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

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

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

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

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

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One of the fundamental questions related to volunteer development is: What motivates people to commit their personal resources, emotional energy, and time to volunteering?... Many volunteer managers have commented that it's not the recruiting that is difficult — it is the retention that is really challenging. (Conners, p.13,18)

This issue of *The Journal* provides managers of volunteers with five research studies that focus on volunteer behavior — what motivates, drives, supports, and reinforces volunteering.

Volunteers frequently cite a desire to help others as a primary motivator for engaging in volunteer service. Yet contemporary literature on volunteer motivations identifies altruism as only one of many factors affecting volunteer motivations. The studies presented in this issue contribute to the ongoing dialogue about the importance of understanding and accurately identifying motivations as a precursor to effective placement and appropriate recognition.

Oswald and Anke, Volunteers Speak Out: Motivations for Volunteering, focus on the psychosocial view that volunteer action is driven by multiple motives that ultimately affect how volunteers view the outcomes of their volunteer work. Feelings of satisfaction or dissatisfaction, of effectiveness or ineffectiveness are based on the volunteer's underlying motives for volunteering. Fulfilling these individual motivations increases the likelihood of ongoing volunteer service.

Liao-Troth and Drumm explore the psychological contract and functional motivations among volunteer firefighters to help managers of volunteers understand the importance of developing personal and organizational relationships with volunteers. Turnheim Smith continues the discussion of psychological contracts, describing the results obtained from a series of focus groups with managers of volunteers and Junior League volunteers. The idea that all volunteers form a psychological contract with their organization is an intriguing concept that will be explored further in subsequent issues.

Corregan and Martin focus on the Social Exchange Theory, and identify rewards and costs associated with volunteering. The authors assert that by being aware of the rewards and costs experienced by volunteers, a manager of volunteers is better able to create an equitable exchange that builds long-term volunteer commitment where benefits exceed costs.

Flaherty and Kipp, *Where a Bar of Soap Can Make a Difference*, look at the factors affecting the motivation of family planning volunteers in Uganda, and identify the importance of appropriate "facilitation" [recognition] for sustained involvement. This study highlights the critical need for managers of volunteers to listen to the ideas and suggestions of volunteers.

While all five studies emphasize the importance of active dialogue with volunteers, it is highlighted most dramatically in the Flaherty and Kipp study. All the authors note the need for managers of volunteers to interview, dialogue and build relationships with volunteers so that they can better understand the motivations that bring the volunteers to their work, as well as better identify individual perceptions and expectations to help sustain volunteer service.

The Ideas That Work article describes the engagement of volunteers in a formalized patient education program at Princess Margaret Hospital in Toronto, Canada. These "partners in caring" provide support services to patients and families, while reducing pressures on healthcare providers.

The last two articles discuss the important of fostering leadership. The first explores the importance of character and competencies in leadership. The second, by Stan Fisher, Vice President of the International Association for Volunteer Efforts (IAVE), addresses the importance of the role of volunteer administrators in the governance and leadership of organizations.

Three of the research studies (Corregan and Martin, Turnheim Smith, and Flaherty and Kipp) in this issue were selected through a peer review process to be presenters at the 2003 International Conference for Volunteer Administration (ICVA) in Cincinnati, Ohio. *The Journal* annually sponsors two research forums at ICVA as part of its mission to generate and disseminate new knowledge contributing to the development and advancement of the volunteer administration profession.

Mary V. Merrill Editor

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Research

Volunteers Speak Out: Motivations for Volunteering

Sharon K. Ostwald, The University of Texas Health Science Center, Houston, Texas Anke Runge, The University of Texas Health Science Center, Houston, Texas This study aims at gaining a better understanding of volunteers' motivations, both primary and secondary, for engaging in community activity and the relevance of motivational incentives in determining positive or negative volunteering outcomes. Data was drawn from a survey, completed by 361 certified volunteer ombudsmen (CVOs), and consisted of responses to two open-ended questions regarding CVOs' perspectives of their ombudsman role. Findings indicate that two simultaneously counteracting motivational forces, "to give of oneself" and "to take back for oneself," drive volunteers into action; although, individual motives may differ significantly. Thus, motivations to volunteer tend to be aroused for different reasons. Consequently, realization of personal expectations strongly influences volunteers' role perceptions, with attainment of goals signifying "positive" and non-attainment of goals "negative" experiential outcomes. This article emphasizes the need for volunteer program organizers to understand individuals' motivationinduced reasons for volunteering and their evolving role perceptions to ensure more satisfactory service outcomes.

The Psychological Contract: What Motives to Anticipate in Your Firefighter Matthew A. Liao-Troth, Western State University, Bellingham, Washington H. Michael Drumm, DePaul University, Chicago, Illinois

This article discusses the concepts of the psychological contract and functional motivation, and explains how these should relate to each other when anticipating volunteer preferences as applied to a sample of volunteer firefighters. Findings indicate that the understanding motive and the protective motive affect the content of the psychological contract that volunteers form. Managers are advised to communicate with their volunteers and determine what their psychological contracts contain.

• What They Really Want: Assessing Psychological Contracts of Volunteers

Joy Turnheim Smith, Indiana University Purdue University, Fort Wayne, Indiana The way both the volunteer and the manager of volunteers understand the volunteer relationship makes up the psychological contract between the two (Rousseau and McLean Parks, 1993). These psychological contracts are important to understand since they ultimately govern the behavior of the volunteers (Morrison and Robinson, 1997). Because nonprofits are relying on volunteers in many ways, understanding what each of the parties had in mind with respect to the terms of the relationship is of value to nonprofits. Through a series of focus groups and survey testing, this paper identifies the elements that were found to make up the psychological contracts that govern the relationship between volunteer and nonprofit organization.

• Volunteerism: The Rewards and Costs Expected and Experienced

Michael W. Corrigan, West Virginia University, Morgantown, West Virginia Matthew M. Martin, West Virginia University, Morgantown, West Virginia

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This study investigated the costs and rewards associated with volunteering from the volunteer's perspective. The participants (N=177) for this study were active volunteers from six different organizations, in Ohio, Pennsylvania, and West Virginia, that assisted hospital patients, underprivileged or at-risk youth, church related concerns, schools, and other miscellaneous services. Answers to the research questions proposed in this study offer a better understanding as to how rewards and costs play a role in determining whether volunteers continue to donate their time and energies.

• Where a Bar of Soap Can Make a Difference: Family Planning Volunteers in Uganda Express Their Needs

Annette Flaherty, Alberta Health and Wellness, Edmonton, Canada Walter Kipp, University of Alberta, Edmonton, Canada

The purpose of this study was to assess the experiences and daily challenges of family planning volunteers in Uganda. Focus group discussions were conducted with active volunteers and former volunteers. Four study sites were selected from 24 program sites. Volunteers rated lack of remuneration and rewards as a major factor for a low working morale. Lack of recognition by the family planning program undermined their credibility in the community. In-spite of these frustrations most volunteers expressed their willingness to continue with their work. The Kabarole family planning program needs to seriously address the deficiencies in supporting their volunteers. As the volunteers have made very modest requests, an innovative incentive system could be quickly put in place without major increase in program spending.

Ideas That Work

• Bridging the Gap: Communicative Activities of Patient Education Volunteers in an Oncology Hospital

Joyce Nyhof-Young, University of Toronto, Toronto, Canada Audrey Jusko Friedman, Princess Margaret Hospital, Toronto, Canada Pamela C. Catton, University of Toronto, Toronto, Canada

The Patient Education (PE) program at Princess Margaret Hospital, an oncology hospital within the University Health Network in Toronto Canada, is making innovative use of volunteers to empower patients and family members dealing with cancer. This paper describes the training and key communicative activities and skills of PE volunteers (e.g., providing psychosocial support, helping cancer patients and their families to get the information they need to understand their medical experiences) and the importance of these activities to the hospital's computer-based patient education program.

Commentary

Selecting and Training Staff and Volunteer Members for Leadership, Character, and Competencies

Roger Weis, Murray State University, Murray, Kentucky Kelly Rogers, Murray State University, Murray, Kentucky James Broughton, Murray State University, Murray, Kentucky

One of the most important aspects of any volunteer organization is caring and competent staff and volunteer members. But many organizations struggle in the overall process of selecting and training personnel. The Integrated Leadership and Character Model is presented as a framework for staff and volunteer selection and training. The model discusses the importance of character in leadership and how character interacts with various competency areas.

• Governance, Leadership and Diversity: Is there a Link?

Stan C. Fisher, Chrysalis, Edmonton, Canada

Could it be suggested that diversity is the one true thing we have in common? Diversity of our interests, diversity in our management style and approaches, diversity in decision making and diversity in leadership style. Sounds like the world and day-to-day reality of the volunteer administrator doesn't it? Through our diversity in this sector, we face and address common issues. How then can we build upon strengthening our work?

FEATURED RESEARCH

Volunteers Speak Out: Motivations for Volunteering

Sharon K. Ostwald, The University of Texas Health Science Center, Houston, Texas Anke Runge, The University of Texas Health Science Center, Houston, Texas

INTRODUCTION

Volunteering, the act of giving voluntarily of one's time and talents to serve the community, neither earns money nor does it, in many instances, provide significant prestige. Nonetheless, it has a powerful appeal to the population at large. In 2002, a total of 59 million people in communities all over the United States volunteered their services (Bureau of Labor Statistics, 2002). In recent times, private voluntary involvement coined the "volunteer solution," is increasingly encouraged, particularly through government-related programs (Petras and Polychroniou, 1998; US Department of State, 2002). Compensating for changes in public policy, lawmakers are moving more and more responsibility for America's social problems away from the public sector and the private sector to a third sector, labeled the "independent sector," that is composed of nonprofit agencies (Bradley, 2000; Wilson and Musick, 1997). In an effort to overcome fiscal constraints, citizen volunteers, who function as an extension of paid staff, often represent the majority of workers, as exemplified in the federally authorized Long-Term Care Ombudsman Program (Harris-Wehling, Feasley and Estes, 1995; Netting, Huber and Kautz, 1995), and in hospice care programs mandated by the Medicare Reimbursement Act (Kovacs and Black, 1999).

Although volunteer experiences are generally valued as complementing personal development and enriching overall life-satisfaction (Wilson, 2000), "the truth is that there is little understanding of why people volunteer" (Fischer, Mueller and Cooper, 1991:186). Pursuing the psychosocial view that human action is motive-driven (Clary et al., 1998), numerous research studies have addressed motivational forces that compel individuals to seek and engage in volunteer activities. Specific motives for volunteering have been presented by means of individual perspectives (Pushkar, Reis and Morros, 2002; Cnaan & Goldberg-Glen, 1991; Henderson, 1981) as well as in multiple factor models: the Two-Factor Model (Frisch and Gerrard, 1981), Four-Factor Model (Batson, Ahmad and Tsang, 2002), and Six-Factor Model (Clary and Snyder, 1999). Describing quadruple motivational forces, the Four-Factor Model focuses on egoism as a motivation for improving one's personal well-being, altruism for improving the well-being of another person, collectivism for improving the well-being of a group, and principlism as a motivation for supporting essential moral beliefs. The Two-Factor Model includes altruism, concerns for others, and egoism, concerns for self. The Six-Factor Model uses a Volunteer Functions Inventory (VFI) to illustrate six similar functions served by volunteering: values, for acting on humanitarian beliefs like compassion for others; understanding, for gaining new knowledge and skills through direct and hands-on experience; enhance-

Sharon K. Ostwald, PhD, RN, is a professor in the School of Nursing/University of Texas HSC-Houston (UTHSC-H), and director of the Center on Aging. She is also an adjunct professor in the UTHSC-H School of Public Health and Medical School. She holds the Isla Carroll Turner Endowed Chair in Gerontological Nursing. She has received awards for outstanding research, teaching and community service. In addition, she has provided consultation to state, federal and voluntary agencies, made presentations at national and international meetings, and has over 50 publications.

Although officially retired since April 2003, *Anke Runge, MA*, continues her participation in previously started research work. As faculty associate and coordinator of special projects in the Center on Aging at the UTHSC-H, she assisted in numerous research projects, and was editor of the monthly newsletter. She also co-presented research outcomes at state and national conferences, and co-authored numerous publications.

A better understanding of the relationship between individuals' motivation-induced reasons for volunteering and their role perceptions is needed to ensure satisfactory volunteering outcomes as well as volunteer service endurance.

ment, for psychological self-growth and development; career, for acquiring careerrelated experience; social, for increasing one's social relationships; and protective, for overcoming one's personal problems.

Focus on the impact of external incentives has added the element of reinforcement to intrinsic motivation (Arnold, 1976; Nathanson and Eggleton, 1993). Similarly, fulfillment and non-fulfillment of motivation-inspired needs have been recognized as determining factors for individuals' positive and negative perceptions of their volunteer activities (Clary et al., 1998, Omoto, Snyder and Martino, 2000; Kiviniemi, Snyder and Omoto, 2002). Given the various aspects of motivational impact on volunteering, individuals are driven into volunteer involvement not by a single, but a multitude of needs and reasons, all purposed towards one goal - a sense of self-gratification. (Cnaan and Goldberg-Glen, 1991; Kovacs and Black, 1999).

