

CAREGIVING VOLUNTEERS: A Coming Crisis?

Susan Phillips
Carleton University

Brian R. Little
Carleton University

Laura Goodine
Carleton University



Canadian Centre for Philanthropy™
Le Centre canadien de philanthropie™



VOLUNTEER
BÉNÉVOLES
C A N A D A

CAREGIVING VOLUNTEERS: A Coming Crisis?

Susan Phillips
Carleton University

Brian R. Little
Carleton University

Laura Goodine
Carleton University

© 2002 Canadian Centre for Philanthropy

Copyright for International Year of Volunteers materials is waived for charitable and voluntary organizations for non-commercial use. All charitable and voluntary organizations are encouraged to copy and distribute any and all IYV publications.

The Community Engagement Division of Human Resources Development Canada (HRDC) provided financial support to this project. The views expressed in this publication do not necessarily reflect those of HRDC, the Canadian Centre for Philanthropy, or Volunteer Canada.

For more information on the International Year of Volunteers, visit www.nonprofitscan.ca.

Research Program
Canadian Centre for Philanthropy
425 University Avenue, Suite 600
Toronto, Ontario
Canada M5G 1T6
Tel: 416.597.2293
Fax: 416.597.2294
E-mail: ccpresearch@ccp.ca
www.ccp.ca | www.nonprofitscan.ca

ISBN# 1-55401-014-4



Canadian Centre for Philanthropy™
Le Centre canadien de philanthropie™



VOLUNTEER
BÉNÉVOLES
CANADA



CAREGIVING VOLUNTEERS: A Coming Crisis?

Introduction	2
Characteristics of caregiving volunteers	3
The committed caregiver: Patterns of volunteering	4

Why do People get Involved?	5
Motivations of caregiving volunteers	5
Recruiting caregiving volunteers	5
Caregiving is a satisfying experience	6

Conclusion: A Coming Crisis?	7
-------------------------------------	----------

References	8
-------------------	----------



CAREGIVING VOLUNTEERS: A Coming Crisis?

Caregiving Volunteers: A Coming Crisis?

Introduction

Volunteers are an integral part of the health care system, particularly in providing care and support to the elderly and disabled. They complement the work of professional staff by delivering “meals-on-wheels,” providing friendly visiting, helping with support groups for patients with Alzheimer’s, driving people to medical appointments, and undertaking a host of other assignments. Without such volunteer services, the ability of older and disabled Canadians to remain in their homes as they age, and the opportunity for respite for caring family members, would be greatly diminished.

It is evident that over the next fifteen years, the demand for volunteer services in home and community care will grow dramatically. An aging population means that there will be many more Canadians in their 70s and 80s.¹ In addition, public policy encourages people to live in their own homes as long as possible, which increases the need for both paid and volunteer caregiving services. Will there be enough volunteers available to meet the demand?

Caregiving volunteers: Characteristics and views

- Caregiving volunteers in this study were overwhelmingly female (78%), with an average age of 64. Less than half (40%) had a university or professional degree.
- They tended to be recruited later in life — in their 50s and 60s. The average caregiving volunteer had been volunteering for 12 years.
- On average, caregiving volunteers rated their satisfaction with their volunteer involvement as nine out of ten.
- Caregiving volunteers were almost equally motivated by values (e.g., a sense of duty/obligation to help others and a recognition of the need) and a desire for personal enhancement (e.g., being able to use skills and learn new ones, satisfying personal interests, and keeping busy in retirement).

In order to address this question, we need to understand the volunteering patterns, motivations, and personal characteristics of individuals currently involved in caregiving. Are they different from other volunteers? Could we expect that people who volunteer in other types of community services will be attracted to caregiving when there is a need?

This study, part of a research project undertaken for the International Year of Volunteers, reports findings from intensive interviews with 49 volunteers chosen at random from three agencies that provide home and community care services to the elderly and disabled in a major Ontario city. We call these individual “caregiving volunteers.”² The caregiving volunteers are compared to 60 individuals recruited from three organizations that work in social and youth services and from three neighbourhood associations in the same city. We call these “community volunteers.”

Characteristics of caregiving volunteers

A clear and distinctive portrait emerges of the individuals who volunteer to care for the elderly and disabled (see Table 1).

