Benefits and Challenges to People with Psychiatric Disabilities Who Volunteer

Agnes Meinhard

Centre for Voluntary Sector Studies, Ryerson University

Itay Greenspan

School of Social Policy and Practice, University of Pennsylvania

Jennifer Paterson

School of Disability Studies, York University

Phaedra Livingstone

Centre for Voluntary Sector Studies, Ryerson University

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350 Victoria Street

Toronto, Ontario M5B 2K3

Tel: 416-979-5146 x 6739 / Fax: 416-979-5124

cvss@ryerson.ca

http://www.ryerson.ca/cvss/working_papers

Introduction¹

This research follows from the research reported in CVSS Working Paper Series, Volume 2007 (2). In that paper we presented the results of our examination of volunteer programs in ten organizations serving people with psychiatric disabilities². We described the nature of the programs, identified best practices and discussed the challenges and benefits they presented. This paper focuses on the responses of 27 people with psychiatric disabilities to a questionnaire probing their volunteering experiences. Please refer to the previous CVSS Working Paper titled “Client Volunteering in Organizations Serving Individuals with Psychiatric Disabilities” for a detailed review of the literature. Here we will briefly summarize the major thrust of the literature review.

In recent decades, the mental health systems in Canada and the U.S. have moved through a significant paradigm shift in the treatment of mental illness. A combination of medication treatment and the development of community-based rehabilitation programs shifted the focus of care from hospitals and institutions to the community in a process identified as deinstitutionalization of the mental health system (Roehrer Institute, 1990, 1999; Stroman, 2003). Consequently, community vocational rehabilitation programs for skills building and job training, such as consumer/survivor-run businesses and Assertive Community Treatment (ASTs), have been on the rise. Earlier research pointed out that the change from institutions to the community has had a positive influence on the lives of people with mental illness, their families, and caregivers (Becker & Drake, 2003; Goering, 2004). Clients experienced an improvement in their daily living and a reduction in symptoms and substance abuse; they were also subject to fewer crisis episodes and spent far fewer days in hospital.

Client-volunteering programs in mental health services are a relatively new development in integrating people with psychiatric disabilities into society (Cook & Pickett, 1994; Firth & Kerfoot, 1997; Weaver, 1993). Research indicates that there are several different types of organizations providing volunteer opportunities for people with psychiatric disabilities: educational institutions, job placement organizations, supportive housing agencies, clinics, rehabilitation centres and drop-in centres. In some of these organizations, volunteering is part of a formal program, whereas in others, it is more informal but definitely encouraged and supported. Some organizations provide in-house opportunities to volunteer, while others encourage, support or arrange volunteering with outside agencies (Meinhard et al., 2006). In some of these programs volunteering is seen as a stepping-stone towards finding a permanent job; in others volunteering is part of rehabilitation and personal recovery, or a means for community and social integration, but not as a route to gainful employment.

Although society-at-large generally views volunteering in a positive manner, some of society's disadvantaged members may see it as a less than desirable alternative to paid

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² For the purpose of this paper, the terms psychiatric disability, client, consumer, survivor, volunteer and participant are used interchangeably, reflecting the diversity of terms used in the interviews we conducted. In the literature, there is much debate over definitions and terminology such as mental versus psychiatric and impairment, illness or disability. Some people who have experienced the mental health system self-define as a ‘consumer’ or ‘survivor’.

employment (Crawford, 2004). According to the Canadian Council on Social Development, three times as many disabled men and twice as many disabled women were out of work in 2000 than their non-disabled peers. As people with psychiatric disabilities typically experience significant barriers to obtaining paid employment, for some there is a stigma associated with volunteering.

Given this ambivalence towards volunteering, we are surveying volunteers with psychiatric disabilities in order to understand their opinions and experiences. The survey questionnaire consists of 24 questions, some with close-ended choices and others with open-ended answers. Questions cover topics such as type of placement, volunteer tasks, length of time at placement, frequency of volunteering, support and training, helpfulness of support, enjoyment of tasks, effects of volunteering on personal well-being and job prospects, attitudes about volunteering and work, and their suggestions for improving volunteer programs.

Methods

In order to address the lack of research on volunteering among people with psychiatric disabilities, we studied ten volunteering programs in the Greater Toronto Area. At last year's Arnova conference we described the volunteer programs offered to people with psychiatric disabilities in these ten organizations. In this paper, we evaluate the impact of volunteering, as reported by the volunteers, on their general well-being and their integration into community.