This study seeks to examine volunteers' perceptions of their role in terms of underlying motives, both primary and secondary, and to demonstrate the relevance of motivational incentives in determining volunteers' overall satisfaction or dissatisfaction with service results. Applying Batson, Ahmad and Tsang's (2002) Four-Factor Model, the authors aim to illustrate individuals' motivational impact on perceived positive and negative volunteering outcomes. Given the asymmetrical relationships between paid professionals/staff and unpaid volunteers (Netting, Huber and Kautz, 1995), perceptions of lived volunteering experiences greatly affect how volunteer service programs are planned and implemented. Yet, few studies have sought volunteers' perspectives of their role and effectiveness (Ostwald, Runge, Lees and Patterson, 2003). This paper proposes that a better understanding of the telationship between individuals' motivation-induced reasons for volunteering, and their role perceptions, is needed to ensure satisfactory volunteering ourcomes as well as volunteer service endurance.

METHODS

The paper draws on data from a statewide mail survey conducted in Texas in 1998-1999. A total of 642 certified volunteer ombudsmen (CVOs) were identified as active in 28 regional offices throughout Texas. Surveys were mailed to the home addresses of all 642 CVOs. They were provided with self-addressed, postage-paid return envelopes; CVOs were requested to return their surveys directly to the University of Texas-Houston Center on Aging for analysis and were guaranteed confidentiality of their answers. A reminder postcard was sent two weeks later. The return totaled 361 completed, usable CVO surveys, for a response rate of 56 percent.

The survey was adapted from questions used in two previous national surveys (The National Center for State Long Term Care Ombudsman Resources, 1989; Stevens, 1989). It was tested for clarity and revised, based on comments of 10 CVOs. The survey included questions on demographics, activities, effectiveness, and barriers to effectiveness. CVOs were asked to rate their effectiveness on a Likert scale. The findings based on these forced option questions are reported elsewhere (Ostwald et al., 2003). The survey also included two open-ended questions that allowed ombudsmen to comment on their role in terms of underlying motives and overall satisfaction or dissatisfaction with the results of their service. This article is based on those open-ended responses.

Initially, open-ended responses were organized according to motivations. Subsequently, using Batson's et al. Four-Factor Model as primary motivational grounds for volunteer involvement, responses were analyzed in terms of expressed primary and secondary motivational factors. Finally, volunteers' per-

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ceptions of their motivation-driven, goal-oriented service outcomes were identified and classified as either positive or negative. Views that were consistently found across surveys, regardless of individual characteristics, represented broad consensus and are reported here.

RESULTS

The 361 CVOs who completed the survey were primarily white women with a mean age of 65 years (range, 25 - 86 yrs) with some postsecondary education. Fifty-eight percent were retired, 52 participants (14.8%) had previously been administrators and health or social service professionals. The mean length of service time was 4.8 years (range: a few months to 28 yrs). No data was available on non-respondents.

Applying the framework of the Four-Factor Model (Batson et al.), analysis of CVOs' expressed motivations for engaging in volunteer activities with nursing home (NH) residents uncovered the following patterns.

CVOs conveyed the first primary motivational force, classified by Batson et al. as egoism, with the desire for self-fulfillment and the need to improve one's personal wellbeing. Associated secondary motivations included gaining new knowledge and broadening one's understanding of life, as well as feeling needed, appreciated, welcomed, useful, and productive. In addition, volunteering enhanced CVOs' self-esteem and provided opportunities for gaining self-enrichment by earning recognition and success. CVOs also found self-distraction while redirecting life's focus away from personal stress and tension, to discover renewed meaning in living.

The second primary motivational force, identified by Batson et al. as altruism, was CVOs' desire to improve the well-being of another person by bringing joy and hope into people's lives. Expressed associated secondary motivations included the desire to help and protect others; to instill a sense of confidence, trust and hope in others, as well as to lend a listening ear and understanding to others; or simply to just be there for another person. Thus, these CVOs aspired to make institutional life more tolerable and more easily manageable for individual residents.

Others were driven to volunteer their service and time by a third primary motivation, referred to by Batson et al. as collectivism. These CVOs focused on improving the level of care for the residents as a group. They saw themselves as the eyes and ears on site by bringing a community presence into the NH and letting residents know someone cares. They also concentrated on serving as advocates for the elderly to make change happen, and on functioning as a necessary link in the communication chain for residents and staff. These volunteers were motivated to go beyond bringing hope and joy to individual residents, they wanted to change the system so all NH residents would receive good care, and to let NH residents know they had not been forgotten.

The Batson's fourth primary motivation, labeled principlism, inspired those individuals to engage in volunteer work who saw their mission in promoting essential moral values like justice, equality, safety, as well as ethical behavior, and in improving overall care standards to protect the residents from harm. These CVOs were concerned with such issues as providing quality resident care, treating the elderly with dignity, and placing the residents above industry profits instead of viewing them as commodity. As CVOs, they also saw themselves making a contribution to their community and went all-out to promote respect for the ombudsman role, despite frequently experiencing the sense of performing like a "toothless tiger" because of the lack of power associated with the CVO position.

In summary, CVOs' comments indicated that most volunteers are inspired by more than one motivational factor, thus aspiring to achieve positive outcomes for themselves, for the individual residents, as well as for the larger group (i.e. the elderly), and to meet higher care standards. The actual outcomes of their volunteer service, however, were not always positive. Given the problems facing the NH industry, CVOs' responses appropriately revealed that volunteers frequently did not have the impact they would have liked in order to achieve desired outcomes. Specifically, CVOs perceived their service outcomes as both positive and negative for all four prima-

ry motivational categories: egoism (self-orientation) — feeling a sense of fulfillment and satisfaction versus experiencing stress and tension; altruism (other-orientation) — feeling effective in providing comfort versus seeing no benefits to residents from volunteering efforts; collectivism (group-orientation) making an impact by being the eyes and ears on site versus feeling powerless in pursuing a proactive role to ensure change; principlism (value-orientation) — feeling influential in enhancing residents' well-being versus feeling dejected by corporate focus on profit at the cost of quality resident care.

DISCUSSION

Using Batson's et al. Four-Factor Model, the present study was designed: a) to examine the relationship between individuals' primary and secondary motivation-induced reasons for volunteering, as well as subsequent perceptions of their volunteer role; and b) to identify volunteers' positive or negative perceptions of their motivation-driven, goal-oriented service outcomes.

Analysis of volunteer responses revealed that participating CVOs were motivated to engage in volunteer activity with NH residents by various combinations of the four primary motives (egoism, altruism, collectivism, and principlism), and associated underlying secondary motivational components. This indicates that CVOs were inspired to make a difference for the benefit of either individual NH residents, NH residents as a group, or society as a whole, and concurrently desired to reap some gain for themselves, while striving toward a complementing outcome recognized in the literature as "a rewarding experience" (Cnaan and Goldberg-Glen, 1991:281) to satisfy unique personal needs. Thus, this study provides support for the findings of others, that volunteers are compelled into action not by a single, but by a combination of motivational factors whose synergetic energy drives them to give of themselves and, simultaneously, take back for themselves some kind of reward or satisfaction (Cnaan and Goldberg-Glen, 1991; Fischer, Mueller and Cooper, 1991; Clary and Snyder, 1999; Kovacs and Black, 1999).

Given the uniformity of CVO assignments, CVOs may be carrying out the same volunteering task (e.g. Visiting with NH residents) quite similarly, yet, as reflected in their selfreported statements, their underlying personal motivational forces may well differ significantly:

- pleasure-seeking: I enjoy visiting residents, talking with them and their families.
- self-satisfaction: What a thrill to help someone resolve a problem.
- self-indulgence: Maybe today the music will be on and I'll get to dance with one of the men again.

This manifestation of unfurling motivational dynamics in volunteer behavior, identified in the literature as "the core propositions of volunteerism," (Clary et al., 1998:1517), is compatible with other research findings that motivations to volunteer, multidimensional by nature and not mutually exclusive (Okun, Barr and Herzog, 1998), are aroused for different reasons and purposed to satisfy different needs in different people (Fischer, Mueller and Cooper, 1991; Omoto and Snyder, 1995). Acknowledging the manipulative impact of the different motivational forces at work, volunteers' role perceptions appear to be formed according to the extent in which personal motive-induced volunteering expectations are realized. As exposed in CVOs' selfreported responses, the decisive indicator in their role perception was either a feeling of success and accomplishment, or failure and disappointment.

- success: I enjoy my role as a CVO very much. It has been rewarding and educational.
- failure: My CVO role is frustrating because one sees incompetence in management or various other jobs and is powerless to do anything about it.

Hence, a sense of goal attainment or nonattainment, described by Clary et al. (1998:1525) as "the match between an individual's motivational goals and the fulfillment of those goals," seems to influence markedly how individuals perceive their role as volunteers.

In a similar way, motivations to engage in volunteer activity also affect individuals' perceptions, both positive and negative, of their service outcomes including received self-benefits. CVOs described such self-goals

In a similar way, motivations to engage in volunteer activity also affect individuals' perceptions, both positive and negative, of their service outcomes including received self-benefits.

as the feeling of being needed and appreciated, being useful and productive, as well as making one's life more meaningful. Coming as community representatives from outside the institutional structure to monitor the quality of resident care, provides CVOs with the opportunity to make a potentially positive impact on the institutional setting. Yet, as self-reported CVO comments exemplify, imparting such a community presence produced two kinds of psychological outcomes — those provoking positive, self-fulfilling satisfying feelings versus those resulting in negative, self-disappointing frustrating sensations.

- positive: Being the eyes and ears on site. Feeling accepted and seeing results.
- negative: Seeing no beneficial outcomes. Feeling powerless and unproductive.

Complementing CVOs' primary and secondary motivation-induced volunteering objectives with volunteer tasks, relevant to individuals' job preference, seems vital to fostering self-fulfilling volunteering results. Many CVOs settled on volunteering for redirecting life's focus away from personal stress and tension, making the need for placing individuals "in their preferred job types" (Pushkar, Reis and Morros, 2002:155) especially critical in order to achieve volunteering outcomes that are just right for finding renewed personal balance.

With volunteers' individually unique motivational interplay of "giving" and "receiving" directly impacting job performances, it is not surprising, as illustrated in CVOs' survey responses, that positive experiential perceptions are not only associated with higher levels of successful volunteering outcomes, but are also indicative of lasting service commitments. In contrast, negative experiential perceptions, brought on by disappointment in work outcomes, tend to provoke untimely service terminations.

• long-term: My work as CVO is very interesting and I wish to continue it. I really love it.

• short-term: I plan to resign from the Volun-

teer Ombudsman Program because I feel the work that is done is not appreciated.

Described by Cantor (1994:241) as "situation to person" and "person to situation" match, past findings point to the same modus operandi: relevance of received benefits to motivational goals affects service satisfaction as well as service endurance (Okun and Snyder, 1995; Clary et al., 1998; Pushkar, Reis and Morros, 2002).

IMPLICATIONS TO PRACTICE

Although specific to the Long-Term Care Ombudsman Volunteer Program, CVOs have many issues and concerns in common with volunteers in general. This study has demonstrated that, on the whole, motivation to volunteer is a multidimensional concept made up of separate, yet interconnected meaningful parts. These findings may give some constructive indications for quality management of volunteers by any volunteer service organization or group. The following implications are intended to serve as guidelines toward this endeavor

- Identifying volunteers' personal aspirations: establish an in-depth interview procedure that would seek out individuals' unique reasons for volunteering; understand and be responsive to individuals' motivational incentives and specific needs; recognize individuals' self-benefit expectations.
- Placing volunteers in preferred job types: take into account individuals' specific skills and expertise to make most appropriate job assignments.
- 3) Examining volunteers' role perceptions: request individuals' self reported accounts of success and failure; evaluate the extent at which individuals' personal expectations are realized; assess individuals' fulfillment of motivational goals.

- 4) Being aware of volunteers' length of service: understand that individuals' lasting service commitments reflect positive volunteering outcomes; recognize that untimely service terminations tend to be induced by negative service experiences; nurture individuals' motivational interplay of 'giving' and 'receiving' to promote volunteering satisfaction and to encourage service endurance.
- 5) Enhancing volunteer recruitment efforts: highlight the dualistic benefits (self-oriented and other/society-oriented) of volunteerism.

Incorporating these guidelines into existing volunteer management strategies, volunteer organizations and groups may expect to boost volunteers' overall in-service contentment, energy, and staying power.

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The Psychological Contract, Part I: What Motives to Anticipate in Your Volunteer Firefighters

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UNIFORMS. COFFEE MUGS. NETWORKING. FREE LUNCHES. CERTIFICATES. AWARD CEREMONIES. EXPERIENCE.

