

Self-Image of the Volunteer in a Hebrew Home for the Aged

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Results (of this study) indicate that various reasons for volunteering include (in rank order of importance) helping/serving others, attaining self-satisfaction, utilizing spare time, fulfilling social duty/religious obligation, obtaining experience, and social interaction. Differences in motivation based on age and on residency vs. non-residency were significant. The study indicates that volunteer work enhances self-image and that there is a positive relationship between motivation, self-image, and commitment.

Introduction

The motivation, self-image and commitment of the volunteer in an extended care facility for the aged were studied. Examining *why* the volunteer does in fact volunteer his time, as well as how he perceives himself, provides information which will enable us to systematically recruit and train more effective volunteers, maintain their involvement and sustain their on-going commitment.

It is well established in personality theory that an individual who is highly motivated and has a positive self-image is more likely to be satisfied with and committed to his work. Conversely, an individual who is committed to his work is more likely to be highly motivated and have a positive self-image. Furthermore, self-image is influenced and reinforced by how the individual and others view his role. It is the authors' hypothesis that these concepts are equally applicable to the volunteer who works without monetary compensation.

Review of the Literature

Recent literature reflects the growing awareness of the volunteer's role and

impact on society. Volunteers have emerged as a significant social and economic force due to societal expectations and demands, as well as the need for greater personalization of services.¹

Recent research on volunteer motivation indicates diverse factors which stimulate volunteer involvement. According to N. Karns, volunteers today want to improve the quality of their own lives.² They are looking for career change as well as career development, and volunteer opportunities can help them explore these goals.

Today, career exploration and skill maintenance during child-rearing years (a period of unemployment spent at home) are becoming major reasons for volunteering.³ This implies a pressing need for greater institutional commitment to the manage-

¹ L.G. Watson and J. Lewis, "The Miracle of Volunteer Leaders." In C.C. Vines & M.A. Anderson, (eds.), *Heritage Horizons: Extension's Commitment to People*. Wisconsin: 1976.

² N. Karns, "New Trends in Volunteerism." Speech presented at the Volunteer Resource Conference of the National Capital Area on June 13, 1978.

³ Watson and Lewis, *op. cit.*

ment and development of volunteer programs. In fact, Siepker, et. al. reinforce this concept. They believe a volunteer's success is enhanced by administration and staff acceptance and understanding.⁴

Motivation for volunteering is no longer strictly altruistic.⁵ In a study of female college students, K.S. Schneider found the main reasons for volunteering are self-satisfaction and feelings of empathy for the client served.⁶ Hollander and Kaplan concluded that college students elected to work as volunteer interns for purposes of personal growth and development and for career choice opportunities.⁷ T. Steiner, in a sample of male volunteers, concluded⁸ that they are most likely to volunteer their services if they receive a personal internal or external reward in the course of their work. In this manner, the volunteer simultaneously fulfills his own needs as well as those of the community. He found that volunteers also have stronger feelings of social responsibility than the general population.

Although there is a paucity of research concerning the volunteer in an institutional setting, P.D. Russem found hospital volunteers have an above average degree of

"purpose in life" and "quality of intra-family relationships."⁹ Hirsch and Linn report that volunteer helpers have significantly higher life satisfaction and a stronger will to live. They imply that it would be beneficial to encourage elderly subjects who are in reasonably good health to help others in some structured program, thereby leading to a better overall quality of life.¹⁰ According to M.G. Foley, the youth culture of our society inhibits older people from realizing that they have something unique to offer. They seem unaware that they have a valuable contribution to make and that their ability and maturity are admirable qualities.¹¹

While we can logically expect older persons who are participating members in voluntary associations to have a higher level of psychological well being,¹² the research has not been definitive in showing this. According to I. Rosow, volunteering brings together individuals with common interests, provides social interaction which meets their socio-emotional needs, and gives "purpose to a time of life that continues to be characterized as roleless."¹³ In his review of the literature, B.C. Rynerson states that self-esteem among the aged is related to feelings of usefulness . . . that social interaction is positively associated with life satisfaction.¹⁴

⁴ B.B. Siepker, L.Z. Crawford, J. Schulman and C.S. Kandas, "The Volunteer Program in the Psychiatric Division of a Children's Hospital." *Hospital and Community Psychiatry*, 1977, 28, 29, 697-699.