- Caregiving volunteers tend to be considerably older on average than community volunteers. The average age of the caregiving volunteers in this study was 64. The average age of the community volunteers was 42.
- Caregiving is dominated by women. Women accounted for 78% of the caregiving volunteers in this study, but only 65% of the community volunteers.
- Almost 70% of the caregiving volunteers were retired, compared to only 12% of the community sample. The caregiving volunteers who were still working (25%) tended to do so part-time, averaging 28 hours of paid work per week.
- The caregiving volunteers had less formal education than the community volunteers. Forty percent of caregiving volunteers had a university degree. By contrast, 71% of the community volunteers had a university degree. To a large extent, lower education levels reflect the older average age of caregiving volunteers, who came onto the job market at a time when a university degree was not as common a credential as it is today.
- Regardless of education level, 85% of the retired caregiving volunteer group had been in the paid labour force full-time before retirement. Considering only the women, 83% had been

in the paid labour force full-time before retirement, working almost equally in traditional female occupations (e.g. nurse, teacher or secretary) and in non-traditional female jobs (e.g., scientist, business owner).

- Approximately 28% of caregiving volunteers were also caring for an elderly, ailing or disabled family member. This was true of only 13% of community volunteers.

The committed caregiver: Patterns of volunteering

Providing assistance to the elderly and disabled is a demanding type of volunteering because it requires that people volunteer during the day and be available at regular times on an ongoing basis. Those who undertake this type of volunteering are clearly committed to it. The caregiving volunteers in our study contributed between six and 88 hours per month, for an average of 31 hours. This is somewhat less than the community volunteers, who contributed an average of 36 hours a month. Both groups, however, volunteered more than the national average of 13.5 hours (Hall, McKeown & Roberts, 2001) (see Figure 1).

¹ According to Statistics Canada, there will be a 20% increase in the number of Canadians over the age of 70 by 2016.

² For a more extensive discussion of caregiving volunteering, see Chappell (1999).

Table 1

Characteristics of caregiving and community volunteers

	Caregiving Volunteers	Community Volunteers
Average Age	64	42
Gender		
Female	78%	65%
Male	22%	35%
Employment Status		
Employed	25%	82%
Not Employed	6%	7%
Retired	69%	12%
Education		
High School	25%	5%
Some University	12%	5%
College	14%	18%
University Degree	22%	43%
Graduate Degree	20%	28%

Caregiving Volunteers: A Coming Crisis?

Male and female caregiving volunteers in this study chose very different ways of providing support. For the most part, women did the direct caring activities, such as friendly visiting and leading support groups, while men did the activities that facilitated such caring, such as driving and organizing events.

Most of the volunteers engaged in caregiving did other kinds of volunteer activities as well. In fact, caregiving volunteers tended to be involved in a greater number of volunteer activities than community volunteers (3 and 2, respectively) with office and clerical support being the second most frequent type of activity. Although diversified in their activities, caregiving volunteers tended to concentrate their time in a few agencies. Forty-seven percent volunteered with two organizations, 31% volunteered with three, 8% with four (see Figure 2).

Once people get involved in working with seniors, they tend to volunteer for a long period of time, but most have come to this type of volunteer work later in life. On average, the caregiving volunteers had been volunteering (in any type of activity) for 12 years, but the length of volunteering varies: one person had started the month before being interviewed for this study and another had volunteered for over 60 years. Over 70% of the caregiving volunteers had been volunteering for 10 years or less. These findings suggest that caring for the elderly and disabled is not a type of volunteering that begins in youth or mid-life and continues through the years. Rather, it is sought out, or people are recruited to it, later in life, when they are in their 50s and 60s. In this sense, it is strongly life-cycle related.