These are just some of the hooks or perks managers use to recruit and reward their volunteer employees. Some of the reasons people identify for volunteering their time to organizations: are a chance to make a difference, something to build the resume, a way to get experience, or an imposed requirement to perform community service.

What connects the two, ensuring that managers and organizations are fulfilling the desires of their volunteers? In this paper, we present the concept of the psychological contract as that link between volunteers and their employers. The psychological contract is a construct that captures the informal reciprocal agreement of a work environment from the perspective of the individual (Rosseau, 1995). This contract addresses what obligations employees feel they owe the organization and what entitlements they feel the organization owes them, beyond those issues in the formal employment contract.

All volunteers have a psychological contract with their organization. This psychological contract is all most volunteers "have to go on," especially those with poorly defined roles in loosely structured organizations. The psychological contract, in essence, helps to ensure that employees work effectively and are committed to the organization.

Most psychological contract research has examined how the contract affects behavior

in the workplace (Rousseau and Anton, 1988 and 1991; Rousseau and Aquino, 1993), or separates out the different kinds of psychological contracts that exist (Rousseau 1990 and 1995). Very little work has been done on how psychological contracts form. Understanding an individual's psychological contract could help managers establish a more positive and long term working relationship with their volunteer employees. Knowing how a psychological contract forms allows the supervisor to manage the relationship between the individual and the organization.

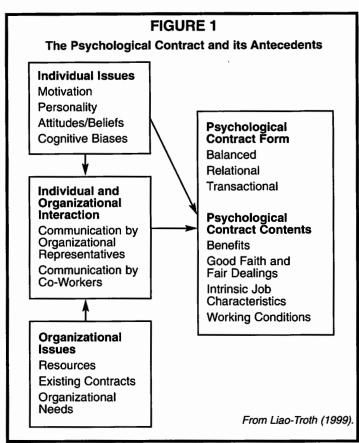
We believed that several traits explain the type of psychological contract that volunteers form with their organization, and also explains what those psychological contracts will be about (See Figure 1). One trait that should be of most importance with volunteers is their motive. We will review the psychological contract and volunteer motives before presenting our study.

THE PSYCHOLOGICAL CONTRACT

Modern contracts theory originated in English common law as enforceable promises, long before the colonization of the Americas (Rousseau, 1995). The *psychological* contract is a contract created in the mind of an employee, based on perceptions of agreed upon employment issues. The psychological contract is different from an *implied contract* (a legal term). Though both the psychological contract and the implied contract are entirely subjective, the difference is whose perception is being addressed. The implied contract

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exists through the eyes of a reasonable third party, such as a judge or a jury, while the psychological contract only needs to exist in the employee's eyes.

Rousseau (1990) places the psychological contract into two broad categories: transactional, where hard work earns high pay and advancement, and relational, where job security is given by the organization for loyalty and a minimum stay by the employee. Rousseau (1995) subsequently identified a hybrid of the relational and transactional contracts, the balanced contract. She also categorized four different types of promises, or contract content, an organization might specifically give to an individual: (a) benefits, (b) good faith and fair dealings, (c) working conditions, and (d) intrinsic job characteristics. These promises are specific to each psychological contract and individual employee, rather than being related to a specific category of psychological contracts (balanced, relational, and transactional).

Benefits include financial and nonfinancial compensatory work aspects. *Good faith and*

fair dealings come from the interpersonal interactions between the individual and the organization (through its representatives). Working conditions deals with the safety, resources, and intangible aspects of a specific work situation. Intrinsic job characteristics are the significance and worthiness of the particular job.

There are also individual-based antecedents, organizational-based antecedents, and individual-organization interaction-based antecedents in psychological contract antecedent terms (Figure 1). Individual-based antecedents such as motivation, personality, attitudes, beliefs, and cognitive biases—affect what individuals are willing to make contracts about, and what types of contracts they are searching for when joining organizations.

VOLUNTEER WORKERS

There are different ways of conceptualizing motives. Liao-Troth (1999) found that motives cannot be grouped into mutually exclusive categories in predicting different psychological contracts. This would ignore the likelihood that people have multiple motives. Clary, Snyder, and Ridge (1992) argue that every individual's motives are different, and people should not be grouped into "motive" categories. They found that assessing and matching an individual's motives provided the greatest predictive accuracy of job success.

Clary, Snyder, and Stukas (1996) use the Volunteer Function Inventory (VFI) to expand on the "life functions" that volunteering fulfills. The VFI captures six "life functions": (a) career (work experience), (b) social (interpersonal interaction), (c) values (acting on important personal convictions), (d) enhancement (esteem), (f) protective (ego protection), and (g) understanding (skill practice). In previous research, Liao-Troth (1999) found no relationship between a volunteer's motives and the psychological contracts that they form with their organization. In our current study, one of two findings is possible: either a concurrence with this previous finding that volunteer motives are not related to psychological contract forms, or a finding that some relationship exists, indicating that the previous finding was methodologically based (in other words a problem with the way motives were measured in the previous study). Our two hypotheses in this study are:

- *Hypothesis One:* Volunteer motives are related to psychological contract content (e.g. benefits, good faith and fair dealings, working conditions, and intrinsic job characteristics).
- *Hypothesis Two:* Volunteer motives are related to the specific type of psychological contract (e.g. balanced, transactional, relational).

STUDY

Subjects (n = 85) were executive officers (i.e. chief, assistant chief, lieutenant, duty officer) in volunteer fire departments attending the Volunteer Incentive Program (VIP) at the National Fire Academy (NFA) in Emmitsburg, Maryland. This program is considered the top level of training available nationally for such officers in the United States, and is provided by a branch of the federal government (the Federal Emergency Management Administration). The subjects came from volunteer fire departments across the United States, predominantly local municipalities. Demographic data on these subjects can be found in Table 1.

PROCEDURES

The items presented here were part of a larger survey distributed to each participant attending the VIP training at NFA in April of 2000. The subjects were given one hour to complete the survey, followed by a brief discussion of its content. The study design was a retrospective questionnaire. Data were analyzed with hierarchical regression to control for demographic variables.

TABLE 1 Demographics of Subjects

Study	1:	Demog	rapnics	στ	Subjec	l
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Demographic Characteristic	Values
Age in Years	42.60 (10.56 standard deviation)
Gender	9.5% female, 91.5% male
Income Category	\$30-\$75k accounted for 50% of the subjects
	"greater than \$75k" was most represented category (29.5%)
	all ranges from "\$5k to \$10k" up were represented
Ethnic Identity	91.6% white
-	1.1% Asian American
	1.1% Hispanic
	1.1% Middle Eastern
	1.1% Native American
	1.1% other
	No African Americans were in this sample

RESULTS

The only psychological contract contents affected by volunteer motives were good faith and fair dealings contracts, and intrinsic job characteristics contracts. Both were affected by the understanding motive. The good faith and fair dealings contract was also affected by the protective motive in a negative direction.

The firefighters' reliance on specific organizational promises was unaffected by any demographic. In essence, the formation basis for the psychological contract remained the same, regardless of age, experience, or geographic location.

The results supported the first hypothesis, indicating that there are unique and specific expectations in establishing psychological contracts. The results did not support the second hypothesis, indicating that the motives for establishing a psychological contract are not based on defining a specific relationship but rather a set of variables.

DISCUSSION

The positive relationship between the understanding motive and both good faith and fair dealings, and intrinsic job characteristics, indicates that people who want to practice their skills end up with perceptions of promises of goodwill from their organization, and a job that is inherently interesting. The fact that the understanding motive leads to psychological contracts

A good way to start this process is by setting high, but realistic, expectations for the volunteer and presenting the work as a challenge to the volunteer. indirectly limited because the psychological contract is the perception of the agreement by the individual. An individual can believe a psychological contract exists even when the organization would not be able to fulfill such a contract. The

addressing intrinsic job characteristics and has strong face validity: if you are seeking to practice a set of skills on the job, you will find a job that at least promises you can practice that skill and you will find it interesting. It also stands to reason that if you feel that your motive to practice a set of skills is beyond the norm for the organization, then you are being treated with good faith and fair dealings even being treated better than fair!

The negative relation between the protective motive and contracts that deal with good faith and fair dealings indicate that people who are motivated by a need to protect their ego end up with no promises of good faith and fair dealings. This could be for a number of reasons, but is probably limited by some degree to the subjects of this study. For those with strong protective motives, it means they are protecting their egos from abuse in some other aspect of their lives (for example, home life). If they are on the defensive, they may not be expecting any goodwill in anything that they do, and would not recognize it when it is present.

Implications for Practitioners

This study demonstrates that motives are related to the content of psychological contracts, but not to the type of psychological contract relationship. The former supports our supposition of undetstanding volunteers' motives. The latter could be a result of the fact that the very nature of building a psychological contract is interactive, and does not flow from individual issues in a vacuum.

Organizationally, the psychological contract is indirectly limited by what the organization and its representatives can provide and is willing to make agreements about. It is organization's resources affect the individualorganization interaction. Individual-organization interaction will also affect the creation of a psychological contract. The experiences of the individual and the organization and its representatives will create a psychological contract both by the sharing of information and negotiation of the contract, but also by the individual's perceptions of these interactions.

Managers need to establish a friendly, but professional work atmosphere and environment with their volunteer employees. A good way to start this process is by setting high, but realistic, expectations for the volunteer and presenting the work as a challenge to the volunteer. Set the organizational parameters but be flexible on issues that are non-essential. These non-essentials may include meal times, starting times, or even days worked. The goal is to meet the individual needs of the volunteer while at the same time the volunteer fulfills the position responsibilities, helping to achieve organizational goals and objectives.

The effectiveness of volunteers in an organization is highly dependent on the success of the psychological contract. The success of the psychological contract is highly dependent on the relationship established between the organization and the volunteer. The manager is the individual responsible for ensuring that both parties understand this contract. While it is important to treat each volunteer as a unique individual, it is equally important to properly match the need and the volunteer. Make your meetings with your volunteer employees dialogues rather than monologues. Build a positive and honest relationship and frame the psychological contract by asking and telling.

Limitations

All motives are labile—they change from month to month or hour to hour (Pearce, 1993). The motives captured in this study for volunteers were hopefully the ones that most related to the individual's psychological contractual assumptions—but they may not have been. Their original motives may have shaped their psychological contracts, but may have changed while the contracts remained the same. There is also a social desirability confound in expressing volunteer motives (Smith, 1981): people like to attribute their volunteer work to socially assumed reasons of prosocial orientation. The answers given may not have been the individual's actual motives.

It may be that motives in and of themselves are not important to the development of the relationship that forms a psychological contract. As motives do not consider the organizational side of the contract, perhaps it is the individual and organizational interaction that drives the psychological contract and nothing else. Individual and organizational issues would; however, feed into the interaction between these two issues. In terms of antecedents, individual and organizational issues affect the interaction of the individual and the organization, and the interaction affects the formation of the psychological contract. Thus Figure 1 would be inaccurate in its depiction of individual issues having a direct effect on psychological contract form and organizational promises; the only link between individual issues to these consequences would be through the individual and organizational interaction.

It is also interesting to note the limit placed on the psychological contract theory by this type of study. That is, that this is a practice and theory for the volunteer employee and the nonprofit or government organizations. There may be intrinsic value in evaluating the psychological contracts of all the members and employees of an organization, not just the volunteers. Indeed, Liao-Troth (2001) has found that psychological contracts do not vary across paid and volunteer nurses assistance working in the same organization. An easy first step might be to simply ask current, regular employees what they want and expect from the organization. This is simply a reversal of the typical evaluation process, where managers inform employees of the organization's needs and wants.

Directions for Future Research

The findings of volunteer motives relating to the type and content of psychological contracts needs replication with subjects that allow for generalization beyond volunteer fire departments. Other individual issues as predictors of psychological contracts could be addressed as well: personality, attitudes, beliefs, and cognitive biases. Organization issues have not been looked at, and their effects could be investigated (Figure 1). Finally, the interaction between the organization and the individual should be investigated (Figure 1).

It may be that the psychological contract is primarily determined by the interaction between the individual and an organizational representative. If that is the case, then a more structured model relating the psychological contract to existing models of conflict management and bargaining and negotiation might be attainable.

ENDNOTES

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What They Really Want: Assessing Psychological Contracts of Volunteers Joy Turnheim Smith, Indiana University Purdue University, Fort Wayne, Indiana

INTRODUCTION

Knowing what volunteers really want when they are volunteering is important both to managers of volunteers assigned to recruit excellent volunteers and to the organizations that rely on volunteers for their very existence. While Clary, Snyder and colleagues have proffered the Volunteer Functions Inventory as a means of categorizing the reasons why volunteers join organizations (e.g., Clary, Snyder and Ridge, 1992; Clary, Snyder and Stukas, 1996), what volunteers want from organizations throughout their tenure is less clear. This study seeks to clarify the terms of that relationship using the concept of psychological contract.