⁵ Watson and Lewis, *op. cit.*

⁶ K.S. Schneider, "Altruistic Behavior: The Effects of Two Experimental Conditions on Helping Behavior and Personality Correlates of this Behavior." (Ph.D. Dissertation). *Dissertation Abstracts International*, Michigan, 1975.

⁷ E. Hollander and R. Kaplan, "Student Field Experiences in Social Agencies." *Improving College and University Teaching Yearbook 1977*, 137-141.

⁸ T. Steiner, "An Investigation of Motivational Factors Operative in Pro-Social Volunteers." (Ph.D. Dissertation). *Dissertation Abstracts International*, Michigan, 1975.

⁹ P.D. Russem, "Differences in the Meaning of Life and Quality of Intrafamily Relationships of Four Selected Groups of Volunteers." (Ph.D. Dissertation). *Dissertation Abstracts International*, Michigan, 1976.

¹⁰ K. Hirsch and M.W. Linn, "How Being Helpful Helps the Elderly Helper." *Gerontologist*, 1977, 17, 75.

¹¹ M.G. Foley, "Something Wonderful Happens When R.S.V.P. Comes into a School." Ohio Commission on Aging, 1974.

¹² S.J. Cutler, "Membership in Different Types of Voluntary Associations and Psychological Well-Being," *Gerontologist* (1976), 16, 335-339.

¹³ I. Rosow, *Socialization to Old Age*. Berkeley: University of California Press, 1974.

¹⁴ B.C. Rynerson, "Need for Self-Esteem in the Aged—A Literature Review." *Journal of Psychiatric Nursing and Mental Health Services*, 1972, 10, 22-26.

Volunteering is becoming a matter of social prestige for the elderly. The volunteer role replaces lost work roles and group memberships because it is viewed as a meaningful activity by the community, provides social identity and an acceptable self-concept, offers continuity of several life roles, justifies a reason for living and reduces social loss.

Setting

The setting for this study was the Hebrew Home of Greater Washington, a 266-bed long-term care facility providing comprehensive medical and nursing care to persons over 65 years of age. The staff of the Home numbers approximately 300 employees and provide social services, occupational therapy, physical therapy, cultural activities and therapeutic recreation. Volunteers founded the Home in 1914 and continue to serve in many capacities, including fund-raising and Board membership.

During the course of a year, there are over 400 volunteers involved in providing direct services to the residents of the Home. Volunteers range in age from pre-schoolers with their mothers to individuals over 90 years of age and include resident volunteers. Approximately one-half of the volunteers are over age 60, 125 are teenagers and ten are undergraduate or graduate students. Roughly 13 percent of the volunteers are male. There is a wide range of socioeconomic status among the volunteers.

Method

Letters were distributed by the Director of Volunteers to all active volunteers, soliciting their participation in the study. Respondents remained anonymous and the completed questionnaires were deposited in the volunteer lounge. A junior volunteer assisted the elderly resident volunteers in completing the forms.

Questionnaires were distributed to 225 active volunteers. Of these, 145 were returned. The sample population consisted of 109 female respondents and 16 male respondents, ranging in age from 12 to 89 years. There were also 20 volunteers, 17 females and 3 males, ages 70-93, who were residents of the institution. (Table 1). Data was tabulated on the basis of volunteer age, sex and resident vs. non-resident status.

Volunteers were asked to respond in writing to four value questions and to state their years of experience.

To Question #1, Why do you do volunteer work?, a total of six different responses were given and the results tabulated. Their responses were: (1) help/serve others, (2) self-satisfaction, (3) utilize spare time, (4) obtain experience, (5) social duty or religious obligation and (6) social interaction.

Responses to Question #2, A volunteer is someone who is _____, were divided into two categories for purposes of analysis: (1) positive and (2) other than a positive view of the volunteer.

To Question #3, How do you think other people (family, friends, neighbors, etc.) describe volunteers?, a total of four different types of responses were given as follows: (1) people meeting their own needs, (2) people giving, sharing, (3) do-gooders and (4) don't know.

Question #4 was intended to probe the role of the volunteer as perceived by (a) the residents and (b) the staff; however, some volunteers interpreted the question to mean the resident and/or staff response to them *personally* rather than to their volunteer *roles*. Thus, for purposes of analysis, responses were categorized: (1) positive role perception, (2) positive response of others to respondents and (3) negative response.

Findings

Question #1: "Why do you do volunteer work?"

