feel a strong sense of belonging to the church not because they are one of a large organization but because they are members of smaller groups that make up the larger organization.
3. Members of the church are active in the church because they volunteer for what they *want* to do rather than being expected to do what they are able to.

DISCUSSION

Sharing in the Church's Management Philosophy

The first communication strategy—having constituents know and be able to repeat the philosophy of the organization—is a strategy many organizations strive for, yet few achieve. Many organizations spend large sums of money to put the "philosophy" of the organization before its people in catchy phrases or slo-

gans hoping that constant repetition will help its constituents remember the philosophy.

The management of the church has gone beyond simple repetition to achieve member recognition and understanding of the church's philosophy. The values of the church have been communicated in multiple network patterns resulting in member embodiment of the church's philosophy. Nearly every church member in this study said that the church was successful because: 1) everyone is welcome—every religion, every color, every socio-economic status; this church is to serve all people; 2) it is okay to try anything because it is okay to fail, the church and its activities are not bound by artificial parameters that dictate "a church does not do that" or "a similar activity has failed in the past"; 3) people become involved by letting them become involved at their own pace; church attendance or other church activity is not an issue until it is a personal issue for that person.

While these management philosophies are easy to enumerate, this church has succeeded in their practice. The successful communication of church policies is embodied in the practice of the policies making this church a good example of structuration theory (Poole & McPhee, 1983). The church has developed a climate that actively and positively serves itself. Members of this church are able to believe in the policies because they see them enacted over and over. The result is joint ownership. Members feel that they are a vital part of the church because they are also able to enact "their" management policies.

To help new members assimilate the philosophy of the church, the church holds classes expressly for new members to serve this function. An excerpt from one of the focus group discussions illustrates:

> One of the things that impressed me right off was when we first joined . . . right on to one of Jeff's new member classes. So that everyone in that class, everybody knows where the church came from and where it is going. Other churches, you know, you just join and don't worry about where we came from. Here, it's "I'll tell you what you need to know to look on down the road from here." So everybody starts out here understanding where we are going and where we have been, and where we come from, what made us, what brought us to this point. This lets you fit in and help go beyond from there. That's important to me.

Not One of Many, But One of a Few

This church has a rather large membership and one that crosses most demographic lines. To serve all of its members, the minister preaches three Sunday sermons. To attend to all of the members' ministry needs, two additional associate ministers help with visitations and assimilation. Completing the church's staff are an administrator, a youth director, a music director, and a children's coordinator. Having these additional church staff members helps in bringing personal attention to the 1,600 members. More crucial is allowing church members to develop their own groups to meet their own special interests and needs.

Church members have developed groups to ring handbells, support those who are grieving a loss, teach auto mechanics, aid the homeless, educate the illiterate, and support singles, to name just a few. These groups are recognized by the church in the weekly newsletter and Sunday sermon. Being a member of these identifiable units of the church gives members a sense of identity and influence within the larger church structure. The activities and the membership of these groups are controlled by the group members, not by the church leadership. The groups serve individual member need and further serve to personalize member involvement within the church.

These excerpts from the focus group discussions illustrate:

> It's just not Sunday morning preaching or Wednesday night Bible study, but it's something going on for everybody in the family. The whole family can be involved in it. And that just feeds on itself. In just the year we have been here, I have seen groups grow . . . I am just

real excited to be caught up in part of the growth. I think it's self perpetuating.

I think that a key is that you have to work to retain people, get them involved. It's sort of easy to get people to join, but it's difficult to keep them interested. I was real active in . . . for years, and we set records every year for getting new members. We had a heck of a turnover. We just couldn't keep them because we didn't have programs that focused on that. All we tried to do was just keep getting new members. And that's one thing that I think this church has been great at is getting new members involved, finding out what everybody's interests are, and getting somebody to contact them in whatever interest group . . . rather than just worrying about getting them on the rolls. If you think about this church, it is a large number of small groups. Everybody feels comfortable in a small group. . . . It's not a thousand people meeting every Wednesday night . . . because of all those small groups and because of that love, that connection, that fellowship, people just keep coming in and there is always somewhere for somebody to do something.

Groups run a risk of becoming segregated or isolated from the larger organization and other groups in the church. However, the church actively works to tie groups to one another by sharing announcements about all groups' activities, encouraging multiple group membership, and treating all groups equally. Thus, the church has been able to discourage cliques that develop in other organizations.

Willingness versus Ableness in Member Contributions

Over and over, members told how they appreciated the church's leadership for allowing them to do what they wanted rather than being expected to provide a service similar to their vocation. When a new member joins, each is asked what he or she wants to do by making reference to a list of 156 different tasks on an "activity" list. This information is computer filed, managed, and updated yearly. This allows members to control their contribution in terms of type of service and amount of service. Many members remarked how their careers had limited them to providing certain services for other churches they had attended.

As an example, one woman told that at another church she was expected to teach Sunday School because she was a kindergarten teacher. At the church in this study, however, she didn't check teaching Sunday School on her "activity" list and thus no one asked her to provide that service. She commented that she appreciated being given a break from the expectation that she would teach Sunday School. The following focus group excerpts explain:

Often times people think that when they come in they are going to be sucked in and overloaded. Sure, they take a stand like "I don't want my whole life to revolve around the church."

Well, in the past, if you were a Sunday School teacher, you've got it forever. But here, I have found if you get on a committee and you find that this is just not your thing, all you have to do is say "this isn't my thing" and they will say "fine, get on another committee." They don't put that guilt on you.

Applications for Volunteer Organizations

Three very simple principles can be learned from this church and its growth experience. These principles can be applied to volunteer organizations to help them attract and retain members who volunteer their time and services.

First, volunteer organizations need to adopt a "not afraid to try" attitude and make that attitude actively visible. No organization should blindly attempt any project, but when an organization is running on the force of volunteers, it needs to remain open to their suggestions, motivation, and enthusiasm. Volunteers should be included in brainstorming and creative planning sessions. By tapping the creativity of all members rather than relying on only the talents of the organization's leadership, the organization will display an

attitude that says "yes, we are listening" and "yes, your input is valuable." If volunteers do not believe that they are an integral part of the organization, they are likely to feel that their services are not unique or special and that their time is not important because "anyone can do what I do." When volunteers feel this way they are likely to leave the organization.

Adopting the "not being afraid to try" attitude can pervade the organization in other ways. It can inspire volunteers to try harder. This is especially helpful when volunteers are working in situations that appear bleak and full of despair. Being able to develop creative ways of reaching and serving others is at the heart of volunteerism. If this attitude is not at the heart of the volunteer organization, why should an organization expect its volunteers to adopt and maintain a similar attitude?

Second, volunteer organizations need to provide a way for volunteers to personalize their contribution. Having volunteers be active in subgroups of the larger organization is a way for the organization to maintain contact with the volunteer and to avoid a volunteer feeling that he or she is just one of many. Members of subgroups should have contact with one another regularly to enhance this feeling of belonging and to strengthen interpersonal relationships within the volunteer organization. This is one of the greatest factors that creates feelings of organizational commitment.

Subgroups should have specific functions and genuine reasons to exist. Pseudoactivities will not suffice. Subgroups should have an organizational reference in terms of identity and function and should be mentioned in organizational correspondence to volunteer members. Their activities and meetings should be on the organizational calendar, and the meetings of these various groups should be regularly publicized. The subject church publishes a weekly newsletter and distributes a bulletin at its Sunday services. Reminders are also sent regarding important meetings.

Leaders of these subgroups do not necessarily need to be among the organization's leaders. A reporting or notifying relationship can tie the subgroup to the main organization, but organizational leaders can be overburdened when placed in charge of subgroups that can work well under the direction of a spirited volunteer or a volunteer team. The leaders of these groups need to embody the philosophy of the organization to help in the continual development and structuring of the active and positive climate. Careful selection or training of leaders will help here.

Third, volunteer organizations would benefit from letting volunteers assess what they are willing to do versus what they are able to do. Although a frequent way to uncover a person's abilities is to ask about work experience, stereotyping a volunteer's ability by vocation can be harmful to the volunteer's relationship with the organization. Volunteer organizations might make lists of both physical and cognitive tasks and ask volunteers to identify which tasks they are interested in doing for the volunteer organization. This seems a more fruitful way of matching volunteers to activities rather than asking "Do you want to be a library tour operator?" Finding a volunteer's niche appears to be a critical ingredient to strengthening volunteer organizational commitment. In addition, allowing people to move freely from jobs and groups guards against burnout, sustains organizational interest, and helps to inhibit cliques from forming.

In summary, these three ideas together will be most successful if volunteers know the organization's philosophy, see it in practice, and are able to describe it to others in their own words. These are characteristics of Likert's (1967) participative system where employees are allowed and encouraged to participate in decision making. Likewise, volunteers who participate fully in the development and enactment of their organization will have an increased sense of responsibility and motivation which leads to increased organizational commitment.

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Job Aids for Volunteers: Tools to Help Them Successfully Complete Their Jobs

Susan J. Barkman, Ph.D.

In most organizations, when a person volunteers he or she is given a job description. But such descriptions usually give only an overview of the job and little detail on how to fulfill it. All too often, volunteers start with plenty of energy but become discouraged when that energy is wasted trying to figure out what the job really is.

If a volunteer is to be satisfied and successfully complete a job, then he or she needs to know in clear detail just what is expected. It is important for administrators to remember that no job is so simple that some preparation would not be constructive. Job aids, combined with orientation and training, can provide volunteers with the details and tools needed to help them successfully complete their job.

WHAT IS A JOB AID?

In the simplest terms, a "job aid" or "performance aid" refers to anything that assists an individual in the process of completing a task or making a decision.

Job aids are used every day at home, in the workplace, and in the community. Recipes, shopping lists, step-by-step assembly instructions, troubleshooting guides on copy machines, emergency instructional pamphlets on airplanes, tax tables and flowcharts are all examples of job aids. Job aids are based on an analysis of what the intended user must do to complete the job. In essence, they are designed to improve human performance by providing information on what to do, how to do and when to do.

WHY USE JOB AIDS?

Volunteers make up an important part of the workforce in many organizations and some could not function without them. Volunteers are staff members, and, like other staff members in the organization, they need to be provided with the tools to perform their jobs effectively.

There are five major reasons for using job aids with volunteers:

1. Job aids focus the volunteer on performance, not on policy, history, personal opinions, backgrounds, or interpretations. Since they are related specifically to the task, they provide concise instructions on how the task is to be performed.
2. Since job aids present information in an easy, logical format, they help the volunteer remember critical components that might otherwise be forgotten.
3. Job aids cost less money and require less time to develop than other forms of instruction.
4. Job aids are more flexible than other forms of instruction and are easier to revise when performance procedures change.
5. When they are used to support training, job aids shorten training time and speed the acquisition of knowledge and skills required by the job.

WHEN SHOULD JOB AIDS BE USED?

Job aids can be used at all four stages in the L-O-O-P volunteer management process (Fox, Penrod, 1989).

Stage 1: Locating volunteers.