This paper defines the psychological contract and explains how its terms arise, it alsoexplains why understanding the terms of the contract is important to nonprofits, discusses the method in which the potential elements of the contract were identified, and reports the findings with respect to what both volunteers and managers of volunteers believe to be part of the psychological contract that arises for the typical volunteer experience.

WHAT IS THE

PSYCHOLOGICAL CONTRACT?

The psychological contract represents the understandings held by the volunteer and the nonprofit regarding promises made between them (c.f., Rousseau & McLean Parks, 1993). Knowing what these respective understandings are important for both volunteers and nonprofits because both use their version of the understandings to interpret whether the relationship is good or not. From the perspective of the nonprofit, it would be simplest if the promises made when the volunteer was recruited were the only ones that were considered when evaluating the relationship. In reality, the volunteer's understandings are shaped by a variety of factors, including the volunteer's history with that organization, with other organizations, the volunteer's knowledge of how others have been treated by the organization, and the social norms. While some of the behaviors are task-specific, this study concerns itself with the general understandings that volunteers have about how they are to behave and how they are to be treated in the volunteer setting. These understandings are the basis for the psychological contracts of volunteers (Robinson, 1996).

Understanding what these items are is important to nonprofits. Self-monitoring theory suggests that individuals behave in a manner they believe is expected or appropriate for the context (Day, Schleicher, Unckless and Hiller, 2002). Therefore volunteers are likely to behave as they believe they have promised to behave. Similarly, volunteers are likely to judge the behavior of the nonprofit in light of their understandings of how the nonprofit has promised to treat them. When the nonprofit lives up to the volunteers' understandings of the promises, the nonprofit is typically judged favorably. When volunteers believe the nonprofit has not lived up to its promises, they believe the psychological contract has been breached. That breach, may have negative implications for the nonprofit with respect to the attitudes and behaviors of the volunteers experiencing the breach such as a refusal to continue volunteering or badmouthing of the organization. When volunteers are intended to be assets to the organization, clearly neither of these outcomes is desirable.

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FINDING THE TERMS

In order to determine the terms of the psychological contracts of volunteers, I worked with the Junior League of Chicago. With their assistance, we Volunteers also promised to display positive mental attitudes, to maintain good social relations with others and to be enthusiastic. things, to be willing to take on undesitable work as well as desirable work, and to find a way to make a contribution within the organization. With respect to rules, volunteers

held focus groups made up of either volunteers or managers of volunteers from a variety of different organizations. These focus groups generated lists of items that they believed volunteers promised nonprofits for which they volunteered, and items that they believed were promised to volunteers by the nonprofits. A second wave of focus groups included both managers of volunteers and volunteers in each group. These groups further honed the lists that had been generated by the first wave of focus groups, suggesting additional items, clarifying items, and noting items that did not resonate with them.

Once these lists had been generated, we conducted pilot studies to determine which items had enough resonance with a larger volunteer community to merit inclusion in the main study. Pilot participants were asked to rate each item regarding what is to be given and received by volunteers and by the nonprofit organizations from 1 to 7 where 1=not part of the obligation and 7=very much part of the obligation. The manager of volunteers answered the same questions on behalf of the organization.

The items remaining after the focus groups and the pilot study generated two distinct lists of obligations, one that focused on the promises made by the organization to the volunteers, and the other focused on the promises made by the volunteers to the organization. The promises made to the organization by the volunteers included both behavioral and attitudinal obligations.

The behavioral obligations were centered on promises made in four areas: loyalty, work, obedience and responsibility. Volunteers promised to be loyal to the organization and to keep its confidences. In the work category, volunteers promised to work extra hours, be willing to take on extra work, to work at other locations, to find desirable work within the organization, to be willing to try new promised to conform to the organization's rules and to accept the demands of the organization that conflict with their personal preferences. Promises with regard to responsibility were to make responsible decisions, to be honest and up-front with the organization, to show up when expected, to communicate with the organization with respect to scheduling and to be reliable. Volunteers also promised to display positive mental attitudes, to maintain good social relations with others, and to be enthusiastic. Each volunteer made these promises to the organization to a greater or lesser degree.

These elements were then factor analyzed to identify which were the salient elements of the volunteer psychological contract. The factor analysis generated five terms. Communication with the organization formed a singleitem measure. Obeying the rules set down by the organization and showing up when expected formed a two-item measure (a=.6838). While these items are clearly important from the organizational perspective, they only provide marginal reliability and therefore were not included in the items tested. A third item, tapping into willingness to go to other locations, keeping organizational secrets, and accepting the demands of the organizations which conflict with personal preferences, failed to achieve sufficient reliability (a=.3350) and was not included. Likewise, a two-item measure tapping into the willingness to take a leadership position and getting information on new areas, also failed to achieve sufficient reliability to be included (a=.3962). The final set of items, focusing on professional behavior while volunteering, achieved a strong level of reliability (a=.9057).

Likewise, the promises made to the volunteers by the organizations fell into one attitudinal category and four behavioral categories: providing skills, creating an appropriate organizational context, coworkers and feedback. With respect to the attitudes that emerged from the discussions in the focus groups, organizations promised to respect volunteers' needs, and give them support with their personal problems. In the skills category of behavior, the organizations promised to

Notably none of the attitudinal elements loaded onto the final factor. These elements suggest that volunteers expect to be treated professionally with respect to the tasks at hand, but flexibly with respect to scheduling.

provide training, career development, and information on new areas. With respect to co-workers, the organization obligated itself to provide competent, reliable co-workers and to give volunteers the opportunity to work with different groups of people. The otganization also obligated itself to provide sufficient quality feedback, to provide the opportunity for the volunteer to ask questions and get clarification, to give the volunteer a sense of the meaning or purpose behind the work being done, and to appreciate the work done by the volunteer. With respect to the provision of the organizational context, the organization promised to provide the volunteet with sufficient power to accomplish the tasks as well as support for the work to be done. In that category the organization also promised to give the volunteer advanced notice of relevant organizational or policy changes, and to give the volunteer sufficient responsibility. Factor analysis of these items indicated that these elements loaded onto a single factor, comprised of six behaviors. These six items had a strong reliability score (a=.9558).

RESULTS OF THE STUDY

The items that the data indicated volunteers promise to do for the organizations for which they volunteer include: being willing to try new things, being loyal to the organization, holding a positive attitude, taking an active role in finding a niche within the organization, making responsible decisions, looking for a way to make a contribution to the organization and making work with the organization a priority. This set of terms is particularly interesting in that it indicates that while volunteers do indeed recognize that they have made promises creating obligations to the organization across all of the categories identified in the focus groups, they do not recognize every potential obligation in the category as being part of their promises to the organization. This suggests that volunteers have relatively professional expectations

for their own behavior.

With respect to the promises made by the manager of volunteers, key elements were fairness in assigning jobs, giving volunreers sufficient power to accomplish their work, giving volunteers the opportunity to ask questions and seek task clarification, being flexible in the scheduling of volunteers and respecting the needs of volunteers. Notably none of the attitudinal elements loaded onto the final factor. These elements suggest that volunteers expect to be treated professionally with respect to the tasks at hand, but flexibly with respect to scheduling.

These 13 questions represent the basic elements of the psychological contract across organizations. While each specific individual may hold any one belief more or less strongly in a particular organizational context, overall these beliefs are the most salient shapers of the way in which volunteers and nonprofits relate to each other. These elements are not the only elements of the psychological contract, however. Specific jobs within an organization will include other specific elements. However, these terms can be viewed as the basic assumptions with respect to the course of dealing between volunteer and nonprofit.

IMPLICATIONS AND CONCLUSION

The good news for organizations is the level of professionalism that volunteers expect, of themselves, and of the distribution and completion of work. The more difficult elements are those that deal with the flexibility necessary to respect the needs and interests of the volunteers. Psychological contract theory suggests that breach of the contract occurs only when one party either refuses to comply with their promises or when the understandings of the promises are incongruent (Morrison & Robinson, 1997; Robinson & Morrison, 2000). Knowing what the key terms of the contract are to both parties may pave the way for a frank, professional discussion with potential volunteers that may serve to limit breaches rooted in incongruent expectations for behavior, which in turn may lead to a stronger, more reliable volunteer cadre. While future research in this area should evaluate the ways in which incongruence in the understandings of these terms exist, simply knowing the potential sources is a giant step toward monitoring interactions with volunteers so as to shape expectations accordingly.

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Volunteerism: The Rewards and Costs Expected and Experienced

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"How far that little candle throws his beams! So shines a good deed in a naughty world." Shakespeare

For millions of Americans, volunteering is an essential element to wellness and feeling positive about one's self. By contributing a few hours a week to a good cause, volunteers often experience positive feedback that can correlate to higher self-competence and selfliking (Bosson & Swann, 1999). Ideally, through helping others, one's self-worth is elevated, and as a result, an individual can find meaningful interaction and higher status in society. This research explored the reasoning behind these "shining" examples of goodwill. The research objective of this study was to identify the rewards and costs associated with volunteering through the application of Social Exchange Theory (SET).

According to the Associated Press (2002), nearly 59 million Americans are currently volunteering. However, Independent Sector research discovered that although millions of Americans volunteer, they are "doling out their valuable hours in ever-smaller proportions" (Christian Science Monitor, December 1999). The average volunteer put in 3.5 hours per week in 1999, down nearly an hour from 1995 according to Independent Sector. Most recent statistics estimated that on average, Americans only put in about 52 hours of volunteer work during the year, according to the Bureau of Labor Statistics (Associated Press, 2002). As a result of this decrease in volunteer hours, a ripple effect is being felt by many organizations across America due to shortages of staff to handle crisis hotlines and other organization needs (Wall Street Journal,

November 1999). Therefore, with the volunteer force playing such a crucial part in the American economy, it is important that we consider the equilibrium of costs and rewards essential to motivating today's volunteers.

SOCIAL EXCHANGE THEORY (SET)

SET asserts that individuals think about their relationships in economic terms, and then they tally up the costs to compare them to the perceived rewards that are offered (West & Turner, 2000). For instance, a younger neighbor might conceive an elderly neighbor giving them a hot baked apple pie as an equal exchange (i.e. costs = rewards) for reciprocating the favor of shoveling off the elderly neighbor's snow-covered sidewalk. In sum, SET is the voluntary transference of a random object or activity from one person to another in return for other objects or activities (Roloff, 1981).

Costs are the elements of relational life that have negative value to a person (Roloff, 1981). For example, a volunteer might consider time spent as a form of cost exchanged. Rewards are considered positively valued activities or objects that meet a person's needs or reduce a personal drive. In the case of volunteering this reward could take the form of learning, love, gratitude, perceived higher status associated with giving back to the community, and an overall sense of positive spirituality (Hinck, 2000).

So what then constitutes an equitable reward or exchange? Walster, Walster, and Berscheid (1978), in their book *Equity: Theory and Research*, predicted that in the year 2000 "humans will not only have some-

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what different ideas as who is entitled to a reward; they will also have a somewhat broader notion as to what constitutes reward" (pg.259). Therefore, with the arrival of the new millennium upon us, this study sought to identify the most common costs and rewards associated with volunteering. To initiate this research the following research questions (RQ) were examined:

- RQ 1: What are the most often sought rewards associated with volunteerism?
- RQ 2: What are the most common costs associated with volunteerism?
- RQ 3: Must rewards equal or exceed costs to keep volunteers active?

METHOD

Participants

Volunteer organizations with whom the authors previously had worked were approached about participating in this volunteer research project. As a result, six different organizations that assisted hospital patients, underprivileged or at-risk youth, church related concerns, schools, and other miscellaneous services decided to take part in the study. The participants for this study were drawn from a sample population of 177 individuals from three states (Ohio, Pennsylvania and West Virginia) who actively participated as volunteers. All participants were required to have volunteered at least 3 hours a month for the past 2 months prior to the administering of the survey. Participants and the participating organization were assured anonymity.

The average number of hours volunteered per month by the participants was 26 hours with a range from 3 to 160 hours. The average length of volunteer months spent at the organizations was 38 months with a range from 2 to 180 months. The mean age of the sample was 46 with a range from 18 to 88. There were 131 women and 41 men (5 non-reports). Education levels consisted of: 6 junior high graduates, 82 high school graduates, 50 college graduates, and 33 with graduate degrees (6 non-reports). Demographic analysis also found that 60 participants were employed full-time, 24 were employed part-time, and 79 reported no employment (14 non-reports). Measurements concerning past volunteer experience found that 124 participants reported previously volunteering at another organization and 50 participants reported never volunteering before (3 non-reports).

Procedure

The surveys were distributed to the participating agencies, and the staff was trained to administer the survey under procedures in accordance with guidelines for research with human participants (American Psychological Association and the institution involved). Participants were asked to respond to the survey as if the questions pertained to the agency where the volunteer activity took place. Participants completed survey questions to help clarify the rewards and costs associated with volunteering. All surveys, upon completion, were inserted into the attached envelopes by participants and sealed to insure confidentiality.