Most respondents gave more than one reason for doing volunteer work. The greatest number of responses were in the category of helping/serving others. The next most important motive was self-satisfaction. Of lesser importance was utilization of spare time and social duty/religious obligation. A limited number of respondents stated their motive for volunteering was a desire to gain experience or to socialize.

Age was a significant variable in respondents' reporting of their priorities. Both the junior volunteers and the 60-89 age group reported helping/serving others as their main motive for volunteering. The 18-59 age group indicated helping/serving and self-satisfaction as equally important primary motivators. In contrast, the resident volunteers gave the utilization of spare time as their chief motivator, with helping/serving others as second in importance.

The six different responses to Question #1 were analyzed by age. In the 60-89 age group (not including resident volunteers), 44.5% reported helping/serving others as their primary motive for volunteering, 37.8% for the junior volunteers, 24.0% for the 18-59 age group and 22.2% for the resident volunteers. A similar response pattern by age appears in the response of self-satisfaction as a motive for volunteering.

There was a direct correlation by age to the importance given duty/religious obligations as a motivational factor, with the younger volunteers ascribing little importance (5.4%) as compared to the resident volunteers (22.2%). This difference in perception was elaborated on by some of the older respondents who stated, "As Jews it is our duty to help."

Response by age to utilization of spare time as a reason for volunteering was similar to the age response pattern for social duty/religious obligation. The junior volunteers ascribed little importance (5.4%), 18-59 age group (11.1%), 60-69 age group

(7.5%), as contrasted to the resident volunteers (29.6%).

Obtaining experience was mentioned as a motivator primarily by the junior volunteers (21.6%), followed by 18-39 year old (25.9%). It was not a significant motivator for the 40-89 year olds (2.0%) and was no motivator for the resident volunteers.

Social interaction as a motive for volunteering was the highest among the resident volunteers (18.5%), and with declining importance for 18-59 year olds (9.2%), 60-89 year olds (4.2%) and junior volunteers (2.7%).

Some differences were noted in the male/female responses to Question No. 1. A larger percentage of females reported self-satisfaction as a motivator (28.5%) vs. 16.7% for the males. Another difference was that males reported utilization of spare time and social duty/religious obligation as motivators more often than females.

Question No. 2. "A volunteer is someone who is . . ."

Responses indicated that volunteers have a positive self-image. The volunteer was consistently viewed as someone who is helpful; that is, someone who cares, listens, understands, comforts, shares, gives time and service, gives of self, does things for others (including the staff), etc. Adjectives used to describe the volunteer included: unselfish, compassionate, empathetic, dedicated, patient, kind, loving, considerate, friendly, willing, reliable and active.

Ten respondents who viewed the volunteer role somewhat differently were categorized as other than positive. They stated volunteers are "receivers," "do work which needs doing but otherwise might not get done," "make use of free time," and are "people who may one day be in need of similar services." Of the ten, five commented that volunteers are people who are "not paid for their work." (Four of the five are professionals and/or currently employed and one is a male teenager looking for

work). Nine respondents did not answer the question.

Question No. 3: "How do other people (family, friends, neighbors, etc.) describe volunteers?"

One hundred-four out of 156 total responses were overwhelmingly positive. The other responses were on a continuum from indifferent to negative to no response. Respondents stated that "other people" viewed volunteers as individuals who gain satisfaction through volunteering. They see them as persons who are giving, sharing, helping. They were described as thoughtful, dedicated, noble, sacrificing, considerate people who are admired, special and valued.

Fourteen less positive responses indicated others perceived the volunteers as people who want to keep busy and do something with their spare time, and as individuals who "do not get paid for their services," are "do-gooders" or "busy-bodies."

Seven negative responses included statements that volunteers are perceived as people who are "foolish to serve without remuneration," "take jobs from others," and are "sometimes ridiculed and taken advantage of." Another said that her family felt the experience might be detrimental. Some volunteers used terms such as "jerky" and "ridiculous" to describe other people's perception of them.

Fifteen responded "I don't know" or "who cares" or expressed indifference. Of these respondents, 14 were over age 60 and one was over age 50. Of the 15 who did not respond to the question, 14 were over age 60 and one was over age 50.

Question No. 4a: "How do you think the residents of the Hebrew Home see your role as a volunteer?"