During this stage, the emphasis is on recruiting and selecting volunteers to do a variety of jobs within the organization. Here the job aid can be a useful tool in helping to fit the right job with the experience, interests and time constraints of the volunteer. The job aid lets the volunteer know what will be expected as well as the

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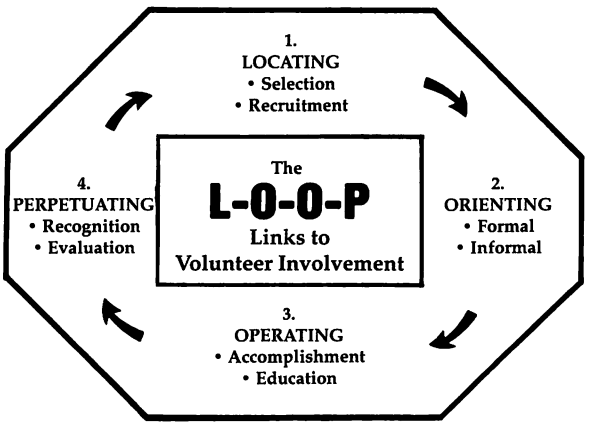

Figure 1
The L-O-O-P Volunteer Management Model

time commitment required before agreeing to the assignment.

Stage 2: Orienting volunteers.

Orientation usually occurs after the volunteer accepts or is in the process of accepting the job. During the orientation stage, the volunteer comes to more clearly understand his or her job and how it fits into the total organization. The manager should go over the steps outlined in the job aid with the volunteer. As they proceed through the steps, the manager should point out what resources are available and where to go for assistance.

This is an important process since it helps the volunteer understand how to use the job aid and provides an opportunity to ask questions. Remember: volunteers repeatedly complain what they don't understand what is expected of them. Use the orientation stage to solve this problem.

Stage 3: Operating with volunteers.

During this stage, two factors play an important role in the satisfaction level of the volunteer. The first factor is whether the volunteer has had the opportunity to grow through acquiring new skills and knowledge. The second factor is whether the volunteer can see the impact or accomplishments resulting from the time and energy expended.

The use of a job aid allows volunteers to continually check off their progress towards completion of the job. They can measure what they have done, what they are doing now and what they have left to do. As the job changes, the job aid can easily be changed. Or, after using the job aid, the volunteer may have suggestions for refinements. In fact, this input from volunteers should be standard operating procedure and is a way to show the volunteers that the manager recognizes the value of their input.

Stage 4: Perpetuating the involvement.

Perpetuating the involvement of volunteers includes both evaluation and recognition. Using the job aid, a careful comparison between the volunteer's performance and the expected performance can be made. Accurate evaluation allows for positive growth and directed volunteer development. Volunteer recognition is critical to volunteer satisfaction. Time, attention and a sincere respect of the volunteer are the most meaningful forms of recognition.

HOW ARE JOB AIDS FORMATTED?

The format used depends on the type of performance desired. Job aids can be separated into two categories: deductive and nondeductive (Porta, 1979). Nondeductive job aids are characterized by content that is procedural in nature. The user merely follows a sequence of detailed instructions to complete a task.

On the other hand, deductive job aids require the exercise of logical thought by the user. In a purely deductive aid, the user cannot rely on a detailed set of instructions to lead him or her through the task. Successful performance is achieved only when the user selects those portions that apply to the task at hand and relates that information to perform the task. Using this rationale, Table I illustrates how the various job aid formats are classified.

Table I
Formats For Job Aids

Nondeductive	Deductive
Step-by-Step Directions	Flowchart
With Illustrations	Decision Table
Without Illustrations	Worksheet
Checklist	
Form	
Procedure Table	

Step-by-Step Directions—numbered sequential list of all the steps or actions involved to complete a particular task. They are used for tasks that have no or only a few simple decisions to make. Illustrations are often added to text for increased clarity.

Checklist—similar to step-by-step directions containing a sequential listing of steps, but also including a place to check off each step as completed. Checklists often contain information on when (month, day) steps need to be done. The checklist format is often used to help volunteers plan, conduct and evaluate events and activities.

Form—provides blanks to ensure that all data/information is completed and properly formatted.

Procedure Table—similar to the step-by-step directions, but presented in a table format.

Flowchart—a simple sequence of instructions arranged in a logical graphic order that leads directly to the correct decision. Flowcharts are often laid out in a tree format with decision points which result in branching to subtasks. The user's response to the first statement leads to the next relevant statement and so on until the task is completed.

Decision Table—a table format with IF, THEN and AND columns used to make decisions based on multiple contingencies. Branching should be fairly simple.

Worksheet—similar to a form with blanks to collect data or information, but the worksheet also requires the user to perform some operation on that data or information.

DESIGNING JOB AIDS

Designing good job aids will take some practice. Basic starting steps are:

1. *Identify Target Audience*

   The first step is to take a close look at the volunteers who will be using the job aid. Remember, volunteers enter your organization with varied educational backgrounds and experience. These volunteers are in a variety of different jobs with each job requiring a unique set of skills and expertise. The needs of the volunteer who answers the phone are quite different from one who is chairing a committee. Be sure to identify the needs, skills and knowledge for those volunteers who will be doing the specific job for which you are designing the job aid.

2. *Conduct Task Analysis*

   Next a task analysis should be done to determine the scope of the job and the step or decisions involved in its performance. Include all essential information including tools and equipment needed. The task analysis is the most time-consuming part of the process and the most important. The task analysis provides the essential information that must be included in the job aid itself.

3. *Select the Job Aid Format*

   The same format is not appropriate for all jobs. The type of performance required can be used as a clue to determine the most effective format. Table II provides some general guidelines for determining which job aid format to use (adapted from Line-

Table II

Decision Table for Selecting Job Aid Format

IF	THEN
THE TASK INVOLVES:	CONSIDER:
Action sequences	Step-by-Step directions Checklist Flowchart Procedure table
Decision making	Flowchart Decision table
Calculations/ documentation	Checklist Form Worksheet
Mixture of step-by-step procedures and decisions	A combination of step-by-step list with embedded decision table

berry & Bullock, 1980). A field test of different formats with volunteers may help to determine which is the easiest to use and the most effective.

4. *Develop Job Aid*

In developing the job aid itself, the following things should be kept in mind. The job aid should:

- use language that the volunteers can understand.
- meet the needs of the volunteers.
- be tailored for use in the work situation.
- present only "essential" information needed to perform the job.
- be easy to use.

5. *Train Volunteer*

For maximum results, the volunteers must be trained in using the aid. Training should include an overview of the job, and instructions on when, where and how to use the job aid. Training also ensures that the job aid will be compact and simple to use.

6. *Evaluate*

Be sure to evaluate the efficiency and effectiveness of the job aid. Are the volunteers using the job aid? What is the quality of their performance? Do changes need to be made?

SUMMARY

Developing a system for implementing a job aid program within your organization may go a long way to enhancing volunteer job satisfaction and increasing productivity. Job aids have proven to be valuable tools at all four stages in the volunteer management process. They can be useful in recruiting and orienting the volunteer about what the job entails. They serve as tools to help the volunteer perform the job at an acceptable level. And finally, they serve as an excellent way to evaluate the volunteer's performance.

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Youth as Volunteer Teachers: A Case Study

Marilyn Smith, Michael J. Havercamp, Randol W. Waters

THE PROBLEM

National data related to youth at risk problem behaviors show Nevada to be among the highest for school dropouts, substance abuse, and teen pregnancy, While many different programs have been created to deal with the problems, researchers identify self-esteem as an important variable (Demo, Small & Williams, 1987) when dealing with youth at risk. Self-esteem is important because it is an individual's view of his/her abilities to succeed. Positive feelings about oneself appear to increase successful performance (Bandura, 1982). For example, youth with high self-esteem are less vulnerable to peer pressure related to drinking, taking drugs, or engaging in sex (Glenn & Nelson, 1987). Success in school is also affected by self-esteem. Coopersmith's research (1987) indicates that children with high self-esteem perform better in their school work than children with lower levels of self-esteem.

This article describes an innovative educational program designed to increase self-esteem by involving adolescent youth as volunteer teachers in public schools. The concept for the program was based on peer educator research (Maheady, 1985). The project, called "Volunteer Teacher Program," allows youth an opportunity to experience success as a volunteer and to receive the admiration and respect of younger age students. In the classroom, the youth teachers were the center of attention and a positive role model for children in kindergarten through sixth grades. The older youth teaching younger youth approach was used as a format for a safe, positive, successful volunteer experience resulting in an increase in self-esteem for the volunteer teachers.

Seventy-six youth (ages 12 to 17) were recruited as volunteer teachers. They taught a series of one hour presentations to 3,500 students in a Nevada mining community of 10,000 school-age children.

VOLUNTEER TEACHER PROGRAM

This description of the Volunteer Teacher Program will include these elements: a) educational presentations, b) pilot testing, c) recruitment and training, d) teaching assignments, and e) evaluation.

Educational Presentations

Nevada Cooperative Extension Youth Development and Education Specialists (Extension Specialists) developed a series of one hour presentations for kindergarten through sixth grade children. Topics included: a) where do we get our food, b) water conservation, c) self-esteem, d) make up your mind about alcohol, e) trees in conservation, and f) dress for success.

Topics for the Volunteer Teacher Program were determined based on the local school district's curriculum. Selection of specific educational presentations were made after receiving requests from individual teachers. The Extension Specialists designed the presentations to include a variety of teaching methods; included were minilectures, slides, role playing, and puppets.

Pilot Testing

Each educational presentation was pilot tested at a local school by the volunteer teachers. The principal of the pilot school evaluated the presentations for content and subsequently recommended to the curriculum development specialist at the local school district that the Volunteer Teacher Program be implemented at other schools.

Prior to testing, the Extension Specialist contacted the curriculum development specialist who reviewed the program

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material for content validity. Based upon this review and the positive recommendation from the pilot school principal, the Volunteer Teacher Program was implemented.

Recruitment and Training

Youth organizations, including 4-H, scouts and Native American youth organizations, agreed to notify their members about the Volunteer Teacher Program. Youth interested in this program agreed to attend a one day training session, rehearse an educational presentation (generally with parents) and conduct a presentation at least once during the year.

The training session included topics such as teaching methods, how to dress, and presentation strategies. During this training, volunteers observed an experienced person conducting a presentation. In addition to the training session, volunteers practiced their presentations at home with family members or with adult leaders from youth organizations with which they are involved. These practice sessions helped to insure consistency in content and provided for quality presentations. Practice sessions also helped to build confidence among the volunteer teachers. Finally, to honor their commitment, volunteers agreed to specific teaching assignments at assigned schools.

Teaching Assignments

Volunteers generated teaching opportunities by contacting "favorite" teachers. They also made use of contacts (leads) from younger siblings' classroom teachers, church youth-group leaders, and other youth organization leaders. Besides these valuable leads, Extension Specialists identified teaching opportunities for the volunteer teachers by sending a sign-up form to each elementary classroom teacher in the school district. In turn, teachers returned the completed sign-up form to the County Extension Office to schedule a presentation by a volunteer teacher. Extension staff matched these requests with appropriate volunteer teachers.

Evaluation

The elements of evaluation for the Volunteer Teacher Program described here are: a) analysis of data, b) results, c) participant comments, and d) program implementation.

Analysis of Data. A goal of this program was to measure the increase in self-esteem of the volunteer teachers. The study of self-esteem employed a variation of Campbell and Stanley's (1966, p. 47) nonequivalent control group design. The volunteer teachers' pretest and posttest self-esteem scores were compared using a paired t-test. Analysis of co-variates was used to test differences between self-esteem scores of the volunteers who had taught and a similar group of 4-H members who had not participated in the program using each group's scores on the lie scale as co-variates during the analysis.