To identify costs associated with volunteering, participants were asked, "What costs have you encountered while volunteering at this organization?" To identify rewards associated with volunteering, participants were asked, "What rewards have you gained from volunteering at this organization?" Participants also were asked to answer yes or no (and why) to "If someday the costs outweigh the rewards gained from volunteering at this organization, will you continue volunteering for this organization?" The answers then were coded, categorized, and ran through a frequency analysis.

RESULTS

Research Question One (RQ1) inquired as to what the most often sought rewards are by a volunteer. Self reported rewards were coded into 25 different categories. Frequency distribution of the 25 rewards was analyzed to identify the top 10 most commonly reported rewards (see Table 1 for complete list of rewards reported). The three most commonly identified rewards were: (1) making friends, (2) personal satisfaction, and (3) helping others.

TABLE 1

Most Often Sought Rewards in Volunteering

RankReward F		Responses
1	Making Friends	44 (25%)
2	Personal Satisfaction	29 (16%)
3	Helping Others	26 (15%)
4	Helped to Work With Others	13 (07%)
5	Learned From Working With Other	s 12 (07%)
6	Feel Better About	
	Self-Accomplishment	10 (06%)
7	Sense of Being	08 (05%)
8	Spiritual Growth	07 (04%)
8	Recognition	07 (04%)
9	Spending Time With Others	06 (03%)
9	Higher Self Esteem	06 (03%)
9	Personal Benefit- Free Services	06 (03%)
9	Getting Love From Others	06 (03%)
10	Confirmation of Career Goals	04 (02%)

Note: The first number in the response column is the number of participants who cited the reward. The second number is the percentage of respondents who cited the reward. Participants were permitted to report more than one reward.

Research Question Two (RQ2) inquired as to what are the most common costs associated with volunteering. Self reported costs were coded into 10 different categories (see Table 2 for complete list of costs reported). Frequency distribution of the 10 costs categories identified the three most commonly identified costs as: (1) none (i.e. no costs), (2) transportation expenses, and (3) time.

TABLE 2 Most Common Costs Associated with Volunteering

Rank	Cost	Responses
1	None	75 (42%)
2	Transportation Expenses	35 (20%)
3	Time	26 (15%)
4	Uniforms, Materials, etc.	10 (06%)
5	Minimal Costs	09 (05%)
6	Buying Things For The "Kids"	07 (04%)
7	Being Away From Family	06 (03%)
7	Emotional Stress	06 (03%)
9	Limits Other Activities	03 (02%)
10	Personal Safety	02 (01%)

Note: The first number in the response column is the number of participants who cited the cost. The second number is the percentage of respondents who cited the cost. Participants were permitted to report more than one cost. Research Question Three (RQ3) sought to measure if volunteers would continue to volunteer even if costs outweighed rewards. A total of 105 participants (59%) reported that they would continue volunteering even if costs outweighed rewards. In contrast, 37 participants (21%) reported that they would not continue if costs outweighed rewards. Thirty five participants (20%) chose not to answer the question. Additionally, we asked an open-ended question as to why one might continue to volunteer in spite of costs outweighing rewards. Findings on these qualitative answers will be addressed in more depth in the discussion section.

DISCUSSION

In an attempt to define what "humans" (i.e. volunteers) constitute as a reward in the new millennium, RQ1 identified 25 selfreported rewards that the participants listed in the administered survey. In this study the self-report method was necessary and considered more reliable (and less bias) than asking the volunteer participant to pick from a list of rewards defined by the researchers. By considering the findings in Table 1, one can see that the volunteer answers held many different opinions as to what forms a reward.

Just as each individual has a unique schema for interacting with others, a volunteer has a vast variety of rewards that one might perceive as a positively valued outcome from one's volunteer interactions. As one can see from reviewing the top ten rewards listed in Table 1, these rewards are altruistic (i.e., unselfish) as well as egotistic (i.e., self-centered). However, the list of rewards does lean toward supporting a more egotistic perception of the participants. "Making friends," gaining "personal satisfaction" and "recognition," and a whole host of personal spiritual/religious growth rewards, are just a few of the individualistic gains experienced by the volunteers that dominated the list of selfreported rewards. Of the 25 rewards registered in the survey, "helping others" and "helping the group meet their needs" were the only two altruistic rewards reported and identified.

Research Question Two (RQ2) sought to define the most common costs associated with volunteering. From a diverse sample of 177 participants (from numerous organizations) only 10 different costs were reported. The number one cost listed most frequently by the partici-

Yet whether it is from a higher power or an internal guilt complex that one gets a calling to become a devoted volunteer, from the findings given in this survey it would seem that many (no matter what the costs) would be unable to quit.

pants was that they experienced no costs (i.e., "none") during their volunteer experience. Social Exchange Theory would argue that there are costs in every interaction or exchange. Yet for some reason, a majority of the participants either chose to ignore the obvious costs associated with volunteering or truly felt that the exchange was not cost laden.

Nonetheless, the costs that were identified served this study well in alerting one to the most commonly associated costs experienced by volunteers. Furthermore, when considering that this sample was taken from a diverse age group of volunteers (who assisted a broad spectrum of organizations and causes), the small number of rewards and costs commonly reported by the volunteers of the different organizations is of significance when generalizing findings to volunteerism. From the findings of RQ1 (most often sought rewards) and RO2 (most common costs associated) one can see that rewards and costs associated with the volunteer experience are of an overwhelming personal nature to the individuals who donate their time and energies. However, as RQ3 (must rewards equal or exceed costs to keep volunteers active) findings suggested, the rewards do not always have to exceed the costs.

Research Question Three (RQ3) found that a majority of the volunteers in the focus sample would continue to volunteer even if costs outweighed rewards. Although 105 participants said yes to continuing in spite of higher costs exceeding rewards, and 37 said no to continuing, one must also question why 35 participants chose to ignore the question altogether. The fact that this question decisively had the highest level of non-reports makes one ponder if the subject of high costs associated with volunteering is a topic that many volunteers mentally choose not to consider. In fact, several participants avoided answering yes or no to the question and wrote "this is not an issue" or "this is something I can-

not think about at this time." The truth could be that many volunteers enter the activity knowing full well that there will be costs involved that may not ever reach equilibrium with received rewards.

"The cause is greater than the costs" is a statement that basically summarized most of the answers given to RQ3. Numerous respondents who answered yes to continuing when costs exceeded rewards provided a statement that explained one's justification for continuing in the cost laden relationship. The plethora of reasons cited by the participants is quite reflective of the large number who had no concern for high costs.

However, as one participant explained, "It is not about the costs." Another volunteer pointed out, "I love children and want to help." Statements of necessity, such as "The church has to have volunteers-it's my gift to God" or "Saving a child's life is worth more than any cost" pointed towards the apparent perception that no other alternative existed besides volunteering. "It's the right thing to do" is similar to the cognitive process of a person who knows CPR and finds it impossible to not come to the rescue in an emergency. Others reported that it was a family tradition, or an inherent condition that does not allow them to abandon their duties. Yet whether it is from a higher power or an internal guilt complex that one gets a calling to become a devoted volunteer, from the findings given in this survey it would seem that many (no matter what the costs) would be unable to quit.

Therefore, we offer four further points of advice in summary:

(1) Ask your volunteers to anonymously

provide their thoughts as to what are the rewards and costs associated with their volunteer experience at your organization.

(2) Once data is collected, assess which rewards and costs your volunteers reported most often. Identifying the most often reported responses can help a volunteer manager to better understand their staff. For example, by being cognizant of a volunteer's transportation expenses (e.g., parking costs, bus fare, high gas prices), loss of free time and of quality time with family, uniform costs, and emotional stress are important factors to consider in effective volunteer management. By figuring out affordable effective alternatives to help reduce such costs for volunteers could be quite beneficial to volunteer managers and administrators. One example might be to ask neighboring businesses for free parking for volunteers in the evening hours.

(3) By considering the most common rewards and costs perceived by the participants, organizations reliant upon a volunteer work force might be wise to consider if their volunteer program is supplying such rewards valued by the volunteer as well as minimizing reported costs most prevalent and demanding to the volunteer. By occasionally giving awards (e.g., "Most Helpful Volunteer," "Happiest Volunteer," "Outstanding Altruistic Volunteer", or an occasional gift certificate for gasoline) to volunteers, one's efforts can go a long way to helping a volunteer feel more appreciated and motivated.

(4) By being aware of the rewards and costs most commonly reported by volunteers in your organization, one can strive to keep their volunteers in the "yes-I will never quit no matter what costs come to pass" category. Furthermore, knowing what your current volunteers feel are your organization's most appreciated rewards (and most dreaded costs) can help you to attract and prepare future volunteers for a successful rewarding experience.

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Where a Bar of Soap Can Make a Difference: Family Planning Volunteers in Uganda Express Their Needs

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INTRODUCTION

Trained community-based distribution (CBD) volunteers provide contraceptives and family planning information to their fellow neighbors in numerous villages, towns and cities of the developing world. By taking safe and simple contraceptives to people within their community rather than requiring people to visit clinics for these services, CBD volunteers meet the family planning needs of those who regard clinic-based services to be too far away, too time consuming or socially and culturally inappropriate. A 1999 review of community-based family planning initiatives in sub-Saharan Africa concluded that CBD is administratively feasible in Africa and that it does indeed generate contraceptive use that would not otherwise occur (Phillips et al., 1999). This study also emphasized that CBD volunteers are ideally placed to reduce fear and misconceptions about contraceptive use, to encourage male participation, to address religious and cultural barriers to family planning and to mobilize overall community support for family planning (Simmons et al., 1988).

Acknowledging the crucial role played by volunteers in the effectiveness and overall sustainability of a CBD program, we embarked on a study to assess CBD volunteers' experiences with their CBD program in Kabarole district, western Uganda. The perceptions of active and former CBD volunteers were ascertained with the intention of incorporating these grassroots ideas and suggestions into organizational efforts to improve and expand the CBD program. As outlined above, the literature shows that volunteer motivation was the greatest challenge to sustaining CBD programs and their impact (Phillips et al., 1999; Evans et al., 1997; Population Council, 1987).

In this article, we share CBD volunteers' perceptions of factors affecting their motivation and program output, as well as their suggestions on how their efforts can be more satisfactorily facilitated. Focus group discussions with active and former CBD volunteers uncovered a preoccupation with the poverty and socioeconomic hardships and subsequent "empty bellies" of CBD volunteers. Like the clients they serve, most CBD volunteers live in poverty, are overburdened with multiple commitments and the daily struggle for survival, and are often unable to meet the basic needs of their families. Given that CBD volunteers' poverty, ensuing low motivation, directly impact program success and sustainability, we conclude that the socioeconomic context in which family planning services are received and provided must be acknowledged and be addressed by programs aiming to improve family planning and reproductive health.

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Walter Kipp has been involved in international health since 1980. He holds a MD, a MPH and a PhD in international health. He has been an Associate Professor for International Health in the Department of Public Health Sciences at the University of Alberta since 1997 and is presently teaching a course in international primary health care. He has worked for over ten years in eastern Africa (Uganda, Kenya and Sudan). He has been involved in studies on reproductive health in sub-Saharan Africa and is author and/or co-author of many publications in peer- reviewed journals.

Community-based distribution in Kabarole district

In Uganda's Kabarole district, geographical access barriers mesh with a complex web of community challenges (such as male and/or religious opposition and misconceptions and/or fears about family planning) to keep reproductive health indicators low. The average annual population growth rate is 3.3% and the Total Fertility Rate (TFR) is eight both poorer than national figures (District Health Department Kabarole, 2000). Although awareness of family planning is high, contraceptive use remains low with only about five percent of Kabarole women using modern contraceptives (Ferguson, 1998).

Recognizing that family planning services in the district were not satisfactory, the Kabarole Health Department first initiated the Kabarole CBD program in 1991. To date, there are CBD sites operating in 24 subcounties within Kabarole district. The number of CBD volunteers operating in each subcounty ranges from six to 30, with an average of 22 CBD volunteers per site. Officially, this involves over 500 CBD volunteers. However, a worrisome number of these volunteers is either partially active, completely inactive or not reporting consistently. Additionally, only a few CBD sites have volunteers reporting more than 10 client contacts per month, though the average number of households covered by a CBD volunteer is estimated to be between 40 and 80. The majority of clients are female, although the number of male clients continues to rise. The number of male CBD volunteers has also increased in recent years. At present about 40% of the active CBD volunteers are male (Baryomunsi, 2000). Both male and female CBD volunteers provide services to both male and female clients.

Family planning staff work together with local community leaders to recruit and select CBD volunteers, generally one to two per village, who then attend a two-week, non-residential, training course. Selection criteria include residence in the area to be covered, literacy (at least in the local language), ability to keep simple records, and a willingness to work as a volunteer. CBD volunteers' main duties are to provide family planning education to communities, to recruit and counsel clients, distribute contraceptives, to refer clients for other health services, and to compile and submit monthly activity reports. CBD volunteers do not receive any monetary incentives for their efforts. While they are required to attend monthly reporting meetings at the sub-county health unit, they are not regularly provided with lunch or travel allowances to do so. A few CBD groups have attempted to initiate small-scale income-generating projects, such as brick making or weaving, and some groups operate small (often sporadic) revolving loan funds.