Respondents were impressively positive in their perception of how residents view them. Of these 128 positive responses, 78 described their roles as perceived by the residents in terms of friend, helper, talker,

listener, nurturer, escort, staff member and/or member of their family (e.g., mother, sister, daughter). Fifty of the respondents gave a positive personalized response, using descriptive terms rather than specifying a particular role. The residents were viewed as being "grateful," "appreciative," "happy to see us," and "loving us." It was primarily the older volunteers, 40 out of 50 of them, who give the more personalized responses, emphasizing "I" and "me."

There were eight volunteers, including six resident volunteers, who felt that the residents have negative perception of the volunteer. Their responses included statements such as: "Some don't even know what I'm doing," "Some are jealous," "Some yell at me when I come to give them their programs," "They didn't appreciate it," "They thought it was coming to them and I was their maid," "They don't say anything," and "They resent me." Three respondents did not answer the question and six said they didn't know.

Question No. 4b: "How do you think the staff of the Hebrew Home sees your role as a volunteer?"

While 111 out of 154 respondents indicated a positive staff perception of the volunteer, respondents did not feel the staff viewed them as positively as the residents viewed them. Although "staff" was not defined in Question No. 4b, some respondents specifically referred to administrators, nursing aides and dietary staff in their responses.

Seventy-six stated that staff was "appreciative" and "grateful" and that staff saw them as "useful" and "valuable." Eleven out of 20 resident volunteers reported staff "thinks highly of me," "thinks kindly of me," "respects me," and "is pleased with me."

Describing their roles as perceived by the staff in terms of "staff helpers," 27 saw themselves as "an important adjunct and

extension to staff," "a back-up person," and "relieving the work burden of an overloaded staff." Eight described their role as perceived by the staff in terms of helping the residents by "personal escorting," "running errands," "talking to the residents," and "helping with the more difficult residents."

Of the 19 responses categorized as negative, there were statements describing the volunteer as "a person who does menial chores so staff can spend more time on important things," "unappreciated," and "not utilized properly and fully." Some reported staff as perceiving the volunteer as a "threat and interference," "nuisance," "pain in the neck" and "necessary evil." Others felt staff "is slightly contemptuous of our unpaid efforts," "doesn't even know I am a volunteer," "acts as if I don't exist," "thinks I should do more," "resents me," or that "volunteer work could or should be done by trained, paid people." Most of the negative responses were given by the 30-49 year olds and the junior volunteers. No significant differences were noted by sex. There were eight respondents who did not answer Question No. 4b and 16 who answered "I don't know."

For a better understanding of the "commitment" of a volunteer to his work, we asked the respondents to state the number of years they had served as volunteers at the Hebrew Home and the number of years of service "in other organizations." Excluding the junior volunteers, whose service ranged from two weeks to three years, the 120 other respondents averaged 4.5 years at the Hebrew Home and 7.2 years with other organizations. The male volunteers averaged 3.5 years service to the Hebrew Home and 4.8 years to other organizations, slightly less than the average for the total group.

Summary and Conclusions

Our research indicated that there are varied reasons for volunteering and that

most volunteers express more than one reason for volunteering. There was a significant difference in responses based on the variables of residency vs. non-residency and the age of the volunteer. There was a less significant difference based on the variable of sex. The greatest number of responses were in the category of helping/serving others, followed by self-satisfaction. In declining importance were motives of social duty/religious obligation, utilization of spare time, obtaining experience and social interaction. The prime motivator of the resident volunteer was utilization of spare time. This is understandable since institutionalized, elderly volunteers have more leisure time to fill than non-institutionalized, active, elderly volunteers. Many of the time-consuming chores of daily living are performed for them by staff (e.g., cooking, cleaning), allowing additional hours of spare time. It is important to note that the resident volunteer, as compared to all other age groups, placed a higher value on social interaction as a reason for volunteering. This may suggest that the institutionalized elderly, who have experienced the reality of separation from friends and family, are lonely and place a higher value on social interaction than do the non-institutionalized elderly.

As stated in our hypothesis, a volunteer who is highly motivated and has a positive self-image is more likely to be committed to his work and his success at work adds to his self-image. This study indicates that the respondents have a positive self-image, a high level of self-esteem and that volunteer work reinforces their positive self-image. In their response to the questions and from their comments, the volunteers reported they they get as much or more than they give and that volunteering is a mutually rewarding and enriching experience. A repetitive theme was that as volunteers they feel useful, fulfilled and satisfied. Volunteering offers them a sense of accomplishment, pride and good feelings about

themselves and is overwhelmingly reported as being enjoyable and pleasurable. For a few, especially the younger volunteers, it is also an educational experience, an opportunity for career exploration.