The Coopersmith Self-Esteem Inventory (1987) consists of four sub-scales which propose to measure four independent aspects of self-esteem and one separate scale which the authors identify as a "lie scale." The lie scale is provided as a measure of one's truthfulness in completing the instrument. Since the Coopersmith Inventory admittedly has high face validity, early research in its development found that some respondents tended to score higher than would be expected because of an apparent "defensiveness" in their character. The lie scale consists of eight statements to which (theoretically) no one should respond affirmatively. (Examples: "I always do the right thing." "I never worry about anything.") These items were distributed throughout the instrument. The lie scale was used as a moderating variable in our analysis of self-esteem in order to control for its effect on subscale scores. By holding lie scale scores constant, one may in essence correct scores which may be "artificially" high.

The four sub-scales of self-esteem developed in the Coopersmith instrument are: "Social Self/Peers," "Home/Parents," "School/Academic," and "General/Self." As implied in each sub-scale name, self-esteem is measured in numerous ways. Items in each sub-scale relate to how the respondents view themselves with regard to social interaction with peers, homelife and parents, school and academic surroundings, and their general self-perception.

Table I

Self-Esteem Scores of Volunteer Teachers Before and After Teaching a Class

Sub-scale	Before Teaching	After Teaching	t
1. General/Self	12.3	14.2	3.64**
2. Home/Parents	4.6	5.4	2.48*
3. School/Academic	5.5	5.7	.58

*p<.05
**p<.01

The Coopersmith Self-Esteem Inventory was administered as a pretest to 76 volunteer teachers (treatment group) during the Volunteer Teacher Program training. A posttest was administered to the treatment group and a comparison group (n=54) six months following the training session. A pretest was not administered to the comparison group. The comparison group was composed of a demographically similar group of youth organization members who had not participated in the Volunteer Teacher Program (*e.g.*, age, sex, ethnicity, locality).

Results. The treatment group showed a significant increase in self-esteem as measured by the Coopersmith Self-Esteem Inventory on both the general/self and home/parents sub-scales (Table I). Although not significant at the .05 alpha level, the school/academic sub-scale scores also increased slightly. The social self/peer sub-scale was dropped from the analysis due to low reliability for this sample. (Note: Prior to analysis, all sub-scales were reduced to their most internally consistent form using Chronbach's alpha coefficient. Any sub-scale having fewer than five items or an alpha coefficient lower than .60 was not used in the final analysis).

Significant differences were found in the self-esteem posttest scores between the treatment groups and the comparison group when controlling for the effect of lie scale scores (Table II). Statistically significant differences were seen in the general/self and the school/academic sub-scales. The home/parents' sub-scale showed no statistical difference between the two groups. When taking a closer look at the differences in scores between the two groups, volunteer teachers scored higher in all categories. Again, the self/peers sub-scale was not used due to low reliability in the final analysis.

The results of the Volunteer Teacher Program were dramatic. Volunteer teachers taught 3,523 youth (ages 5 to 12), about

Table II

Self-Esteem Scores of Volunteer Teachers and a Similar Group of Youth Club Members After Controlling for the Effects of Scores on the Lie Scale

Sub-scale	Volunteer Teachers	Comparison Group	t
1. General/Self	14.18	12.54	5.00*
2. Home/Parents	5.36	4.91	1.51
3. School/Academic	5.71	4.70	5.66*

*p<.05

one-third of the school age population in the area. In addition, classroom teachers who observed the youth volunteers rated ninety percent of the presentations as excellent.

Participants' Comments. Many people closest to the volunteer teachers have noticed big changes since the teens began training as educators. The mother of one of the participants said that ". . . this (Volunteer Teacher Program) is the best program my son has ever been involved in. I can see a big improvement in his feelings of self-esteem and importance."

One of the volunteers returned to a former teacher's elementary classroom to teach. The elementary teacher had an opportunity to observe the growth of her former student as a result of involvement in the Volunteer Teacher Program. The teacher said, "Her self-esteem is excellent. Lori was a real quiet girl, and now she's really come out." Lori's mother credits her daughter's poise and speaking ability to the program, and believes that being able to get up in front of people will prove a future asset, particularly if she chooses teaching as a career.

Responses from the teachers and students participating in the Volunteer Teacher Program have been positive as well. Students in one classroom that received the program on alcohol prevention wrote to the volunteer teacher stating that they had learned how to say "no" to their friends who wanted them to drink. The classroom teacher stated, ". . . the lesson on the dangers of alcohol abuse is an excellent introduction to a longer course given later by the Sheriff's Department."

"They (the younger students) learn so quickly from a peer," said one elementary school principal. "Because of the warmth generated between them and the teachers, a lot of learning is gained." Further, the principal added, teen teachers are a tremendous help in alleviating teacher shortage in a school with a student enrollment increase of 200 percent in two years.

Besides these valuable comments, the principal of one elementary school commented that ". . . the staff and students look forward to having your volunteer teachers at Mountain View Elementary. . . . All of the students' (presentations) have been organized, pleasant and (students have been) well versed in their topic. Topics for the different lessons are excellent—covering a varied range of subjects dealing with life and nature."

Program Implications. Two significant implications can be seen as a result of this successful Volunteer Teacher Program. A similar Volunteer Teacher Program was offered to specific high risk youth in early 1990. These high risk youth served as "High Risk Educators" in an adaptation of the Volunteer Teacher Program. A second implication of the program was the participation of the volunteer teachers in outreach programs especially with senior citizens.

High Risk Educators. The High Risk Educators is a group of eight potential high school dropouts. The Extension Specialist worked with a local high school counselor and principal to identify freshman and sophomore high school students who are potential dropouts based on specific criteria. The identified students were encouraged to apply for the program by the high school counselor. They were offered $100 as incentive to participate in the program. Job Opportunities in Nevada (JOIN), a federally funded work program, provided the incentive grants.

To participate in this program and receive the incentive grant, these high risk educators attended a training program similar to the one discussed in this article. However, several adaptations were made for this audience. First, a teen coach was included as one of the trainers for the high risk educators. This high school senior was selected for her enthusiasm, leadership abilities, and excellent communication skills. She was one of the original pilot testers for the Volunteer Teacher Program. The teen coach served as a role model and motivator for the high risk teens.

The training program was further adapted for this high risk group by working in small groups with intensive adult/teen coach support. The coaching sessions were conducted at the training site instead of home with parents. Teach-

ing activities included self-esteem building activities and discussions about future careers, activities specifically designed for the audience. The training program and coaching sessions were conducted in two-hour sessions after school. The high risk educators attended fourteen hours of training/coaching before they went into the classroom to teach.

After completing the fourteen hours of training/coaching sessions, the high risk educators conducted latchkey safety presentations for students in third grade classes. The high risk teens taught in teams of two. Each team was given a portion of the two-hour presentation. The amount of time individuals taught was based on their ability and enthusiasm to teach. Each high risk teen participated in the presentation and role playing in the classroom with the teen coach on the sidelines for guidance. The latchkey skills they taught included: how to be safe when alone, what to do to avoid problems when walking home from school, and how to answer the phone and door when home alone.

The high risk educators were also involved in the impact evaluation to show the knowledge gain of their students. The volunteer teachers administered a pretest and posttest on latchkey skills to measure their students' knowledge gain. They also conducted a survey of parents to see if the latchkey concepts were implemented at home. The high risk educators presented these results to the principals of the high school and elementary school at a final presentation. Preparation of this impact report and presentation took another six hours of the high risk educators' time after school.

The results of this pilot project are encouraging. The eight high risk teens showed an increase in self-esteem using the Coopersmith Inventory in a pretest-posttest design. Seven of the educators showed an increase in school self-esteem. Three showed an increase in social self-esteem. Comparisons of grade point averages and attendance records before and after the program show trends toward improvement. Initial indicators from teachers, parents, counselors, and self-evaluation indicate observable changes in these potential dropouts' attitude toward school. These students will be tracked through graduation from high school as a final measure of the project's success.

The results of measuring the knowledge gain of the third grade students taught by the high risk educators has been completed. Comparisons of the pretest and postest survey of latchkey skills showed a forty-five percent increase in knowledge gain. There was a significant decrease in the most missed questions comparing pretest to postest. The results of the parent survey showed sixty percent of the children discussed latchkey skills with their parents after the program. These results indicate the effectiveness of the high risk teens as teachers in this win-win situation. The high risk teens showed increases in self-esteem, especially toward school. The elementary students increased their knowledge about latchkey skills.

Outreach Programs. A second implication of the original program is seen as many of the volunteer teachers became involved as volunteers in other outreach programs in the community. For example, a 14-year-old volunteer teaches water conservation at a Senior Citizen's Center. The volunteer teacher said that he likes the interaction with the elderly because he learns from them. It's evident that the learning goes both ways. The seniors are interested in the volunteer teacher's emphasis on the environment as well.

"What's so wonderful about this program is that the seniors think the young people are real important," reports the center director. "The students (volunteer teachers) get immediate approval and, by the same token, they get a sense of continuity from the seniors in a very transient community." Where interaction with family role models is not always possible, these volunteer teachers got a similar kind of support as a result of their experience in teaching seniors at a Senior Citizen's Center.

CONCLUSIONS

Because of the Volunteer Teacher Program, adolescent youth felt better about themselves after having a positive, successful volunteer experience. The 76

teenagers in this program showed a statistically significant increase in self-esteem as measured by the Coopersmith Inventory. Equally important, they were able to teach a series of one-hour presentations to 3,500 elementary age students in this rapidly growing community of 10,000 school-aged children.

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Letters

Dear Anne:

Congratulations to you and to Nancy Macduff, Guest Editor of the Fall 1989 edition of *The Journal of Volunteer Administration*. It is a great issue! Thank you for timely, well-chosen material . . . what a good way to "kick-start" the nineties.

Thank you for your consideration in this regard, and once again "great work"!

Very truly yours,
Terri Adair, Manager
Volunteer Resources
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Calgary, Alberta, Canada

Volunteerism and Community Building in Continuing Care Retirement Communities

F. Ellen Netting, Ph.D., ACSW

INTRODUCTION

Continuing care retirement communities (CCRCs) are campuses that provide a continuum of health, housing and social services for older residents. Independent living units, personal care or assisted living units, and various levels of long-term health care provision are typically available on campus. In-home services may be developed as residents age in place and as needs arise. CCRCs offer a

> contract that is intended to remain in effect for the balance of the resident's lifetime. Minimally, this contract guarantees shelter and access to various health care services. A lump-sum entrance fee, paid upon moving to the community, and monthly payments thereafter, are typically required to purchase a continuing care contract (AAHA and Ernst & Whinney, 1987:7).

Although numerous contract arrangements are available throughout the over 1,100 communities in the United States, three types of contracts have been identified by the American Association of Homes for the Aged (1987). They are:

- Life Care or All-Inclusive—providing nursing care for little additional cost;
- Modified or Continuing Care—providing long-term nursing care for a limited period, at which time the cost will increase; and
- Fee-for-Service—a pay-as-you-go option.

As the housing and health care industries change, new plans and contract modifications are developing.

CCRCs, because of their campus-like setting, provide the potential for a variety of interactions across multiple community functions. The commitments that residents make to these communities, reflected in their life and continuing care contracts and the accompanying entrance fees, underscore the expectations that they bring. CCRCs may be perceived as final residences in which active elders spin individualized scenarios among their peers. Within these age-segregated communities occur the losses of age, the joys of living, and the uncertainties that arise for an aging cohort. Each individual will react differently to these changes and events, making CCRCs arenas in which many interactional patterns develop.