Figure 1

Number of volunteer hours

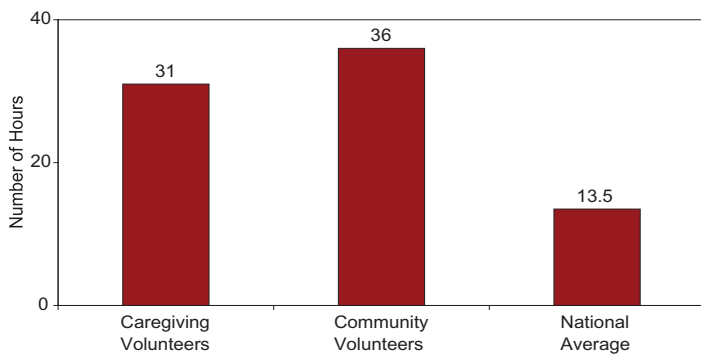
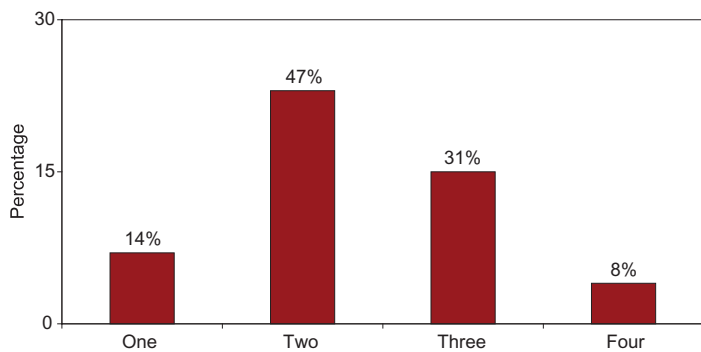


Figure 2

Number of organizations in which caregiving volunteers were involved



Why do People get Involved?

Motivations of caregiving volunteers

It might be assumed that people choose to care for others because they are naturally people-oriented. But when we explored personality differences, we found that this was not the case. In fact, those engaged in care-related activities were not more people-oriented or socially-oriented than those who joined community associations or worked with other kinds of social services. Indeed, the only significant personality difference was that caregiving volunteers were slightly less “open to experience” than were the community volunteers. This means that they were less inclined to try new things and were not driven to seek out varied experiences — a general tendency as people age.

If personality traits do not substantially predict why people undertake this type of volunteering, what does? As indicated in Figure 3, the main reasons people gave for getting involved in care-related activities were divided almost equally between values (i.e., a sense of duty/obligation to help others and a recognition of the need) and personal enhancement (i.e., being able to use skills and learn new ones, satisfying personal interests, and keeping busy in retirement).³ The social aspect of this activity was important to many volunteers, particularly those who were retired. People got involved because their friends were involved. Many people volunteered with an agency because a family member had used their services. Many noted that they got started by being invited to do one small, specialized task that drew upon their particular skills, such as singing, organizing a social event, or canvassing for funds, and then grew into being active volunteers who undertook many different assignments. Because people got involved in caregiving out of both altruism and a desire for personal enhancement, it is not surprising that these volunteers felt that the benefits they derived from volunteering accrued almost equally to others and to themselves.

Recruiting caregiving volunteers

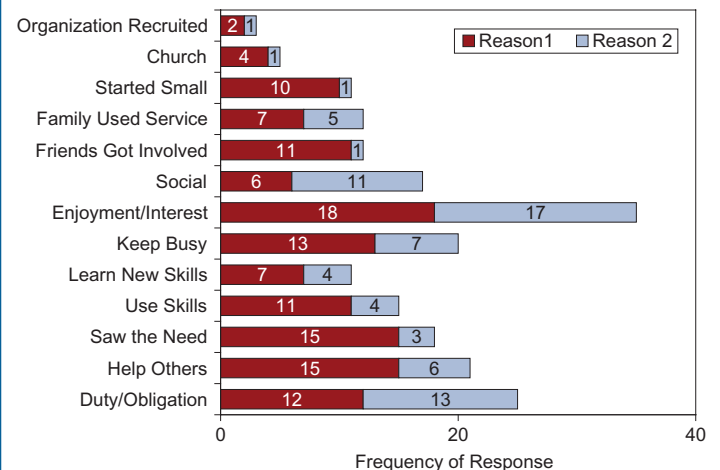
Our findings suggest that voluntary organizations that want to recruit new caregiving volunteers should:

- publicize their need for volunteers;
- connect with family and friends of clients;
- ensure that volunteers can use their existing skills and learn new ones;
- find ways to enhance the social engagement aspect of volunteering;
- involve people gradually by first asking them to make a small, short-term commitment to a particular task;
- check regularly to ensure that volunteers are comfortable and satisfied with their assignments; and,
- recognize volunteers’ contributions and ensure that they feel appreciated.

³ Individuals were asked to give the reasons for involvement in their own words and could give more than one reason. In Figure 3, the top two reasons given by the survey respondents are shown.

Figure 3

Reasons for volunteering with care-related activities



Caregiving Volunteers: A Coming Crisis?