METHODS

Four sites were selected from the 24 existing CBD program sites for this study. Based on documented information from the Kabarole Health Department, all 24 program sites were ranked according to their program performance. The sites with the highest and lowest program performance were chosen, as well as two sites that had average program performance. Selected study sites were geographically dispersed throughout the district and included semi-rural and rural areas ranging from 40 to 140 return kilometers from the town of Fort Portal, the district capital.

Four focus group discussions (FGDs), ranging from 55 to 75 minutes, took place with active CBD volunteers (n=15, 11 females) and former CBD volunteers (n=8, 5 females). The FGDs were carried out in the local Rutooro language and were facilitated by a qualified local research assistant. Pilottested interview guides consisting of probe questions were available for all FGDs. FGDs were audio recorded with permission of the participants and recordings were translated from Rutooro into English by the facilitator immediately following the FGD. These initial translations were checked for accuracy and augmented by a second translator. A trained and experienced local note-taker also kept written accounts of the discussions. The audiotapes were transcribed and entered into Microsoft Word[®]. A thematic approach to the qualitative analysis of focus groups was used, the general goal being to locate and group

together patterns and themes of program constraints and challenges faced by CBD volunteers (Rothe, 1998).

Approval for the study was received from the Health Ethics Research Board at the University of Alberta and the Ugandan Ministry of Health via the Kabarole District Director of Health Services. All study participants were assured of confidentiality, privacy and anonymity before participating and were requested to sign consent forms before participating in data collection activities.

RESULTS

When asked about the challenges faced by CBD volunteers, the overwhelming response from all participants was that they "are not properly facilitated" or they "lack facilitation." In Ugandan English, the word "facilitation" was discovered to be an all-encompassing one. When used in reference to the CBD program, facilitation was literally anything needed to ensure that CBD activities are carried out as well as anything that would make the work of the CBD volunteers easier. A common theme was discovered to run through all discussions on facilitation and motivation — a preoccupation with the poverty or socioeconomic hardships and subsequent "empty bellies" of CBD volunteers.

Not even a bar of soap

Though participants cited lack of remuneration or rewards for CBD volunteers as the major program related problem, it must be noted that very few participants referred to the need for CBD volunteers to receive actual salaries. More often, "remuneration" implied modest cash allowances for lunch or travel and non-monetary rewards or token incentives such as soap, lunch or other food items.

"You go to mobilize people, you spend the whole day and you have not eaten, you have gone hungry and you have not been given an allowance." (Former CBD volunteer, male)

"It is not that we wanted to be paid primarily but we needed some help because we are poor people, we expected some little help and we deserved some help because of the good work we were doing." (Former CBD volunteer, female)

"The main problem is that they are not properly facilitated, we have seen that it is necessary for them to have even a piece of soap for their motivation." (Local Council Leader)

In the majority of cases, the underlying basis for complaints of lack of "remuneration" appeared to be a genuine concern for the livelihoods of CBD volunteers and a keen recognition of the fact that they are poor. Like the clients they serve, most CBD volunteers live in poverty, are overburdened with multiple commitments and the daily struggle for survival, and are often unable to meet the basic needs of their families.

"To work for nothing is too much especially if you have hungry children at home." (CBD volunteer, female)

"You cannot continue working for nothing when you do not have what you need to live, you need to be facilitated." (Former CBD volunteer, female)

"You walk a lot, you walk through the village and you do not even have money to buy soaps. You are walking and you don't even have a piece of bread to eat." (CBD volunteer, female)

This lack of remuneration or compensation was also thought to contribute to the community ridicule experienced by some CBD volunteers. In villages characterized by poverty and desperation, there is often an understandable suspicion that if one is doing community work, she or he is either being "idle" and unproductive or accruing benefits, financial or otherwise. Some CBD volunteers sensed a lack of support from their husbands or other community members, and at times experienced blatant ridicule from other poor women, for their involvement in CBD volunteer work.

"Other women ridiculing the CBD volunteers, women who are busy in the fields and when she is passing by she is just laughing at you, saying 'what are you getting from that work', she thinks you have time to waste." (CBD volunteer, female)

"The other thing is that when people see you coming with the chairman (the local government leader), they think that you are 'eating money' with the chairman and yet you are not getting anything." (CBD volunteer, female)

"Spouses say to us 'you have been away all day (at the CBD monthly meeting) and you come home without even a bit of salt."" (CBD volunteer, female)

It's like chasing the sun

Low morale was evident amongst some volunteers, particularly those who had already dropped out of the program. CBD volunteers often expressed that despite their substantial efforts and time commitment, they were "disappointed" or felt they were "wasting their time". This frustration, often accompanied by a sense of failure, is suggested in the following comments:

"Distance, for example. The CBD volunteers who are supposed to be going to seminars, they walk a long distance, she stays all day, it is a waste of time, she gets no food, no money, she has no transport." (CBD volunteer, female)

"You come to the training seminar for three weeks and in that time you cannot work. And you have no time to do anything else. And this discourages you. And you say to yourself 'You have wasted your time."" (CBD volunteer, female)

"It's like chasing the sun, we are not getting anything, we are engaged in a venture where we are not going to get anything from it." (CBD volunteer, female)

CBD volunteers complained of being asked by management to express their ideas and suggestions and then never receiving any response or reaction. Although many participants acknowledged that lack of funds was a probable reason for the lack of response, a substantial number of CBD volunteers appeared to assume that this lack of interest stemmed from the fact that the CBD program relies on volunteers, not paid staff, and is therefore somehow less worthy of support and attention. Lack of feedback was taken as an indication that CBD problems and issues were not being listened to or taken seriously by program supervisors. Some pointed out that since they were "not looking for handouts", but instead were expressing their commitment to working even harder, for example, in income-generating projects, they expected feedback and were even more disappointed when it was not forthcoming. Disinterest from supervisors and management was also perceived to be the reason for the lack of follow-up after training, the lack of supervision and the lack of refresher courses to reinforce or supplement training curriculum content.

The cry for increased support for CBD volunteers and the CBD program was loud and constant, and participants offered a variety of ideas for improving the knowledge and activity of CBD volunteers (e.g. increasing training activities and refresher courses and providing more and better information, education and communication materials). However, more frequently cited were requests for increased recognition, respect and legitimacy for CBD volunteer work. CBD volunteers expressed a desire to have their perspectives considered, their issues listened to, and their ideas and suggestions entertained. They stated that honest communication, immediate feedback and better coordination between them and program managers would greatly ease their concerns and improve their sense of purpose.

"If you put those problems we have told you about under consideration then we know that the program will take off." (CBD volunteer, female)

"There should always be feedback whenever such problems are presented to people like you, like today during this research." (Former CBD volunteer, male)

Frustrated but committed

Most CBDs agreed that their work as a CBD volunteer was making a positive change to the health of families in their communities and the majority agreed that being a CBD volunteer had increased their popularity, prestige, recognition or respect. CBD volunteers, both former and active, spontaneously offered expressions of CBD volunteer commitment and recognition that their efforts have made a difference:

"We know women's problems — you produce lots of children and then you die and you produce lots of children and you cannot even have money to let them go to school. We really love to help women, we have that commitment, and the problem is that we are becoming frustrated." (CBD volunteer, female)

"What really makes me happy that I was a part of this is that I can see the benefits. Some people express their gratitude now for the wok we did back then, they are better off because of fewer children. Our work was appreciated by the community." (Former CBD volunteer, male)

Incentive schemes

When asked for suggestions on how to combat the low morale of CBD volunteers and ensure their continued participation in the program, participants requested that monthly motivation and incentives be provided to CBD volunteers. Some participants also mentioned the need to develop a system of competitions and contests so that CBD volunteers working the hardest, e.g. obtaining the most new clients in a year, would be recognized and rewarded for their efforts. Again, it was made clear that only meager, humble requests for financial support were being made.

Facilitator: "How much do you think you would like to be paid every month if it was possible?"

Participant 1: "You should just be able to earn enough to get some salt, some soap, we really are not asking for so much money but just the ability to get some things we need." (Former CBD volunteer, female)

Participant 2: "Personally I would like to have made enough money to get my lunch." (Former CBD volunteer, female)

Participant 3: "Remuneration, like being given lunch when you are on the job, when you are doing your work." (Former CBD volunteer, male)

Providing encouragement and financial support to CBD programs interested in improving their drama and drumming initiatives and income-generating activities was another solution offered by many participants. Drama and drumming was thought of as potentially serving the dual role of educating communities about family planning and generating some income for CBD volunteers. Support for income-generating activities was not limited to financial input or set-up funds but included issues of capacity building and training. This type of support was viewed as a key to increase CBD volunteer morale and ensure the sustainability of the program.

DISCUSSION

There is scarce published literature providing examples of community-based program volunteers and how their motivation can be sustained. A literature review of the databases Medline, Cinahl and Embase with keywords "community-based," "volunteer(s)," "motivation" revealed three citations from developing countries (South Africa, Indonesia and Sri Lanka) and 12 citations from developed countries. In South Africa, it was reported that the supervision for direct observed treatment (DOT) of tuberculosis was as effective when done by volunteers as when done by health staff (Dick et al., 1996). In another study the same authors found that volunteers provided a more personalized service, and concluded that volunteers can bridge the gap between TB patients and the health care system. It was also concluded that support for the volunteers was absolutely vital to the sustainability of this volunteer program (Dick et al., 1996). Research findings from Indonesia indicate that volunteers performed

considerable duties and faced numerous difficulties in the course of their volunteer activities. It was also reported that incentives played an important role in determining the motivation and the performance of volunteer cadres. The authors concluded that the first step of a better understanding of volunteer work is to know what it is like to be a volunteer (Lysack et al., 1993). Studies from North America also indicate that volunteers can be very useful and provide supportive, pragmatic and personalized services (Hiatt et al., 2000). In another study from an AIDS Hospice, continued volunteer involvement depended on the support and sense of value they received from staff and on the intensity of their experiences (Murrant et al., 1995). Other studies also found that a functional incentive and recognition schemes for volunteers are essential for their sustained involvement (Danoff et al., 1994; Christensen et al., 1999).

Our study findings agree with the literature cited above in the following ways: 1) CBD volunteers in Kabarole district feel that they make a contribution towards their communities. This has been acknowledged in informal discussions between the research team and key informants held during the implementation of the study. However, as we did not collect data on specific contributions of CBDs to the overall distribution or use of contraceptives in Kabarole, we cannot draw any definite conclusions in this regard. 2) CBD volunteers want to be recognized for their volunteer work by the health care system. As they asked for only modest incentives or remuneration (mostly in kind), this request could be granted without a lot of additional program spending, but with innovative programmatic approaches and engagement of the CBD supervisors towards the volunteers.

Some of the constraints for CBDs which we found in our study can be directly addressed by the managers of the CBD family planning program in Kabarole District: e.g. the unresponsiveness of the district health system to questions and complaints of CBDs about their work in a timely manner. A better organized supervision system with supportive (vs. authoritarian) supervision being one of the corner stones for the support of CBDs in the district could be designed and implemented in a short time. In addition, regular refresher courses for upgrading CBDs knowledge and skills can be easily organized and used for more effective interactions between supervisors and CBD volunteers.

The efforts in Kabarole to formally recognize CBDs are grossly inadequate. Lack of visible program support for the CBDs and lack of visible recognition of their activities undermines their credibility with their communities and exposes them to the ridicule of community members. Incentives can work, as shown by an example from western Kenya where in a large CBD program some 10,000 volunteers have been sustained based on recognition of their work without any regular payment (Deutsche Gesellschaft fuer Technische Zusammenarbeit, 1998). The severe resource constraints of western Uganda implies that only non-monetary incentives can and should be considered at this time. The disbursement of cash allowances, even if cash were available, would set an unsustainable precedent. Similarly, the introduction of user fees to generate cash for volunteers does not appear to be a viable option — expecting cost recovery from the economically desperate rural population would likely exclude the poorest (Price, 2000).

CONCLUSIONS

The quotes from the volunteers, their delicacy in describing the lack of program "facilitation," their perceived reactions of some members of the community (e.g. ridiculing their work), and some professional commitment to their roles — at least in helping women to avoid unwanted pregnancies provide a clear and valuable description of the realities in a rural district in Uganda. The quotes they use paint a vibrant and believable picture of CBD workers "negotiating via the researchers" for some remuneration and recognition of their work. We were impressed by the volunteers participating in our study. They deserve the full attention of family planning program managers and researchers alike to create a conducive working environment for them without further delay. This study gave voice to a group of volunteers in Kabarole district, who are saying that they cannot effectively fulfill their roles as community-based distributors of contraceptives largely because they have "empty bellies." Their urgency to meet their own basic needs (i.e. food or even a bar of soap) and the lack remuneration, rewards or recognition makes it difficult to sustain their CBD volunteer activities, despite their desire to do so.