A typical CCRC resident is a single female, either widowed, divorced or never married. Residents average 81 years of age, and as expected, older CCRCs typically house residents with a little higher average age than do newer facilities (AAHA and Ernst & Whinney, 1987). Residents come from middle- to upper-level socio-economic groups and are typically well educated. Therefore, CCRCs usually attract a high proportion of professional persons who have had active roles in their own communities prior to entering the CCRC. In addition, a recent study of 284 religiously affiliated CCRCs found that 93% used volunteers (Netting, 1989).

This article examines the CCRC as an arena in which persons are engaged in an active community life. The author focuses on those voluntary roles and relationships that develop both formally and informally within this campus setting. Based on exploratory interviews with persons

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responsible for volunteer coordination and older volunteers within four Arizona-based CCRCs, the author develops a conceptual framework to use in addressing volunteerism in CCRCs and also identifies issues warranting further programmatic and research attention.

VOLUNTEERISM

Volunteerism has been defined in numerous ways. Typically, a volunteer is one who performs a task without the expectation of financial compensation (Salmon, 1979). Volunteer activities are usually structured in some way so that coordination and accountability are incorporated into the program, providing an auspice under which these activities are performed. These programs differ markedly in their degree of formalization, but the concept is usually tied to some presumption of structure.

Volunteerism carried to its extreme could encompass those activities that are performed voluntarily, without the benefit of structural oversight. Patterson (1987) discusses the concept of the natural helper to describe those informal helping exchanges that occur between neighbors, friends and families. The natural helper is not really a volunteer because s/he does not function under an "official organizational sanction as the volunteer does" (Patterson & Brennan, 1983, p. 57). Recruitment, coordination, supervision, and recognition are, therefore, not formalized. This grassroots helping occurs within local communities on a regular and informal basis, but is rarely captured in the statistics compiled by formal volunteer programs.

The boundary between formal volunteerism and informal, natural helping is often permeable, however. In 1989 the Robert Wood Johnson Foundation published its special report on interfaith volunteer caregivers. The foundation's report begins by stating: "Family, friends, and neighbors—people who are nonprofessionals—play a vital role in caring for disabled people of all ages" (p. 3). Its grants were designed to "strengthen that role, by seeing whether interfaith coalitions could be formed successfully for this purpose" (p. 3). Technically, RWJ was seeking to strengthen and formalize to some degree those natural helping relationships that occur within local committees across religious groups.

This strengthening of existing informal patterns is evidenced in the development of many volunteer programs. As needs arise, a volunteer program may be established that builds on the spirit of natural helping inherent in local communities. Therefore, one could view this process as a continuum along which natural helping relationships may be formalized into recognizable volunteer programs. This does not mean that all natural helping can be formalized or that natural helpers are likely candidates for volunteerism. What it does mean is that volunteer programs may build on patterns already established through the actions of natural helpers.

Chambré (1987) tells us that volunteerism in old age is better understood through the perspective of continuity theory rather than activity theory. Persons who have engaged in volunteer acts throughout their lives are more likely to continue to assume these roles than those who have not previously found these roles meaningful. Similarly, Patterson and Brennan (1983) emphasize the importance of "encouraging a good fit between natural helper roles and the values, characteristics, and helping styles of the older people who may assume that role" (p. 63). Because values, characteristics and styles are part of one's development as a person, it would hold that persons who have found natural helping activities meaningful during their lifetimes may continue to engage in these roles. Some natural helpers may enjoy the recognition of becoming volunteers, whereas others may find that meaning is lost as formalization occurs.

The literature on volunteerism contains discussions of programs that involve older volunteers with peers (Netting & Hinds, 1984; Ozawa & Morrow-Howell, 1988; Shine & Steitz, 1989); focus on older volunteers who contribute their time across age groups and tasks (Chambré, 1987; Morrow-Howell & Mui, 1989); and view older persons as the recipients of volunteer, caregiving, and natural helping services provided by all age groups (Netting & Kennedy, 1985; Netting & Thibault, 1986).

In the continuing care retirement community, all these types of exchanges occur. There are natural helpers as well as volunteers. There are older volunteers serving their peers and outside community volunteers of all ages performing varied roles. There are intergenerational exchanges whereby residents of the CCRC provide volunteer services beyond campus boundaries.

METHODS

Exploratory interviews were conducted with persons responsible for the coordination of volunteers and 25 volunteers at four CCRCs located in Arizona. The intent of these interviews was to develop a conceptual framework and an understanding of relevant issues so that programmatic and research directions could be identified. Therefore, a semi-structured interview schedule was used and respondents were asked to share any insights triggered by the questions asked. Forms used to collect statistics on volunteers, activity calendars illustrating special volunteer-related events, volunteer handbooks, and documents describing the CCRC were collected.

CCRC #1, a nonprofit, and CCRC #2, a for-profit, are located within a retirement town. The nonprofit facility has been open for five years and has a waiting list. The for-profit opened in July, 1989, and is still taking in new residents. The majority of residents in both CCRCs come from the retirement town and therefore have close ties with the larger community and its recreational centers and activities for seniors.

CCRC #1 contains one high-rise building and garden duplexes covering 32 acres. A health care unit is connected to the independent living units and contains 100 beds. A new day health care center opened the previous year. Volunteers in the independent living units are coordinated by the residential services administrator. Health care volunteers are coordinated by the activity coordinator and day care volunteers are being recruited for the new program.

CCRC #2 consists of a large high-rise building with 320 independent living apartments. Currently 250 residents live there and approximately six new persons move in every day. Prior to its development, a separate nursing home located close by opened and is available to residents as needs arise. Volunteer coordination falls to the activity coordinator who is in the process of assessing resident interests as they move into the apartments. The activity coordinator and her assistant in the nursing home are responsible for volunteers there.

CCRC #3 is a nonprofit facility that has been open for ten years in an intergenerational community. Approximately 1,000 older residents live in either the 311 cottages or in the 120 units in the health care center. The volunteer coordinator serves as social services director and activity coordinator in the health care units. There is no staff person designated to coordinate volunteers in the independent living units, although the coordinator is very knowledgeable about the kinds of helping activities and projects that occur there.

CCRC #4 is a nonprofit facility that is four years old. Mixed single-level and low-rise buildings cover 20 acres. There are 180 independent living units, assisted living units scheduled for use after the first of the year, and 125 nursing units. CCRC #4 has an administrative staff person responsible for volunteers in the independent living units. The activity coordinator in the health care unit coordinates volunteers there.

All four CCRCs offer more than one type of resident contract, at least one of which is considered a life care plan. Residents in all four facilities pay entrance fees and have various contractual arrangements for care should they require health care services.

VOLUNTEER TYPES

In discussions with volunteer coordinators and their volunteers, four types of volunteers who perform various roles within CCRCs emerged. Chart I provides an overview.

Depending upon the CCRC, volunteer roles are more or less formalized. However, four types are identified in each community: resident natural helper, community natural helper, resident volunteer, and community volunteer.

Chart I

Volunteer Types

LOCATIONS	STRUCTURE: Informal	STRUCTURE: Formal
Resident (Campus)	A Resident Natural Helper	C Resident Volunteer
Community (Off Campus)	B Community Natural Helper	D Community Volunteer

Informal

A. Resident Natural Helper

Informal activity occurs through natural helping networks, often unknown to formalized volunteer programs. Technically, natural helpers are not defined as volunteers. Certainly their acts are voluntary, but they do not usually consider themselves to be volunteers. As discussed earlier, they are friends, neighbors, and even family members who serve as support systems and care providers.

An example of the permeable boundary between a resident natural helper and a resident volunteer was identified as the author visited one CCRC. Following a meeting of volunteer committee chairpeople, she was introduced to a resident who was slowly moving through the facility on a walker. The volunteer explained that this resident went to the nursing wing of the facility every day to speak to and to smile at health care residents. Hearing the conversation, the volunteer coordinator came over and asked why this resident was not reporting her hours—acknowledging that her contribution needed to be included in the hours recorded for volunteerism. The resident replied that she did not think of herself as a volunteer, that she performed this role because it was all she could do given her physical limitations. In this case, she was pleased to be recognized as a volunteer because she thought that she could no longer perform a volunteer role. This situation illustrated how a natural helping act was transformed into a volunteer role.

B. Community Natural Helper

Natural helpers come from the larger environment as well. These persons do not live on campus, but engage in helping behaviors with residents within the CCRC. It may be that this occurs more often if the resident moved from the larger community into the CCRC, as opposed to having arrived from out of the area. For example, two of the CCRCs visited were part of larger retirement communities in which the vast majority of residents had resided for a number of years. Well-established helping relationships and friendships continued as residents moved into the CCRCs. A sense of bondedness with the local environment had already occurred and the CCRC was more a place of residence within a larger community rather than a separate community unto itself.

Formal

C. Resident Volunteer

Resident volunteers are those persons who take pride in being a part of a formalized volunteer program. The degree of formalization will vary, depending on the CCRC. However, formalization may be indicated by the keeping of volunteer hours, official sign-in and sign-out sheets, the presence of some person (usually a staff person) who coordinates volunteer activities, volunteer handbook and orien-

tation materials, and some form of recognition activities during the year. It is interesting to note that only one coordinator tracked hours. In fact, another coordinator indicated that she was opposed to tracking hours because it set up a competitive system.

Coordination of volunteers may be assigned to several staff positions. In the four communities in which interviews were conducted, no two persons wore the same hats. In one community, the coordinator was the director of residential services. In another community, the activity coordinator served as volunteer coordinator. Volunteers in one facility were coordinated by the social worker, who was also temporarily serving as activity coordinator until a replacement could be found. In a fourth CCRC, the volunteer coordinator was the program director. All coordinators felt somewhat overextended, and it was obvious that volunteer coordination was only a small portion of all the tasks they had to perform.

Resident volunteers may report to various staff positions. In one CCRC, resident volunteers coordinated themselves. Although staff was available, if needed, residents identified needs and responded accordingly—organizing themselves to decide what needed to be done. It should be noted that this facility was the oldest of the four CCRCs and could reflect a deepening sense of community once campus residents bond over time.

The need for volunteer coordination may actually decrease in some cases as residents assume roles and responsibilities as community members. This was reflected in another CCRC that had been open for five years. The facility had begun with a full time volunteer coordinator and had gradually moved into a situation where coordination fell within the multifaceted job description of the residential coordinator. Volunteers at this CCRC were organized into a structured committee system and took a great deal of responsibility for overseeing their committees' tasks and responsibilities.

Resident volunteers perform numerous roles. On one campus, volunteers chaired at least 20 different committees. Typical volunteer roles included cataloging books in the library, preparing a campus newsletter, decorating the community for holidays and special events, organizing trips, developing entertainment activities, leading arts and crafts classes, and sorting mail into post office boxes in the lobby.

D. Community Volunteer

Community volunteers are those who come from the larger community to participate in formal volunteer programs at the CCRC. These volunteers are as diverse as the larger community itself. Coordinators reported that volunteers come from local schools, churches, voluntary associations, and civic groups. The seasonal nature of volunteer activities was often problematic when using community volunteers, given the natural ebb and flow of school schedules, winter visitors coming to and departing from the sun belt, and holidays attracting numerous visitors.