Caregiving is a satisfying experience

Volunteers in care-related activities were very satisfied with the experience, rating their satisfaction level as an average of nine out of ten. This is slightly higher than the satisfaction rating of eight out of ten in the community volunteer group. In rating the degree of support provided and hindrance created by their voluntary organizations on a 0 to 10 scale, caregiving volunteers also felt much more supported (9.0 versus 8.2), less hindered in their work (0.6 versus 2.2) and under less pressure to take on more volunteer hours or activities (1.5 versus 3.0) than did community volunteers. This may be because most caregiving

volunteers were already contributing as many hours per month as age and health permitted, so that agencies were not pressuring them to do more.

Volunteering in caregiving also has a positive impact on overall life satisfaction, which was rated 8.5 out of 10. The caregiving volunteers in this study also reported high ratings with respect to their participation in community life (8.2), social life (8.3), home life (8.8) and with their sense of community (8.6)—all higher ratings than the comparison group.⁴ This positive effect increased over time. The more years a person spent volunteering, the greater the increase in their satisfaction with community life and the greater their sense of meaning and purpose in life.

⁴ This is true even when age is held constant.

Conclusion: A Coming Crisis?

We are experiencing the first generation of organized, publicly-supported home care that is based in the community rather than in extended families. Although they are by no means a substitute for professional staff, volunteers are a critical part of this system. Thus, how to maintain an adequate supply of committed volunteers in caregiving activities is an important public policy issue.

Volunteerism in caregiving is related to gender and life cycle. It is dominated by women and, for the most part, is taken up later in life. It is evident that the demand will not be met by squeezing more time out of existing caregiving volunteers. These volunteers are already putting in long hours and, given their average age, will likely face significant health problems themselves in the near future. The need, then, is to attract more volunteers. Attracting more and younger volunteers and more men to caregiving is likely to be difficult for several reasons.

The current group of caregiving volunteers may be distinctive as a group, or cohort, who were all born around the same time and thus experienced the same general social, economic, and cultural events. They are characterized by a strong sense of civic duty or obligation to help others that may not be replicated to the same degree in subsequent generations.⁵ They also have lower levels of education than younger age groups. When Canadians, particularly women, who are now aged 50 retire in roughly fifteen years, they may find many other things to fill their time, including travel and a wide range of other volunteering

possibilities.⁶ It is not at all clear that they will volunteer to do caregiving activities at the same rate as the current cohort of caregivers.

However, one source of good news for meeting future demand is the degree of self-interest expressed by the caregivers in this study.⁷ While they displayed a strong sense of civic duty and responded to an expressed need for volunteers to work with seniors, they were also attracted to and satisfied with caregiving because it gave them a chance to use and learn new skills and meet personal interests. This may be precisely the message that voluntary organizations need to communicate to attract the next generation of caregivers — that such volunteering involves personal growth as well as caring for others.

Neither voluntary organizations nor governments can assume, however, that an adequate supply of volunteers will be available to support the home and community care system over the next 15 years. Both a deeper understanding of volunteering in this field and active succession planning are essential.

⁵ For a discussion of patterns of volunteering and giving by different generations, see Putnam (2000).

⁶ Chambré notes that for women retiring from professional careers, volunteering is a work substitute. This means that they tend to volunteer in greater numbers than women retiring from blue-collar, service or clerical jobs, but it does not necessarily mean that they are more likely to go into caregiving activities. Indeed, professional women may be less likely to take up traditional gender roles. See Chambré (1987).

⁷ On the importance of self-benefit to retention of volunteers, see Omoto, Snyder, & Martino (2000).

Caregiving Volunteers: A Coming Crisis?

References

- Chambré, S. M. (1987). *Good deeds in old age: Volunteering by the new leisure class*. Lexington, MA: Lexington Books.
- Chappell, N. (1999). *Volunteering and healthy aging: What we know*. Ottawa: Volunteer Canada
- Hall, M., McKeown, L., & Roberts, K. (2001). *Caring Canadians, involved Canadians: Highlights from the 2000 National Survey of Giving, Volunteering and Participating (71-542XPE)*. Ottawa: Statistics Canada.
- Omoto, A., Snyder, M., & Martino, S. (2000). "Volunteerism and the life course: investigating age-related agendas for action." *Basic and applied social psychology*, 22(3), pp. 181-97.
- Putnam, R. (2000). *Bowling alone*. New York: Simon and Schuster.