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Bridging the Gaps: Communicative Activities of Patient Education Volunteers in an Oncology Hospital

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INTRODUCTION: Healthcare Volunteers

Volunteerism has a long and productive history in Canada (Bowen, 1997), especially in the Canadian healthcare system. Volunteers in Canada and abroad are an important resource for effective patient care in a variety of healthcare settings (Bolon, 1991), including cancer hospitals (Fusco-Karmann and Tamburini, 1994; Fusco-Karmann et al., 1996; Wares et al., 1988; Edgar et al., 1996; Halmay et al., 1995), operation room waiting areas (Bowen and Davidhizar, 1992), palliative and hospice care (Jimenez and Jimenez, 1990; Chevrier et al., 1994; Hoare and Peters, 1996; Briggs, 1987; Paradis & Usui, 1989), oncology home care (Fusco-Karmann and Tambuini, 1994), and well-women clinics (Merrell and Williams, 1999). In hospitals, peer support by volunteers can ease the anxieties of patients and facilitate their access to information and support.

This paper describes the use of volunteers in a formalized patient education program at Princess Margaret Hospital (PMH), a comprehensive care oncology hospital within the University Health Network (UHN) in Toronto Canada (Nyhof-Young et al., in press; Nyhof-Young and Catton, 2003; Jones et al., 2001). This program has made effective use of volunteers to accomplish its objective of empowering patients and family members dealing with cancer. PMH is devoted exclusively to cancer research, treatment and education. Cancer care is organized by disease site, and over 190,000 outpatient visits for diagnosis, treatment and follow-up occur annually. At PMH, we believe that volunteers can make an effective and personally fulfilling contribution to the education and support of patients and their families in an oncology hospital setting, and that volunteer activities can be crucial in empowering those dealing with cancer.

PARTNERS IN CARING: Volunteering in Princess Margaret Hospital

"To volunteer is to choose to act in recognition of a need, with an attitude of social responsibility and without concern for monetary profit, going beyond one's basic obligations" (Ellis and Noyes, 1990, p.4). In 2000, 1,197 volunteers contributed 91,348 hours to the three hospitals making up the UHN (UHN News, 2001) — the equivalent of 48 full-time jobs. At PMH, 250 volunteers link the hospital to its public, by providing a caring, personal touch in a technical medical environment (see also Bolon, 1995). The PE Program currently uses 31 of these volunteers, the largest group in any single program. Each is trained to staff the Patient and Family Library and the 17 satellite Resource Centres

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Pamela Catton, M.D., M.H.P.E., F.R.C.P.C., is a Professor in the Department of Radiation Oncology at the University of Toronto, and the director of oncology education at Princess Margaret Hospital in the University Health Network. in the clinical waiting areas (see Nyhof-Young et al., in press), where they enhance the well-being of oncology patients and family members without direct involvement in clinical acrivity (see also

Comprehensive volunteer training provides volunteers with technical and psychosocial skills to support cancer patients and their families. press). They bring a broad range of useful languages, perspectives, skills and insights to the task of bridging the gaps between the patient and the medical culture. Several volunteers are

Fusco-Karmann, and Tamburini, 1994). They provide individualized attention to address special needs — a service not easily provided by paid healthcare staff. Volunteers enrich the mandate of the hospital to provide exemplary patient care and foster excellence in healthcare delivery, research and teaching.

Communicative Activities of PE Volunteers at PMH

A key task of PE volunteers is to locate new medical ideas in a frame of reference that is familiar and intelligible to patient and family audiences (Nyhof-Young et al., in press; Nyhof-Young & Catton, 2003; Jones et al., 2001). Volunreer support focuses on the "totality of the hospital experience" in which the affective and the cognitive are inseparable (see Falk and Dierking, 1995 on volunteers in the museum setting). As facilitators in the process of information dissemination and understanding for patients, volunteers help patients manage knowledge in ways that allow them to get the information and support they need and to make better sense of their medical experiences (Jones et al., 2001). They help learners contextualize the information provided by the hospital, and in so doing can amplify the effectiveness of healthcare professionals.

Comprehensive volunteer training provides volunteers with technical and psychosocial skills to support cancer patients and their families. Volunteers are instructed on providing computer assistance to users, managing resources, and supporting patients with respect, compassion and empathy. These tasks are especially important given the hospital's multicultural milieu; close to half of Toronto residents speak a mother tongue other than English. Fortunately PE volunteers reflect the diverse cultural and linguistic backgrounds of their surroundings (Nyhof-Young et al., in cancer survivors themselves, and as a group, they have been trained to take a reactive rather than proactive role while communicating with the public. They answer visitor queries, and interact if interest is expressed, rather than initiating discussions and inviting patients to use the hospital's educational resources. From personal experience, many are sensitive to feelings of exhaustion, anxiety, and not wanting to be bothered. The experiences of volunteers as an audience for patient education, coupled with intensive training, make them very resourceful communicators.

As communicators, volunteers need to be fluent in many "languages," including:

- The languages of urban/rural patients
- The language of immigrant, native/nonnative Canadian patients
- The language of experts/novices in cancer
- The often non-verbal language of listening, support and comfort

In speaking these many languages, volunteers relate to patients and family members as everyday people with everyday lives that have been disrupted and changed by cancer.

Volunteers learn to fine-tune their interactions with patients based on their individual needs and concerns (see Hein, 1990 on the role of Explainers at the Exploratorium). For example, this volunteer recalled:

I was confronted by a very angry man... He didn't feel he was getting enough information about his illness... I had to keep backing up a little bit. I was very nervous, but then I realized there was nothing to be afraid of... Finally I said, "Your doctor is probably the one who should be answering some of these questions." "Well, [the man stormed], he isn't answering them!' [I said] I would make a list [of his questions] and make an appointment and go through the list with him....He left, and he said, "Thank you very much." I think he was actually thanking me for just listening.

Volunteers pick up the subtle (sometimes not so subtle) responses of users and change their own responses accordingly. In so doing, they relate better to spoken and unspoken needs (e.g., fear, anxiety, literacy, knowledge base, ways of learning and remembering information) in order to make patient education the most effective tool possible. Such support is especially important for less computer literate patients who are often elderly and easily deterred by anxiety and their lack of medical knowledge and computer skills.

VOLUNTEERS AND COMPUTER-BASED PATIENT EDUCATION

During training (Nyhof-Young, et al., in press), volunteers are challenged to increase the depth and breadth of information available to patients. Volunteers first learn how to use the PE computers by accessing with the Patient Education Web site, and the accompanying Oncology Interactive Education Series[™], a 23 title software series about different cancers (Jones et al., 2001). They also learn to search the Internet, evaluate Webbased information, and select from and adapt oncology resources to patient needs. Successful volunteers soon exhibit the three "C's" of comfort, confidence and creativity (Harvey and Purnell, 1995). At first they spend time simply becoming comfortable with the new technologies and resources. Then they develop confidence as they use them more extensively, and finally they become creative teachers and guides for patients and family members.

The computer can act as a catalyst for interpersonal communications with patients. For example, depending on what patients choose to access, the technology can promote dialogue about the patients' and family members' experience of cancer. The computer seems to provide a safe and neutral focus for attention when discussions about cancer are intense or personal, thereby reducing tension (JNY personal observation). Such "peripheral" communication has included ongoing, oneon-one support in clinic to a lonely and terrified immigrant woman with breast cancer. As one volunteer explained,

"My primary role is patient support. ... I will get everything from what their immediate concern is, which may be a diagnosis they received 5 minutes ago, with full blown tears, etc.... to I'm supporting my sister, and she's been diagnosed, and she has a two year old child. What should we do? What is there to read?"

Providing such support enriches the lives of everyone involved.

SUMMARY

Ellis and Noyes (1990, p.364) observe, "Friendship, freely offered, will continue to be a uniquely volunteer service." As partners in caring supplementing the work of professional staff, volunteers provide a special dimension to a complex hospital system through participation in support services and programs for patients, family, staff and friends. By providing psychosocial support, volunteers help to reduce stress, support healthcare providers and relieve patients and their families of practical problems (see also Fusco-Karmann and Tamburini, 1994). As one PE volunteer concluded, "[We] take a lot of pressure off the doctors, because otherwise patients are going to go in and unload on the doctors. And the nurses get a lot of it too. So if they can do it with one of us, it certainly takes some of the pressure off." The UHN volunteer opinion survey (VOS, 2002) indicates that volunteers recognize the importance of their role; 88% agreed or strongly agreed that they contributed to patient satisfaction and 78% agree or strongly agree that they contribute to employee satisfaction. Patient education volunteers are highly valued for the wealth of skills, energy, experience and commitment they bring to the hospital.

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Selecting and Training Staff and Volunteer Members for Leadership, Character, and Competencies

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INTRODUCTION

Leadership in the volunteer sector means strengthening individuals and communities by developing influence and forming trusting relationships. Leading others through influence and relationships inevitably involves certain competencies and personal characteristics. The selection and training of staff and volunteer members for leadership roles has always been difficult. Working in a volunteer organization can be demanding, and the skill and character level necessary for service delivery must be at least as high as in any other career sector. Furthermore, both staff and volunteer members need to be held to the same high standards and expectations. The model discussed in this article provides an effective format for the selection and training of all personnel.

THE INTEGRATED LEADERSHIP AND CHARACTER MODEL

Because effective leadership is essential to the success of nonprofit organizations, the Integrated Leadership and Character Model (Figure 1) was developed to explain the importance of character and competencies in leadership (Weis and Gantt, 2002). Three critical skill and knowledge areas (competencies) are included in the model: conceptual, technical, and human relations. These three areas were first identified by Hardy (1984). The model demonstrates the important relationship between the identified skill, and knowledge areas, and personal character.

According to the model:

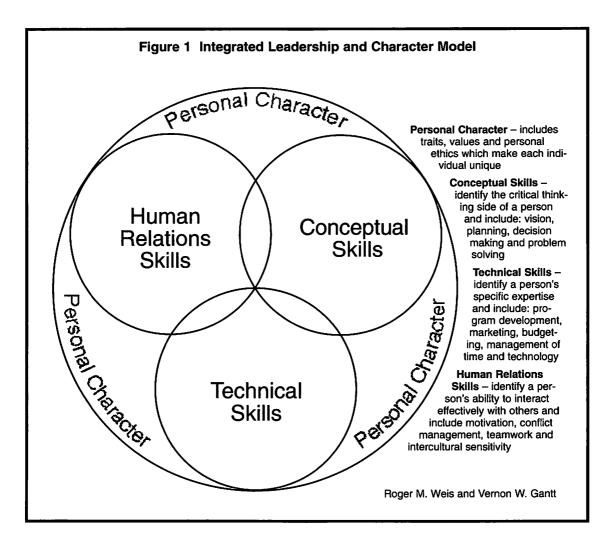
- Leaders must possess or develop an appropriate level of conceptual, technical and human relations skills;
- To be successful, organizations must have leaders with traits, values, and personal ethics (character) that are important to the overall development of the organization; and
- The interaction and effectiveness of the three skill and knowledge areas or competencies is dependent on the personal character of individual leaders within the organization.

To develop and implement effective programs in a volunteer organization a leader must have an idea of what individuals need and want *(conceptual skills)*. He or she must have competent skills in planning and implementing programs *(technical skills)*, and must be able to explain and motivate personnel members to implement the program and constituents to participate in the program *(human relations skills)*. The more determined an individual is to make the program work and the more trusted the leader *(personal*

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character), the more likely the program is to succeed. The same concept should work for any process in an organization.

INCORPORATING THE MODEL IN THE RECRUITING AND SCREENING PROCESS

Having competent staff and volunteer members with good character begins with the recruiting and screening process. The recruiting and screening process for selecting personnel should concentrate on character attributes as well as competencies. The Integrated Leadership and Character model provides a structure that allows the process to be as effective as possible. Looking at each candidate through the lens of a model like this provides a spectrum of attributes to be considered.

A volunteer administrator once said, "You can never make up for in training, what you

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didn't do in selection." The point is well taken. It is much easier to work with and develop individuals with a background of success then it is to work with someone without that background. This success may be obtained even if acquired from college internships, practicums, service learning activities, summer jobs, or some other form of experience that provides a way to realize and measure success. Careful background checks, including a thorough exploration of personal references, and effective interview processes are essential in selecting individuals with desirable attributes.

INCORPORATING THE MODEL INTO STAFF AND VOLUNTEER TRAINING AND DEVELOPMENT

Developing Conceptual Competencies

Identifying and improving the critical thinking side of staff and volunteer members is a crucial part of personnel development. Learning how to develop a vision of what can and should be within an organization; gaining skills in productive planning procedures; developing successful decision making strategies; and gaining knowledge in solving problems effectively are all key elements in staff and volunteer development.