For the two CCRCs located in larger retirement communities, community volunteers often became resident volunteers. After several years of volunteering, they would decide to move into the CCRC. Interestingly enough, they had many friends and associates there already, making the move an easy and logical transition. Because of their location in a retirement town, they appeared to have fewer intergenerational exchanges in their community volunteer interactions.

THE CCRC AS A COMMUNITY

Five functions of a community have been defined in the literature (Warren, 1978): social participation, socialization, social control, production/distribution and consumption, and mutual aid. Social participation meets the needs of community members to feel a sense of belonging and to be a part of the activities in the community. Socialization occurs as one learns the norms and expectations within the community. Social control assures that these norms and expectations, as well as formal laws, are followed. Production, distribution and consumption refer to the economic interactions that occur in a market economy. Mutual aid refers to helping behaviors performed by community members and formal agencies designed to address health and human service needs.

CCRCs are very open systems within larger environments. Therefore, there is no reason to assume that they should perform all functions for their residents. What CCRCs do, however, is provide elements of each function defined above. As residents age in place and possibly become less active in the larger community, it is possible that CCRCs compensate by providing functions previously the domain of the larger community. Chart II lists examples of how these functions may be addressed in both formal and informal ways.

Social participation is probably the major function of the volunteer programs within these CCRCs. Circles of friends form naturally and informal entertaining occurs within the independent living units. On a formal basis, social participation is evidenced in the organized calendars of events developed by activity coordinators. Volunteers start films, set up classes, organize trips, host special events, and engage in a variety of other activities that bring people together. Participation is evidenced in the way in which volunteers describe their special holiday decorating and the pride with which they plan their annual craft sales. Over and over again, volunteers stress the companionship that these activities offer them.

Socialization activities are particularly important as new residents enter a CCRC. In the newly opened CCRC, the activity coordinator explained that numerous hours were going into the development of activities that would bring residents together in social settings. She stated, "Everyone wants to meet new people and get to know neighbors. We are constantly having socials, coffees and the like to stimulate interaction."

Again, this socialization function is a normal part of the day-to-day exchange occurring within any community. In a CCRC, small groups of neighbors will visit one another as they establish themselves in their new environment. As the community ages, certain socialization functions become institutionalized. Three of the CCRCs had established welcoming committees and the fourth was in the pro-

Chart II

Community Functions Performed Within CCRCs

		STRUCTURE	
		Informal	Formal
FUNCTIONS	Social Participation	Circles of friends entertaining	Organizing special events and trips
	Socialization	Visiting among new residents	Welcoming committee
	Social Control	Establishing peer supports	Participating on resident council
	Production/ Distribution/ Consumption	Picking up items at store for neighbor	Operating campus grocery store
	Mutual Aid	Visiting friends in health care units	Serving as ombudsperson or advocate

cess of doing so. The intent was to assist residents as they moved in and to provide a volunteer role for those persons who enjoyed this type of activity. In one CCRC, a table in the lobby was staffed by a member of the welcoming committee several hours a day so that visitors coming and going would be greeted by a resident volunteer. One volunteer explained how she has to apportion the days that volunteers serve in the coffee and conversation corner so that everyone has a chance to volunteer there. She stated, "We don't pretend to make money. The purpose is socialization."

At first glance, the *social control* function might appear to be more staff than volunteer related. After all, by its very nature, social control implies a policing function, assuring that community norms and regulations are not violated. However, residents talked openly about their expectations of how others should act within their communities. The social worker at one facility talked candidly about how residents are often concerned about peers who collect piles of newspapers and magazines and live in less than tidy conditions or how residents are often concerned about neighbors who become confused or disoriented.

Although natural helpers and volunteers often turn to staff to resolve these problems, social control is often a function of resident concern. Similarly, one volunteer coordinator explained that one of her biggest frustrations was dealing with volunteer complaints about another volunteer's inability to do things "right." Finding opportunities for volunteers who were failing or becoming more frail became difficult as other volunteers pressed for their not being allowed to perform certain roles.

Social control is formalized through mechanisms such as resident councils, in which resident input is considered in decision making. Interestingly enough, none of the volunteer coordinators considered resident councils part of their volunteer programs. One coordinator explained, "We do not consider resident council members as volunteers. They are part of the organizational governing structure." Another coordinator mused, "Now that I think about it, I guess our nonprofit board of directors are volunteers. I never really thought about that before." There seemed to be a distinct separation of the resident council role from the organized activities of the volunteer program.

In *production, distribution and consumption* activities, neighbors may assist one another by picking up needed items at the store or supermarket. These activities are often natural or spontaneous, friends helping friends. As residents age in place within the CCRC, however, it may become necessary to enhance access to production, distribution, and consumption activities. This was illustrated when the volunteer committee chair for a newly opened food mart within one of the high rises explained that "people can go to the grocery store for the first time in a long time, which gives them a sense of independence." The food mart was not established when this CCRC was designed because residents were able to do their own grocery shopping. As some residents became less able to perform this vital function for themselves, the facility accommodated to their needs. Volunteers now operate this food mart three days a week and plans are being made for expansion.

Similarly, CCRCs often add banking facilities, ice cream parlors, and card and gift shops as residents age in place. These production, distribution and consumption activities may be resident-operated as volunteers work to support their neighbors.

The function of providing *mutual aid* increases in importance as CCRCs mature. Natural helping networks develop as residents check on one another. Volunteers explained that when a resident is ill, neighbors notify management so health care staff can check on their friends. As residents age in the independent units, these activities naturally increase as needs emerge.

Volunteer coordinators repeatedly emphasized the fact that volunteer activity within the independent living units was largely separate from activities within the health care units. A pattern emerged in which the interaction between residents in the independent living units and the health care units was limited in the beginning but gradually changed as resident spouses and friends entered the health

care unit either on a temporary or permanent basis. Coordinators agreed that it was almost impossible to get independent unit residents to volunteer in the health care units when they first arrived. As the community aged, more interaction occurred, but there were some residents who had no interest in volunteering within the health care facility.

Mutual aid roles become more formalized as well. Advocacy roles may be institutionalized through the use of community volunteers who visit in the health care units. One volunteer coordinator explained how much she appreciated the volunteer advocacy role but added that management did not always understand this intent. Perceived as adversarial, these community volunteers were viewed with some uncertainty.

Just as four types of volunteers emerged within the CCRC, there appeared to be a natural developmental process occurring as each community matured. Just as individual residents had their own styles of natural helping or volunteering, which needed to be taken into account, the community as a whole appeared to have a natural and a planned component related to the five functions mentioned above.

IMPLICATIONS

A number of programmatic and research implications emerge from these exploratory interviews and from the insights shared by coordinators and volunteers alike.

Program

No two CCRCs are alike. If the continuity theory of aging informs our thinking (Chambré, 1987), we are quickly aware that the diversity of experiences residents bring to these communities will provide many different and unique variations. However, there are some patterns that may be worth programmatic consideration.

First, in newly developed CCRCs, volunteer coordinators suggest that assessment of resident interests prior to entry is very helpful. Some persons will want to maintain their community-based volunteer roles and will have little interest in volunteering within the CCRC. Respecting these resident/community volunteers and their continued contribution to the larger environment is important to the CCRC's public image. Still others will be natural helpers that are not interested in more formalized activities. Forcing these persons into more formalized roles may be problematic. Others will be seeking formal social participation roles. For this group, volunteer coordination may be necessary so that expectations are met. Identifying those people who expect to volunteer is helpful in facilitating socialization into the new community. A simple computerized program that sorts residents' interests may be a very worthwhile tool.

Second, as residents enter CCRCs, a full-time volunteer/activities coordinator may be warranted. This person will be busy planning social participation activities and may want to form a welcoming committee for new residents. Identifying a committee structure is often helpful as well. For example, if there is a library, a library committee may be important to develop. Similarly, if there is a gift shop, an auxiliary may be formed. The function of socialization may be enhanced by the social participation activities that clue residents into the norms inherent in the developing community.

Third, it appears that several separate volunteer programs may need to be established on the CCRC campus. Independent living unit residents may want to engage in certain activities that do not overlap with the activities relevant to the health care units. Similarly, as additional long-term care programs, such as assisted living and adult health care develop, some residents will feel comfortable with and others will not want to be a part of these volunteer efforts. Separate volunteer programs targeted to certain levels of care may therefore recruit different volunteer types. For example, health care programs may target community rather than resident volunteers.

Fourth, there may be a tendency for community groups to approach CCRCs from the perspective that these are "homes for the aged." Residents of CCRCs are just as likely to be engaged in community volunteer activities as are those persons coming into the CCRC. It is easy to forget that some residents will want to

remain active in the larger community and would be just as unlikely to volunteer within their apartment units as would many people who live in apartment complexes throughout the community.

Fifth, there are several issues that arise in coordinating CCRC volunteer programs. Given the uniqueness of each resident, a careful matching process has to occur between volunteer and activity. This takes time and requires oversight. Also, volunteer coordinators are often perplexed about how to deal with volunteers who can no longer perform certain tasks. Typically, they attempt to ease these volunteers into less demanding roles, hoping that the volunteer will be willing to accept these limitations. This is particularly difficult in a CCRC, where the resident presumably will remain for the rest of his/her life. Guidelines for redirecting voluntary efforts may need to be developed with the aid of the resident council.

Sixth, each CCRC appears to have a committee structure of some type. There were certain needs that arose within the community. At first the need may have been addressed by paid staff or an outside community volunteer. Soon, however, the need was recognized by residents and accepted as a legitimate task. Often residents would then organize themselves around a particular activity and work independently of staff. Therefore, staff could assist in the initiation stage but gradually withdraw from a coordination role.

Research

There are several areas that appear to warrant research in the area of CCRCs and volunteerism.

First, it appears that natural helping and volunteer activities occur frequently within CCRCs. But how do they develop? It may be that certain variables influence which volunteer types certain CCRCs attract. For example, in the two CCRCs located in retirement towns it was obvious that very formalized volunteer programs were expected by residents. In the other two CCRCs, volunteer programs were less structured internally but included more community volunteers of all ages. The type of environment in which a CCRC is located, resident expectations, resident characteristics (including former patterns of helping), religious affiliation, staff attitudes and expectations, and other variables may be predictors of what types of programs to provide within these communities.

Second, it appears that there may be a developmental process in which CCRCs emerge as communities. Socialization and social participation functions seem most important as new communities open, as residents get to know one another, and as bonding occurs. Mutual aid, social control, and production, distribution and consumption functions may be more important to community life as CCRCs mature. For example, as residents identify grievances and problems, the need for active resident councils that assist in decision making may develop. Similarly, production, distribution and consumption patterns may emerge within the campus as some residents engage in less community-wide exchange. Mutual aid becomes more a focus of both volunteer and natural helping activities as residents age in place.

Longitudinal studies that follow CCRC community development could provide insight into how the focus of volunteer programs may naturally change as resident needs shift. If such a developmental process actually does occur, management could plan appropriately, depending on the age of the CCRC, by being aware of alternative models to address these changing needs. Are there specific volunteer models that CCRC staff have developed? It appears that each CCRC is very unique but there are some patterns that may emerge. How do volunteer coordinators approach their tasks and can other CCRCs benefit from knowing their experiences?

Third, the interaction between health care units and independent units appears extremely important. Developmentally, it seems that new facilities see very little interaction, but as residents move back and forth between health care and independent living, their friends and neighbors join in this interactional process—visiting them and becoming more familiar with the health care unit. Residents of CCRCs tend to be planners who buy into continuing care with the assumption that they might eventually need some form of

health care. Intellectually, they know this and plan accordingly. Emotionally, it appears that many may not be ready to face the nursing units until they have to do so.