Many of the older volunteers specifically expressed gratitude to the institution for allowing them "the opportunity for useful work." Someone even said, "Thank God for letting me be well enough to work," and another voiced the hope that she could continue "for many years to come." For the elderly group, volunteering serves to keep them busy and meets their social need to interact with others . . . the residents, staff and fellow volunteers. Our data supports Rynerson's conclusion that self-esteem among the aged is related to feelings of usefulness.

Our findings indicate a relationship between motivation, self-image and commitment. We used the number of years of volunteer service as an index of commitment. Indeed, we found our volunteers are committed because they averaged 4.5 years of volunteer service. The male volunteers had a lower average of service than the total group, but higher than might be expected.

There appears to be a positive relationship between self-image (Question No. 2) and the volunteer's view of how others perceive him (Questions No. 3 and No. 4). A volunteer's positive self-concept is influenced by the perception of his worth by "important others," including family, friends and neighbors as well as the residents and staff of the institution. In fact, some volunteers expressed a negative opinion of people who do not do volunteer work.

For many of the older volunteers, particularly the resident volunteers, it appears that their self-image was less influenced by how "others" perceive them. Indeed, many told us, "I don't know," "I don't care," "you go ask them if you think it's important to know," or they did not answer the question.

The volunteers' perceptions of how staff viewed them (as compared to family, friends, neighbors and residents of the institution) produced the most negative comments, although few in number. Some volunteers reported that staff viewed them with envy, fear, jealousy and/or annoyance. These negative responses were made primarily by the 30-49 year olds and the junior volunteers, who might be perceived by the staff as a threat to their job security.

Implications and Recommendations

The data suggest major implications for recruiting volunteers in an institutional setting for the Jewish aged. A clearer understanding of why volunteers do, in fact, volunteer their time is a valuable recruitment tool. Many of the insights gained in this study may be applicable to other institutions and agencies that utilize volunteers, including hospitals and institutions for the retarded. For example, in recruiting the junior volunteer, an appeal can be made on two levels—to help/serve others and on the basis that valuable education and work experience can be obtained through volunteering. In the 18-89 age group, the recruitment process is to match assignments to their need to help/serve others and to gain self-satisfaction. On the other hand, for the resident volunteers, an appeal can be made to their need to utilize spare time, their sense of religious and social duty and to their desire to help/serve others. It is worth noting that for the elderly volunteer, religion and social duty are very important factors, whereas for the younger volunteer, this is not a motivator. Rather, it is career exploration and skill maintenance which motivate the younger volunteer as well as helping/serving others.

For greater effectiveness in recruiting volunteers and maintaining their involvement, the volunteer coordinator should tell volunteers that their work is important, that they are indeed helping others and that

it is all right to find their work self-satisfying. In interviewing potential volunteers, the volunteer coordinator might use the six general motivation responses delineated in this study. This would offer a clue as to the appropriateness of motive so that those unsuited for volunteer work might be more effectively screened out; e.g., an individual who expresses a desire to volunteer because her doctor said she would feel better "If I see people less fortunate than myself." This awareness of volunteer needs and motives allows the interviewer to utilize volunteer services more effectively.

A pervasive theme throughout the questionnaire responses was the volunteer's need to be needed and the desire for others to recognize this need. Volunteers want to be told that their service is important and recognized. This kind of positive feedback then becomes a major responsibility of the staff person who serves as the volunteer coordinator. Positive reinforcement to the volunteer is a responsibility of all institutional staff. Effective lines of communication are essential between the staff and volunteers; however, both staff and volunteers must understand that the volunteer

role is to supplement, not supplant, the staff.

The finding that the prime motivation for the resident volunteer is the utilization of spare time is particularly relevant to the social service, recreation and nursing staff. The mental health advantages and possibilities for meaningful service by elderly institutionalized persons should provide an impetus for expanding volunteer roles for the aged in an institutional setting.

Additional research is needed to determine staff attitudes toward volunteers. Such a study, in itself, would be consciousness-raising and could enhance a more positive staff attitude. It might also serve as a catalyst for staff in-service training programs involving volunteer utilization.

The growing awareness by professionals that they alone cannot meet the increasing client needs highlights the importance of recruitment and the proper utilization of volunteers in order to build a more effective working team. Furthermore, because of the increasing number of senior citizens in our society, the utilization of their potential as volunteers is an additional challenge.