To use an illustration, Tuckman (1965) introduced a very helpful four stage description of the typical process that small groups go through when they come together to make a decision. An organization like Big Brothers/ Big Sisters, for instance, might experience a process like this in the recruiting and screening activities for volunteers. First, they would begin to organize and plan the activities (forming). Then they might experience some frustration due to the challenging and confusing task ahead (storming). In the next stage, they would begin to move past their earlier frustrations and work closer together (norming), to the stage where they are actually implementing their decisions (performing). Leaders who are knowledgeable in Tuckman's concept can learn how to guide group members through various stages and lead them to productive decisions.

Developing Technical Competencies

Specific expertise in areas of program development, risk management, marketing, budgeting, and technology are important areas of training for staff and volunteer development. As mentioned above, critical thinking skills are important in planning, decisionmaking and problem-solving but technical skills are the key to realizing many of those visions and decisions.

Concepts from Hardy (1984), and Edginton, Ford, and Hudson (1999) in teaching program planning are examples of proven methodologies that work. An American Red Cross leader who understands that effective programs require clear objectives, specific action steps, and comprehensive risk management and marketing plans is more likely to succeed in designing projects for disaster relief or for HIV/AIDS education. Incorporating ideas from Russo (1991, 1996) and Wolf (1999) in budgeting and financial development training can be essential in the fiscal support of these programs and of the organization. Although these time honored and classic concepts for developing technical competencies work most of the time, new and better concepts emerge, so careful research of different methodologies is called for.

Developing Competencies in Human Relations

A person's ability to interact effectively with others impacts the level of achievement and success they will have. Learning how to listen to and motivate others, manage conflict, develop teams, and understand people from different backgrounds and cultures is vitally important to realizing vision and accomplishing goals.

For example, YMCA leaders who are trained in Maslow's Hierarchy of Needs can develop a motivational environment in which other staff and volunteer members can work in and have the opportunity to fulfill some basic needs for safety and security as well as some advanced needs of affiliation, self esteem, and the need to reach out and influence others. This can be an invaluable concept in training as well as in retention. Additionally, understanding and knowing how to use team building concepts developed by Zoglio (1993), and conflict management techniques proposed by Borisoff and Victor (1998) can be vital tools for personnel members to have in developing programs, budgets, or other activities associated with the operation of an organization.

Developing Character

The emphasis on character, and the development of character, can be included in organizational literature, programs, and training procedures, when appropriate. Desirable traits, values, and ethics can be encouraged like other worthwhile, professional attributes. Having character traits such as integrity and perseverance are at least as important as some of the competencies that were discussed earlier in this article. Organizations like the Association for Volunteer Administration (http://www.avaintl.org/about/vision.html) and Character Counts (http://www.charactercounts.org), a coalition of schools and community organizations working to promote values education, can provide guidelines for character development.

There is another reason an emphasis on character is important. As part of their mission, volunteer organizations often have an opportunity to assist members in becoming responsible individuals and citizens and it follows that the leaders of these organizations need to be good role models.

IMPLICATIONS OF THE MODEL

There are two implications for this model in the context of leadership in a volunteer organization:

- First, it is important to consider the model in a personal context. In other words, it provides a framework for individuals to use in order to assess, identify, and develop their own skills and character. In this sense, the model can be used as a guideline for individuals in determining their own direction for personal and professional growth. It is imperative to understand the model on the personal level prior to using it with others.
- Second, it provides a framework for leaders to incorporate in the overall selection and training of staff and volunteer members. The framework incorporated in the model, including personal character, conceptual skills, technical skills, and human relations skills, provides leaders with guidelines for recruiting and ideas for assessment and developing advanced education and training opportunities for personnel members. Assessment allows identification of what these individuals know and what they need to know and helps to determine future training needs.

CONCLUSION

Selecting staff and volunteer members for both their competencies and their character is critical and must be done with great care. Developing character and competencies in personnel can be accomplished through training which can be in the form of seminars and workshops (in-service and otherwise), conferences, classes, mentoring programs, and retreats, for example. Although a wide range of consultants are available nationwide, local college and university faculty members and even board members could have the expertise needed in a particular area, and may be available gratis.

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Governance, Leadership and Diversity: Is there a Link? Stan C. Fisher, Chrysalis, Edmonton, Canada

Could it be suggested that diversity is the one true thing we have in common? Diversity of our interests, diversity in our management style and approaches, diversity in decision making and diversity in leadership style. Sounds like the world and day-to-day reality of the volunteer administrator doesn't it? Through our diversity in this sector, we face and address common issues. How then can we build upon strengthening our work?

When asked to contribute to this edition of the AVA Journal, I asked what might be a focus for said article? It was suggested that the choice would be mine, but that some ideas and thoughts on how volunteer managers might effectively develop organizational support for their work/programs or campaigns, may be in order.

In this quest I reflected upon my professional and volunteer experiences for the content of an article to be shared with you the reader. My background includes employment in the YMCA movement, teaching and coaching at a University, working at a Municipal level in Recreation and Parks, working for a Provincial Government in several Ministries, being a "grant giver" for a lottery fund Foundation, and now in a non-government charitable organization, (a provincial society serving citizens with disabilities). All of these work experiences involved some form of volunteer management, be it with committees, provincial associations, national and international organizations, and numerous school and community volunteer organizations involving my children as they grew into adulthood.

All of this experience had elements of diversity, required understanding of broad governance principles, required an ever changing appreciation of leadership styles, and all of it required communications skills at many levels. Thus came about the title and theme of this article. This writer hopes you will gain something you can use — right now, in your work, in your own volunteer pursuits, or in your own family and/or social environment.

GOVERNANCE

Is there a link between poor performing organizations and their approach to governance? Is the behaviour of your organization costing you program money, costing your program to be overlooked, costing you commitment of people resources, and does your organization know if it's headed for trouble? It is this writer's opinion, that good governance practices can and will impact your bottom line, and good volunteer administrators are an integral part of an organization's governance structure.

Good governance practices generate good returns on investments. Does this sound like business jargon? Well it is. Volunteer organizations have been told by some entities governments included — to act more like the business sector. Well, it could also be said that the business sector should act more like the volunteer organization sector. Where else can you get the kind of output, results, and return for your input and money, than in the not-for-profit world? Volunteer administrators are infamous for "stretching a buck," but

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should not be considered cheap, nor taken for granted, nor approached condescendingly. Ask yourself where and how you sit in the governance structure and how you impact policy.

Good governance does not automatically make you rich — in the broadest context — but bad governance makes for very bad returns. It could bankrupt you — in the broadest context. At a minimum, your organization should be publicly accountable for its financial affairs, should exhibit good internal controls, and should reflect its approach to strategic planning to a broad audience. Volunteer effort within, for and associated with an organization, is a very big and valuable asset. Is that asset yielding a positive return? Is that asset being accounted for?

A volunteer administration structure and system without internal controls and strategic planning, can impact the larger whole of the organization, and will appear to be a "flighty" operation. In other words, if the organization has a strategic plan, and has good governance practices in place, the work of the volunteer administrator or the intent of the volunteer administrator's work should be reflected in that strategic plan. The volunteer administrator is increasing the asset base of that organization. You are adding value!

Further, the volunteer administrator's work plan should be reflected in the organization's strategic objectives, and vice-versa. Is this lofty idealism or pragmatic realism? Again, it is this writer's opinion that too often volunteer administrators wait until they are seen as a poor return on investment before they act and/or are criticized for inactivity. In turn, this inactivity, or perception of inactivity, impacts the governance structure. If the volunteer administrator is viewed as stagnant, non-performing, resistant to change, or entrenched, it will reverberate throughout the organization. A volunteer administrator needs to be creative, can be a change agent, should be a change agent, and should be an integral part of the governance process. Are you in

... if the organization has a strategic plan, and has good governance practices in place, the work of the volunteer administrator or the intent of the volunteer administrator's work should be reflected in that strategic plan. fact making a profit for the organization? Does this take a little bit of leadership? Read on!

LEADERSHIP

I offer three key opinions about this vast subject area. First, when performance needs to be improved, look at the leadership situation in

place. Is it yours? Is it the organizations? Or, is it endemic in the sector which you work?

Second, creating a vision is part of leadership and that also means sharing that vision with those to be impacted. Is that vision broad? Is that vision bright? Does that vision have a start and finish line in sight?

Third, excellence in leadership shouldn't be a goal — it should be the norm. Volunteer administrators sometimes need to take a little time for introspective reflection to determine if they're operating in the norm of a leadership role.

Most leaders — and in this case I'm inferring volunteer administrators — do not communicate effectively. They underestimate the importance of communications to their success and to their vision. Failure in this communication objective is usually by not being passionate enough and not unifying and inspiring the most directly impacted. By not regularly reinforcing goals and achievements attained, and not consistently sharing this "good news" information, should not be viewed as not being humble. Good results and good profits reap attention — especially amongst shareholders, stakeholders and boards of directors — that governance group.

There has been some research to conclude that coordinated, committed, rapidly responding organizations depend upon a leader's ability to communicate. Inconsistent, incomplete, unclear or uninspired leadership communications reduces the confidence of employees, colleagues, associates, and yes, volunteers. Volunteer administrators should not be bashful in their communication efforts.

Most leaders "under communicate." They too often focus on the crisis of the moment,

or revert back to the comfort zone of the work they did before the focus of the leadership position, and ignore the essential leadership communications strategies. Too often there can be a tendency to err by communicating essential messages in a superfluous manner — just touching

Whatever approach you take with your own diversity and/or respect for same, it is important that there be a clear, compelling and understandable picture of what you are trying to achieve.

the surface. This can lead to confusion amongst those whose intent it was to reach, and often results in failure to sustain commitment to the idea or initiative being presented. Is your work being recognized beyond the volunteers involved?

Every day, organizational leaders (again the inference is to volunteer organizations) face a bevy of different problems that can only be solved by one-on-one communications, including:

- Subordinates who constantly quarrel over turf.
- Fellow employees resisting new policies or procedures.
- Demoralized colleagues who cannot seem to move abead with projects.
- Associates who need advice to deal with unfamiliar problems.
- Targeted elements throughout the organizational structure.

The volunteer administrator's ability to meet these challenges with any degree of success has proven the difference between leadership success and failure. As volunteer administrators, you will be challenged to connect with and engage listeners, to make your ideas easy to understand and most of all be easily delivered. You will need to connect your content or idea, back to the organization's mission and strategic plan, and you will need to prepare intelligently. How else is the governance structure going to embrace your role, the importance of the work, and the value to the bottom line of the organization? You are value added!

Yes, you in your communications efforts will need to show how you and your work have impacted your organization to where it is today, how your activities add value to the corporate whole, and how your role and position has added to your organization's competitive advantage. You must reinforce your leadership role within the organization and for the

organization. So, how does this ensure divetsity?

DIVERSITY

It's important to understand that not everyone needs to be on the same page at the same time. But whatever approach you take with your own diversity and/or respect for same, it is important that there be a clear, compelling and understandable picture of what you are trying to achieve. Devising your own measures and techniques for assessing progress. Defining and understanding the change process and how you fit in that objective, and knowing when you are on or off track and how to get off the track at the right time are all about your approach to diversity.

The challenge to diverse decision-making and planning requires careful coordination of various parts of any organization. The view of a solution inside the organization can be quite different from the view outside of it. Every issue you manage has many sides. If you as a decision maker, with your own intuitive diversity do not frame the concept or task in the right way at the start, others will frame it for you. That in essence reflects back on the governance structure and principles, around leadership innuendoes and has to take into account diversity of interests and inputs along the way. As a volunteer administrator, do not forget rhat you have a right, and very often a responsibility to be in "the" or own "a" driver's seat.

This implies that your role is viewed in a leadership capacity. People judging you by your actions. In this same way, the governance structure of your organization is entrusted to lead, to be accountable and will have a respect for diversity. The great "influences" engage others — and that speaks for the volunteer administrator as well as the organization in which this person operates. Are you influencing the system?

Developing organizational support is knowing what you want to achieve, and then being absorbed with that purpose. If you want change to be effective, you must embrace that change. People want to be with people they can trust, and this should be reflected throughout the governance structure. Your efforts as a volunteer administrator need to be impeccable yet allow for spontaneity.

SUMMARY

Action, not caution, creates fortune. That is why this article inferred an economic aspect to governance. Volunteer administrators should be viewed as an investment in the governance and prosperity of the organization. Volunteer administrators must communicate their actions. The networks developed by volunteer administrators are paramount to success. Your leadership must and should influence others, especially policy makers at all levels. The task ahead in this sector is to have the courage to carry out a vision. We need to take action that is decisive, yet share our generosity and have resiliency and endurance to embrace success.

Make sure you understand your organization's governance structure, know the strengths of your leadership role and recognize that diversity is an asset.

Hopefully this article will help you reflect, help you in your strategic thinking, and help you elevate the importance of the value and role of the volunteer administrator.

GUIDELINES FOR SUBMITTING MANUSCRIPTS

Content

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

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

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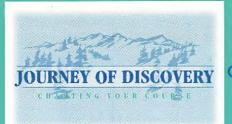
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