How residents assist in the decision making process regarding temporary and permanent placement decisions is worthy of investigation. Do resident councils assist in policy making regarding what constitutes a permanent transfer? Do community volunteers from ombudsperson programs and other advocacy groups become more involved in the health units and how are they perceived? Do residents, performing a social control function, actually pressure staff to get confused or ill residents out of the independent living units? Understanding the dynamics that occur in these communities may assist in establishing proactive policies to address these issues rather than waiting until each CCRC must come to grips with the implications of these considerations.

SUMMARY

In summary, CCRCs are arenas in which four types of natural helping and volunteerism occur. The CCRC may, therefore, be a microcosm of a community system, serving multiple functions in a campus setting. Volunteer program coordinators can benefit from the experiences of others, and research into helping patterns and the process of community building may provide insight as new CCRCs develop.

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ABSTRACT

This descriptive research study examined the perceived training needs and preferred methods of receiving training of 260 adult basic education (ABE) volunteers in the state of Nebraska. Volunteers were predominantly well-educated, older, and female. Respondents indicated their a) need for training in 20 separate areas related to ABE volunteering and b) preferred methods for receiving this training among 14 different methods. Overall perceptions of training need ranged from a medium to low level. The most frequently mentioned areas of training included aspects of a) instructional methods or materials and b) meeting the special needs of students. Individual or small group training methods of short/limited duration were preferred to larger ones. This study sought to address a void in the literature on the management of ABE volunteers training needs and preferred methods of receiving training. Results may be viewed as an initial step in the development of a conceptual framework for ABE volunteer training.

Training Needs of Adult Basic Education (ABE) Volunteers

Jay Rojewski

Adult literacy educators have been acutely aware of our society's illiteracy problem, but only recently has public attention been focused on it (Kitz, 1988; Merrill, 1988). In response to heightened awareness, a number of both public and private literacy training programs exist (Bockbrader, 1987; Brandt, 1986; Kitz, 1988; Merrill, 1988; United States Department of Education, 1988a, 1988b). Volunteerism has long been associated with adult education programs (Bockbrader, 1987). The use of volunteers is a long-standing and successful practice. One reason for an extensive use of volunteers has been limited funding for educational programs to reduce illiteracy, despite growing public awareness of the extent of the problem (Brandt, 1986).

Increasingly, volunteers provide a valuable resource for adult education programs (United States Department of Education, 1988c). In 1987, nearly 58,000 literacy volunteers served in the Department of Education's federally-funded, state-administered adult education program. Of the 57,867 active volunteers, 49.8% served primarily as tutors on a one-on-one basis and in small groups. The remaining 50.2% served in supportive roles, including the provision of child care, transportation, counseling, outreach and recruitment, and clerical help (Bockbrader, 1987; United States Department of Education, 1988c).

Nebraska's 26 Adult Basic Education (ABE) program sites utilized over 1,500 literacy volunteers during the 1986–87 program year. These volunteers served within a structured program first developed in 1981 (Bockbrader, 1987; United States Department of Education, 1988b). Nebraska's system of service delivery within the adult basic education network and its use of volunteers is, in many ways, a model program, nationally recognized for its strong volunteer program. Training is provided to volunteer leaders by the state ABE Volunteer Coordinator on topics such as volunteer and student recruitment, outreach activities, screening volunteers, placement, and record keeping (United States Department of Education, 1988b). Additionally, volunteers in Nebraska are required to receive from 12 to 18 hours of training and assistance (United States Department of Education, 1988d).

STATEMENT OF THE PROBLEM

A cursory review of the literature (*i.e.*, Educational Resources Information Center—ERIC—database from 1983 to pres-

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ent) revealed a number of articles and documents focused on the overall administration of adult basic education programs; however, no entries were found which specifically addressed the adult basic education volunteers' perceived needs for training or preferred methods of receiving such training. One reason for this lack of focus may be that "as a professional field, volunteer program management is less than 20 years old" (Ellis, 1985, p. 11). Because the use of volunteers is such an important component of a successful adult basic education program, empirical investigation must begin to focus on the perceptions of volunteers toward a) needs for training and b) types of training methods preferred.

One method of insuring that the management of volunteers within an adult basic education program, as well as the program itself, remains strong and viable is to provide ongoing support and training to volunteers. Nationwide, there is little information about the ongoing training needs of adult literacy volunteers. A needs assessment of ABE volunteer training needs and preferred methods of training is a first step in an effort to develop and maintain a training program for ABE volunteers.

Gear and Gable (1979) list a number of purposes for conducting an assessment of training needs, including:

1. Providing for involvement of many groups and allowing their representatives to express their views concerning goals and perceived needs;
2. Developing a data base for future educational decisions;
3. Pinpointing problems and defining verifiable goals;
4. Providing a basis for the allocations of limited resources to solve identified problems and needs; and
5. Providing a basis for program development and evaluation (p. 37).

PURPOSE OF THE STUDY

Nebraska ABE volunteer training needs and preferred methods of training were examined. Specific research objectives were:

1. To describe the perceived training needs of ABE volunteers in Nebraska.
2. To describe the types of training methods preferred by ABE volunteers.

METHODS

Instrument

A survey questionnaire was used to measure perceived training needs and preferred training modalities. Comparable forms of this questionnaire were previously used to examine training needs of two-year postsecondary vocational instructors (Charumanee, 1987) and health occupations administrators and instructors (Witmer, 1988). The questionnaire was divided into three main sections: a) demographic information, b) training needs, and c) preferred training methods. Demographic information such as gender, age, educational background, employment status, number of hours worked per week, length of service in the ABE program, and number of hours volunteered per week were requested. A five-point Likert scale was used (1 = No Need through 5 = Very High Need) to record volunteers' training needs and preferred methods of receiving training. Respondents were asked to rate the degree of need for training in 20 distinct training areas and to rate their preferences among 14 different training methods.

Procedure

The study was conducted from October through December, 1988. A listing of the 26 Nebraska's ABE site supervisors and their locations was obtained from the Nebraska Department of Education, Adult and Community Education Division. An initial letter, explaining the study and requesting participation, was mailed to all 26 supervisors. A telephone follow-up was made one week after the mailing. Twenty-four ABE site supervisors agreed to participate in the study. Two supervisors cited a lack of volunteers as the reason for not participating. Supervisors were asked to estimate the number of volunteers in their programs. These estimates were recorded and used to prepare an appropriate number of surveys.

Surveys were mailed to site supervisors during the latter part of October. Instructions for administration of the survey and a time frame for completion were included. Supervisors were asked to administer

the surveys for several reasons. Limited resources did not allow for the mailing of surveys to each volunteer. Mailing surveys to each site supervisor was a feasible alternative. ABE site supervisors had access to and could quickly identify program volunteers. They were in a favorable position to ask volunteers for their participation, hence the probability of a large response rate was enhanced.

A three-week time frame was established for survey administration. A written reminder was mailed to each site several days prior to the deadline. A telephone follow-up was made to seven supervisors not responding to the written reminder. Surveys from 20 ABE sites were included in the data analysis. Individual reports were tabulated and provided to those supervisors requesting such information.

RESULTS

Demographic Information

The subjects were 260 volunteers active in Nebraska's state-administered adult basic education (ABE) program. The sample represents 47.58% of all active ABE instructional volunteers in Nebraska during the established time frame, a three-week period in October and November, 1988.The sample was predominantly female. Females comprised 80% of the sample (n = 208) while 20% were male (n = 52). Ages of participants ranged considerably; however, the majority (n = 157, 59.1%) were 51 years of age or older. Respondents tended to be well-educated, as 83.1% had received credit at the college level. Over half of the participants (n = 151, 57.1%) earned the bachelor's degree, while 38.2% experienced some graduate level education. A total of 107 volunteers (40.4%) were employed. Fifty-eight percent of those employed worked an average of 40 hours per week or more (n = 102, average number of hours = 32.02).

Volunteers' length of service in the ABE program was examined. Almost three-fourths of respondents (71.3%) had volunteered for two years or less. The most frequent response to length of involvement was three months or less, reported by 59 (22.3%) volunteers. Respondents reported volunteering from 1 to 16 hours per week (average = 3.50 hours per week, standard deviation = 2.50 hours). Half of the respondents (52.1%) volunteered three hours or less per week. The most frequent response, indicated by 65 (24.5%) of the volunteers, was two hours per week. An overwhelming majority (92.8%) planned to continue volunteering their services to the ABE program.

Training Needs

Respondents were asked to indicate the individual(s) or group(s) whose opinion would be most influential on self-development as an ABE volunteer. The most frequent responses were a) volunteers themselves (n = 159), b) ABE students (n = 95), and c) ABE site supervisors (n = 59).

Table I contains the rank order of training need statements. In general a low to medium level of need for training exists: group means for the item statements range from 2.527 (low need) to 3.451 (medium need). Areas of highest need include the general topics of special needs students, learning styles, and teaching/learning techniques. Three items, not shown in Table I, provided respondents with the opportunity to include additional information. English as a Second Language (ESL) was identified as an additional training need (mean = 3.842, standard deviation = 1.07). ESL was not included in the table due to a limited number of responses (n = 19).

Preferred Training Methods

Preferred methods of receiving training are listed in Table II. Group mean scores ranged from 2.009 (low preference to 3.461 (medium preference). Most preferred training methods involved short informational activities. Two questionnaire items, not shown in Table II, provided respondents with an opportunity to include other training methods; however, no additional methods were listed.

One-third of all participants (n = 97) made written comments on the survey. Training was most frequently requested in areas related to teaching techniques/methods and teaching materials (n = 22). Information on teaching English as a Second Language and the cultural differences among students was the second most frequently requested area (n = 19). The third

Table I

Rank Order of Training Needs as Perceived by ABE Volunteers

Rank	Item Statement	Mean ($\bar{X}$)	Standard Deviation (SD)
1	Designing ways to help teach students with diverse learning styles	3.451	1.07
2	Understanding students and planning to meet their diverse needs: special needs students	3.433	1.04
3	Using a variety of instructional methods	3.310	1.05
4	Understanding how adults learn	3.296	1.02
5	Using appropriate technologies and materials in tutoring	3.273	1.02
6	Improving teaching or tutoring skills	3.269	1.02
7	Understanding how people learn: learning styles	3.249	1.03
8	Understanding students and planning to meet their diverse needs: adults preparing for the GED	3.220	1.14
9	Developing skills which will help students find a job	3.118	1.27
10	Updating on trends and issues in adult education	3.103	1.10
11	Improving communication skills	2.944	1.31
12	Designing effective evaluation procedures	2.930	1.14
13	Improving own basic knowledge and skills	2.860	1.13
14	Using micro-computers in teaching	2.842	1.46
15	Developing or improving the ability to develop teaching programs	2.835	1.21
16	Improving reading skills	2.777	1.07
17	Improving human relations with students	2.697	1.13
18	Developing leadership skills	2.696	1.10
19	Updates on legislative issues and mandates	2.564	1.22
20	Improving learning environment in the classroom	2.527	1.10

Scoring Key:
1 = Not At All, 2 = Low Need, 3 = Medium Need, 4 = High Need, 5 = Very High Need

highest response (n = 12) indicated no need and/or desire for training. Other comments included: a) brush up on own academic skills (*e.g.*, reading, algebra), b) meeting special needs of students, and c) use of computers.

DISCUSSION

Results of this study provide evaluative information concerning perceptions of training needs and methods of adult basic education volunteers. While no theoretical or conceptual hypotheses were tested, it is important that this type of information be disseminated to professionals in the field (both researcher and practitioner). Ellis (1985) contends "that information of the most elemental sort must first be uncovered before more sophisticated research designs can be explored" (p. 11). An identi-

Table II

Rank Order of Preferred Training Methods as Perceived by ABE Volunteers

Rank	Item Statement	Mean ($\bar{X}$)	Standard Deviation (SD)
1	Keep up-to-date through reading	3.461	1.05
2	Attend in-service training or short workshops in your area	3.404	1.19
3	Exchange observational visits, innovations, and ideas with other volunteers	3.303	1.12
4	Complete non-credit activities offered by others: 1–3 hour workshops	3.240	1.28
5	Complete courses offered by the university or colleges: mini-courses or workshops	3.150	1.24
6	Participate in volunteer-supervisor conferences	3.013	1.15
7	Observe other teachers and volunteers in your area	2.802	1.15
8	Complete courses offered by the university or colleges: taught in or near your home	2.779	1.36
9	Attend area conventions	2.606	1.28
10	Complete courses offered by the university or colleges: taught on university/college campus	2.254	1.21
11	Attend state conventions	2.233	1.20
12	Complete non-credit activities offered by others: 1–3 day workshops	2.227	1.15
13	Observe other teachers and volunteers in other parts of Nebraska	2.018	1.04
14	Attend national or regional conferences	2.009	1.18

Scoring Key:
1 = Not At All, 2 = Low Need, 3 = Medium Need, 4 = High Need, 5 = Very High Need

fied need for baseline information on ABE volunteer perceptions toward training was addressed. Results may be used to establish a foundation from which more sophisticated research designs can develop.

The focus of this study was on perceived needs and preferred methods of receiving training of adult basic education (ABE) volunteers in the state of Nebraska. While ABE volunteers did express needs for training in areas related to their volunteer activities, expressed levels of need were generally medium to low. Eight of the highest-rated areas included aspects of a) instructional methods and/or materials (*e.g.*, the best methods for teaching English as a Second Language) and b) ways to meet the special needs of students (*e.g.*, learning style and cultural differences). These needs were also reflected in written comments included by some volunteers. Training efforts not directed toward enhancing instructional activity with students rated low with ABE volunteers. The volunteers in this survey did not appear to be concerned with the "peripheral" issues of adult basic education (*i.e.*, legislation, leadership).

Preferred training methods involved individual or small group activities. Training methods of limited duration were preferred to longer, more structured ones. Least preferred training methods were those requiring a larger investment of time, involving longer periods of time, and conducted farther away from home.

Findings suggest that volunteers are more interested in training directly related to helping and working with students. Supervisors must keep this in mind as they plan for volunteer training activities. Training should center on the volunteer-student rather than on peripheral issues. Supervisors must also examine the methods used to provide training to volunteers. Preferences of ABE volunteers in terms of the size of the group (individual/small group versus large group), length of training, and proximity of training to home must be taken into consideration.

A conceptual framework for ABE volunteer trainers and supervisors would be helpful in predicting a) areas of needed training, and b) the most effective methods of providing this training to adult literacy volunteers. Replication of the current study in other geographic areas would aid in establishing a common ground for model development and comparison. Additional inquiry might determine the effectiveness of different training methodologies in relation to perceived degree of need and preference for type(s) of training offered. With this type of information obtained, the focus must ultimately shift to effective management practices for and administration of training and support for ABE volunteers.

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Gay Men's Health Crisis

Dorri Jacobs, Ed.D.

Gay Men's Health Crisis was created as a result of people caring for each other.

This nationally known, tax-exempt service agency came into existence in 1981, when six very concerned men held an informal meeting in New York City to discuss a new, unnamed illness threatening the gay community. Little was known about this disease. No other groups were yet addressing the problem. Gay Men's Health Crisis, Inc. (GMHC) was founded to fill an apparent gap in community health care. Its first task: to raise money for research.

Today, GMHC is a recognized leader in the AIDS health services field. True to the GMHC slogan, it is "first in the fight against AIDS" and a model for newer agencies in the country. GMHC also serves as an example of excellence for anyone whose main responsibilities include management.

The story of how this small, grass roots effort became a sizable, complex, and financially responsible operation is one of enormous growth and change.

CHANGING TO IMPROVE RESPONSE

Internal structure

As GMHC responded to the epidemic, organizational structure evolved. Systematic planning wasn't feasible. According to Bernard See, a banker and a member of the Board since 1986, "people were added piecemeal" as a particular need arose. "There was no master business plan," states Paul Carro, Director of Finance and Administration, and one of the most senior staff. He came on board in 1983 as a bookkeeper. Carisa Cunningham, Communication Associate, explains, "GMHC developed in a crisis environment. This produces very different decisions than would be made if we had more time."

"But our incredible growth sometimes produced inequities," admits See. To remedy them, he says, "This year we are reviewing job descriptions, trying to understand what people really do, and attempting to tie in their performance evaluations with compensation."

A new direction

As the number of AIDS cases multiplied, reassessment of direction seemed imperative. GMHC could not continue to meet what was clearly a rapidly increasing health emergency with the same resources. Which priorities should take precedence? What expenditures made the most sense?

In the beginning, $50,000 of an annual budget of $83,000 was earmarked for medical research and for studies on the psychological and social effects of AIDS. The GMHC decided a change was due. "Research seemed too costly a focus. We just couldn't afford it," says Carro.

The current mission has three components. The first component is to provide support services to people with AIDS (PWAs), people with AIDS-related Complex (ARC) and the individuals who love and care for them. The second component is to educate the general public, those at high risk for human immunodeficiency virus (HIV) infection, and health care professionals about AIDS. Finally, the third component is to act as an advocate for fair and effective AIDS public policy.

Leadership roles

Notes Carro, "The earliest Board of Directors included both community activists and traditional businessmen who participated directly in day-to-day operations. Members made policy decisions and also acted as providers of service."

Today the Board no longer actively deals with clients. Instead, it serves primarily in an advisory capacity.

Richard Failla, Justice of the New York State Supreme Court and a present Board

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member, states that people appointed to the Board represent the points of view considered vital to the organization and its decisions. The Board is composed of seventeen individuals from varied backgrounds, such as real estate, law, banking, investment, public relations, drug abuse programs, sex education resources, and the gay community. They meet as a group once a month with the Executive Director. Each member is assigned to at least one working committee. Anyone, whether GMHC staff, the Board, clients, or the Center for Disease Control personnel, may raise issues of policy. An appropriate committee will confer on the matter, calling on staff or outside experts if needed, and then report to the Board with recommendations. At this point, the Board may either vote or request further information.

"Our committees are very responsible for meeting deadlines," declares Failla. Time for discussion varies, with urgent matters sometimes requiring sessions on several consecutive nights. This was true last summer, when a formal statement to the press on GMHC's position on voluntary HIV testing was needed.

Increased caseload and personnel

GMHC presently handles 2,700 clients. Since its doors opened, 8,500 of the 22,600 people in New York City with AIDS have been treated here. Approximately 1,600 regular volunteers and 127 paid staff carry out the duties of several departments. These include Client Services, Legal Services, Education, Development, Public Policy, Communications, Finance and Administration, the Volunteer Office and the Ombudsman's Office.

Streamlining placement

Joseph Ripple, Volunteer Office Coordinator, describes the recruitment process: "We get about 2,000 calls a year from potential volunteers. To save time, screening comes later. Each applicant first attends an orientation to learn about GMHC and the available opportunities. This assists him or her in making a more informed decision about what to do." A nine-month commitment is expected, but the majority stay longer—from 12 to 18 months.

A waiting list isn't necessary, because everyone who comes can easily be placed. In addition, Ripple serves on a task force of fifty AIDS organizations in New York City which work together to give volunteers their choice of agencies. Community newspapers list vacancies for positions which are more difficult to fill.

Ripple proudly announces that he "can locate any volunteer in a moment." This is because GMHC's files on volunteers are computerized. A resource data bank indicates each person's service history and skills (selected from a list of 40 possible skills).

"There is very little existing literature on AIDS volunteers," notes Ripple. However, new data will soon be available, thanks to a three-year study by the City University of New York of 800 volunteers at GMHC, the only project site for the study. Funding comes from the National Institute of Mental Health.

Both the profile and responsibilities of volunteers have changed.

GMHC used to attract mostly men who volunteered because they personally knew someone with AIDS. Many in today's group don't know much about the disease and have little firsthand experience with PWAs. Where once volunteers were in their mid-thirties, now they range from 17 to 79 years; thirty-two percent are female, and only 57 percent are gay.

At the beginning, volunteers mainly became Buddies, helping PWAs with laundry, banking and routine chores. Others provided emotional support after the diagnosis.

Now only 25 percent of clients get Buddies, because the emphasis is on empowering people to take care of themselves for as long as they can. As more programs come into existence, volunteer jobs have expanded to 33 different positions. Among them are group therapist, masseur, AIDS prevention educator, public speaker, graphic designer, and copy editor. Some volunteers respond to approximately 5,000 Hotline calls each month, dispensing the latest information about AIDS to callers. Some provide administrative office support or participate in the policy phone tree. Those who practice law may elect to do *pro bono* work for the organization.

Physical expansion

As the organization grew, finding additional space became a priority. The search for larger quarters prompted GMHC to relocate several times. The agency recently purchased a building, renovated it, and moved in.

BECOMING FINANCIALLY SOUND

GMHC couldn't finance the move alone. Carefully monitored income and expenses, plus good negotiation, proved that the organization was able to handle two mortgages, together totalling $950,000. Both were paid in full, with interest, within two and a half years.

Carro credits this accomplishment to GMHC's responsible attitude. "The Board treats financial matters seriously. We don't feel we can ever be extravagant. After all, it's the community's money, not ours, which has been entrusted to us." Carro is responsible for all accounting functions, from managing a complex payroll to handling contracts and audits. The management areas that report to him include Facilities, Information Systems, Personnel, and Accounting.

Raising sufficient funds to cover operating expenses is an ongoing concern. A hefty 81.6 % of the 1990 projected $12 million budget will come from private sources such as corporations, foundations, and individuals. Direct mail campaigns, special events like the annual AIDS Walk, memorial donations, and personal contributions to United Way all help to support the agency.

Dan Bross, Associate Director of Development, speaks with noticeable satisfaction of last year's efforts (1988-1989) that netted $13,624,926. To him, that figure represents much more than the income generated by the average AIDS organization. "I am proud of the fact that we are not dependent on government funding, which can be sporadic. To provide the level of services we do requires a continuous flow of funds. We have quite a challenge each year: every July, we start from zero again."

A MANAGEMENT CHALLENGE

Judging by the high caliber of its personnel, GMHC appeals to a very special kind of individual. After all, the work is probably both more personally rewarding and more difficult than that in other places. Staff positions are held by deeply dedicated men and women who say they love their jobs and find them exciting.

Managers must learn how to deal with the following issues that they face almost daily in the course of their work:

Coping with loss

Survival at GMHC means knowing how to handle grief. Ripple says that the epidemic has taken a heavy toll. "The reality is that we see people who have a terminal illness. On an average, three clients die every day. This year, our Board president and the founder of the Medical Information department died."

To alleviate stress and burnout, staff are given many opportunities for support. Above all, expression of feelings is encouraged at GMHC. Staff may participate in employee assistance programs through St. Luke's-Roosevelt Hospital in New York City. Weekend programs focus on grief and healing. Others present techniques for reducing stress. People on the Hotline meet regularly to share their experiences.

Since death is so much a part of the job, managers are accustomed to handling their emotions and helping volunteers accept each loss.

Setting realistic expectations

"When someone dies, his death prevents us from seeing our success," explains Ripple. He emphasizes looking at accomplishments. "We try to show people how they actually empowered a client to improve the quality of his life and get something done before he died."

An extended day

Since volunteers report to other jobs between 9 and 5, they are at GMHC only during the evening or weekends. Supervising them often means putting in extra long hours. "We work 12 hours a day, because the work is never done," states Carro.

Setting limits

Such commitment creates another problem. Says Ripple, "Motivation is not an

issue here. People get so involved in what they are doing that they don't know when to stop."

To remedy this, timesheets are used. Team leaders find the documentation useful. They talk to volunteers regularly, discussing their attitudes and total hours worked.

Change

Since change is a normal part of the environment at GMHC, adaptability is a job requirement. James Holmes, Coordinator of In-Service Training, finds this true in his area. The Education Department designs and updates programs to train not only new volunteers but also health care and social service professionals. It also dispenses information through the Hotline, develops AIDS prevention programs, runs the Speakers Bureau, and produces a weekly TV show and more than 30 publications, distributing 3 million pieces of literature annually. "Education isn't static. Courses get obsolete very quickly, before the ink is dry. I have learned to be flexible in ways I never thought possible," declares Holmes.

Geoffrey Knox, Communications Director, agrees. "As the epidemic is changing all the time, nothing is set. Every day we face a whole new set of problems." Ripple concludes, "GMHC is totally client-centered now, but we even can change that if a new need develops."

Training

Each department is essentially responsible for training its own workers. No centralized staff training department exists yet. Outside experts are hired for teaching skills in supervision, setting priorities, stress and time management. Volunteers in Crisis Intervention Services are trained by the Education Department.

Many people rely on learning through hands-on, practical, on-the-job experience. Trial and error proves useful. Holmes believes that being positive makes anything possible. "Since so many of us were not formally trained in social services, we were not taught the barriers. 'Can't' just isn't part of our vocabulary!"

APPROACH TO MANAGEMENT

Communication

There are no separations here because of status. Communication easily crosses levels. Voice mail connects staff who do not work together. Meetings occur frequently to discuss policy matters, performance and employee concerns.

Decision making

No one works completely alone. Says Carro, "The organization is set up so decisions can't be made in a vacuum. We talk a lot in groups, at staff and department meetings, and are more process-oriented than many other organizations." Sometimes it seems difficult to get things done, so people get frustrated. Decisions take longer to make, as there are more parties involved. "This may appear less efficient, but it isn't. In the long run, it works, because everyone is likely to buy into each decision."

Attitude toward volunteers

The key to GMHC's success in managing is a humane approach. Because people are valued, they tend to accomplish more with fewer resources. They can expect to be treated with great respect and appreciation for their contributions, so they work harder.

Carro sums up GMHC's attitude; "We think of volunteers as unpaid staff." Failla concurs, "The paid staff exists primarily as a support to volunteers."

Reasonable accommodation

Lew Katoff, Client Services Director, is sure that "it is possible to accommodate chronic illness and add something to the organization. You must understand what someone's job is and find different ways to get it done. GMHC has a number of people on staff who have AIDS. It can work—through flex time, job sharing or working at home."

THE FUTURE

The Center for Disease Control recently announced that, as of September, 1989, the total number of AIDS cases reported since 1981 is 105,990. The number of deaths, at

60,684, surpassed the number of those who died in Vietnam by more than 1,900, Knox points out.

As long as the disease exists, GMHC will do its best to provide reliable information to the public. To Knox, that means dispelling fears and prejudice and increasing knowledge. Knox's job is managing information. His office acts as a clearinghouse, working closely with other GMHC departments. It prepares press releases, organizes news conferences, contacts other public health agencies, and communicates with volunteers and donors.

"When an article comes out that is inaccurate, we correct it. Speed of response is important. The public doesn't have the same sense of urgency, but we have a responsibility. People's lives are at stake. Our volunteers clip all major newspapers daily. People call to let us know about misinformation on TV. They expect us to be a watchdog."

According to Bernard See, "This is a transitional time for GMHC."

Why? First of all, "AIDS demographics are changing. The rate of infection among gay men has levelled off. But it's increasing among IV drug users. Heterosexual transmission has risen, too," explains See. GMHC clients reflect this shift, adds Knox. "Today our clients are not only gay, but also people of color, teenagers, women, and children."

See says that there are far more organizations responding to the epidemic in the New York metropolitan area today than there were three or four years ago. They include political lobbying groups, as well as programs for Blacks, Latinos, and women.

Recent medical progress in AIDS treatment raises new questions. How much do medications cost? Will they be readily available to anyone who needs them?

GMHC is in the midst of reassessing its role in responding to the epidemic. In months to come, the Board expects to review possible future directions with Jeffrey Braff, the new Executive Director. Prior to accepting this post, Braff served as Forecasts and Budgets Director at Bell Canada, doing strategic planning.

GMHC and AIDS are entering a new decade. Until there is a cure, the agency will continue to serve its clients with compassion. It will provide support through counseling, financial advice, publications, preventative education, social and recreational programs, and legal assistance. GMHC will be there, ready to tackle whatever needs to be done to dissipate the crisis.

TIPS FOR MANAGERS

GMHC staff offers these suggestions for managing agency workers:

- Manage the way you want to be managed (Ripple).
- Be aware of your own emotions daily. Acknowledge and deal with them, otherwise people won't work as effectively or with as much cooperation or focus (Knox).
- Learn to look beyond the resumé. Recognize people for the talents they have, and the organization will benefit.
- Recognize that you can't do it all.
- Take a step back, instead of operating in a crisis mode (Holmes).
- In cases of AIDS, realize that reasonable accommodations to prevent infection are really less of a problem than we fear them to be. Deal with sensitive issues by communicating about performance. Ask the employee, "Is the illness interfering with your job? Can you concentrate?" Allow employees to continue being productive as long as this seems practical (Katoff).

Volunteerism Citation Index

Covering Articles
Appearing During 1989-1990

David Colburn, Citation Editor

The Volunteerism Citation Index (VCI) is published twice a year by *The Journal* as a service to our readers. It is intended to be a tool for learning what is being written about volunteerism by those in other professions, and as an ongoing guide to current trends affecting volunteerism. VCI also assists those who are conducting research, and adds another dimension to the definition and formalization of our field.

VCI includes citations from both popular and scholarly sources generally available in libraries. Articles are selected because they relate directly to volunteerism and volunteers, *as defined by the subject matter*, not the source. Pamphlets, newsletters, dissertations, unpublished papers and most newspaper articles are excluded because they are too "fleeting" in availability and often difficult to track down in their entirety.

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THE JOURNAL OF
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Guide to Publishing a Training Design

When submitting a training design for publication in *The Journal of Volunteer Administration*, please structure your material in the following way:

TITLE OR NAME OF ACTIVITY

GROUP TYPE AND SIZE: This should be variable so that as many groups as possible can use the design. Optimum group size can be emphasized or ways to adapt the design to various group sizes can be described.

LEARNING OBJECTIVES: One or more sentences specifying the objectives of the activity.

TIME REQUIRED: Approximate time frame.

MATERIALS: List all materials including props, handouts, flip charts, magic markers, and audio-visual equipment.

PHYSICAL SETTING: Room size, furniture arrangement, number of rooms, etc.

PROCESS: Describe *in detail* the progression of the activity, including sequencing of time periods. Use numbered steps or narrative, but clarify the role of the trainer at each step. Specify instructions to be given to trainees. Include a complete script of lecturettes plus details of the *processing* of the activity, evaluation, and application.

If there are handouts, include these as appendix items. Camera-ready handouts are appreciated.

VARIATIONS: If other ways of conducting the design are applicable, describe briefly.

Include a three or four line biographical statement at the end of the design and any bibliographical references showing other available resources.

Please send three (3) copies of all materials to THE JOURNAL OF VOLUNTEER ADMINISTRATION, P.O. Box 4584, Boulder, CO 80306.

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GUIDELINES FOR SUBMITTING MANUSCRIPTS

I. CONTENT

A. THE JOURNAL OF VOLUNTEER ADMINISTRATION provides a forum for the exchange of ideas and the sharing of knowledge about volunteer administration. Articles may address practical concerns in the management of volunteer programs, philosophical issues in volunteerism, and significant applicable research.

B. Articles may focus on volunteering in *any* type of setting. In fact, THE JOURNAL encourages articles dealing with areas less-visible than the more traditional health, social services, and education settings. Also, manuscripts may cover both formal volunteering and informal volunteering (self-help, community organization, etc.) Models of volunteer programming may come from the voluntary sector, government-related agencies, or the business world.

C. Please note that this JOURNAL deals with *volunteerism*, not *voluntarism*. This is an important distinction. For clarification, here are some working definitions:

volunteerism: anything related to volunteers or volunteer programs, regardless of setting, funding base, etc. (so includes government-related volunteers)

voluntarism: refers to anything voluntary in our society, including religion; basically refers to *voluntary agencies* (with volunteer boards and private funding)—and voluntary agencies do *not* always utilize volunteers.

Our readership and focus is concerned with anything regarding *volunteers*. A general article about, for example, changes in Federal funding patterns may be of value to executives of *voluntary agencies*, but not to administrators of *volunteer programs* necessarily. If this distinction is still unclear, feel free to inquire further and we will attempt to categorize your manuscript subject for you.

D. THE JOURNAL is seeking articles with a "timeliness" quality. Press releases or articles simply describing a new program are not sufficient. We want to go beyond "show and tell" to deal with substantive questions such as:

— why was the program initiated in the first place? what obstacles had to be overcome?

—what advice would the author give to others attempting a similar program?

— what might the author do differently if given a second chance?

— what might need adaptation if the program were duplicated elsewhere?

Articles must be conscious demonstrations of an issue or a principle.

II. PROCEDURE

A. The author must sent three (3) copies of the manuscript to:

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B. Manuscripts may be submitted at any time during the year, but the following are deadlines for consideration for publication in each issue:

for the *October* issue: manuscripts are due on the *15th of July*.

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C. With the three copies of the manuscript, authors must send the following:

1. a one-paragraph biography, highlighting the author's background in volunteerism;

2. a cover letter authorizing THE JOURNAL OF VOLUNTEER ADMINISTRATION to publish the submitted article, if found acceptable.

3. mailing address(es) and telephone number(s) for each author credited.

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Complete the attached Membership Application. Membership in AVA is open to both salaried and non-salaried persons active in volunteerism and volunteer services administration. Membership categories include:

Active Member: Dues are $75 annually for individuals who are currently active in the field of volunteer administration and for trainers, educators, researchers, and consultants.

Associate Member: Dues are $40 annually. This category is for retired volunteer administrators only.

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Membership Categories (check one):

___ Active: Dues are $75 annually for individuals who are currently active in volunteer administration.

___ Associate: Dues are $40 annually for retired volunteer administrators only.

___ Student Dues are $40 annually for full-time students.

Membership Fee Payment:

___ Check enclosed (in U.S. dollars only) for amount

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