Sample

Our sample is by necessity, a purposive sample attained through advertising at the ten centres that we studied. Advertisements explaining the research were distributed to prospective respondents by the volunteer coordinators we interviewed. They were also tacked to bulletin boards frequented by the client volunteers. The ads explained the purpose and nature of the research, the time it would take to complete a telephone interview, and the telephone number to call in order to participate. Prominently displayed on the ad was the promise of a reward of a \$10 coupon to Tim Horton's, Canada's most popular coffee and doughnut shop, to everyone who completed the oral survey. Thirty people called and we obtained 27 completed interviews.

Questionnaire

The questionnaire probed six aspects of their volunteering experience:

- The nature, frequency, place and length of volunteering
- Reasons for volunteering
- Kinds of supports and training offered to the volunteer
- Volunteering experiences: what they learned, what was frustrating/satisfying
- Impact of their volunteering on their health and well-being, their job prospects and their connection to community
- Suggestions for program features: "If someone wanted to set up a volunteer program for people with psychiatric disabilities, what would you suggest is necessary to create a successful volunteer program?"

Before beginning the telephone interview, we read out the terms of informed consent required by Ryerson's Ethical Review Board.

Analysis

There were 24 questions on the questionnaire. Two required answers according to a five-point Likert scale; these were the only two questions in which the interviewer read the answer categories to the respondent. All the other questions were asked without providing answer categories, even the yes/no questions. Responses to the open-ended questions were analyzed, and then categorized.

Findings

Nature of Volunteering

Our respondents were all clients of organizations that provided services for people with psychiatric disabilities. Since close to 40% of our respondents had more than one volunteer placements, we recorded 53 volunteering activities that correspond to the twelve categories listed in Table 1.

Table 1. Types and location of volunteer activities.

Activities	Frequency	%	In-house	%	Outside	%
Food/cafeteria	8	15.1	6	75	2	25
Religious activities/ Church	7	13.2	0	0	7	100
Clerical	7	13.2	4	57.1	3	42.9
Cleaning duties	6	11.3	6	100	0	0
Misc. (fundraising, customer service, rallies)	6	11.3	3	50	3	50
Board/committee work	4	7.5	4	100	0	0
Newsletter/writing	3	5.6	3	100	0	0
Tutoring/teaching assistant	3	5.6	1	33.3	2	66.7
Volunteering at drop-in centre	3	5.6	3	100	0	0
Shopping	2	3.7	2	100	0	0
Working with older people	2	3.7	0	0	2	100

Special events	2	3.7	2	100	0	0
		7				
Total	53	100	34	64.	19	35.
				2		8

Almost two thirds of the volunteering took place in-house (in the organization that the respondent was affiliated with) and much of that revolved around cleaning in the common areas and food preparation in the organization's cafeteria.

For slightly more than one third of the respondents, the current volunteer placement was their first. The range of experience varied widely, from one month to 20 years. The average number of years of volunteering experience was 6.2, but the median, which in this case is a more accurate indicator, was only 3.2 years. Seventy percent of respondents volunteered weekly, 62% at the same time each week. Twenty-four percent volunteered monthly, mostly at different times a month. One client volunteered twice a month and another episodically. The median weekly hours spent volunteering was six hours (mean=12hours), but the range was very broad, from one hour a month to 40 hours a week.

Reasons for volunteering

Our respondents volunteered for a variety of reasons, as listed in Table 2. The predominant reasons relate to their isolation from general society: More than half our respondents volunteer to meet with people and to get out of house. Helping others and giving back to the community, the top reasons given by volunteers in general (NSGVP), although still important to this group of respondents, are less frequently mentioned together accounting for 40% of the responses. (In some instances, "community" referred to the supportive housing unit in which the respondents live, or the community of psychiatrically disabled. In other instances, "community" refers to the immediate geographical the area in which they live.) Six reasons (highlighted in Table 2) out of sixteen seem to be related in some way to the stigma of their mental illness. They account for 50% of all reasons mentioned.

Table 2. Reasons for volunteering

Reasons	Frequency	% of responses	% of respondents
Opportunities to meet with people	8	14.5	28.6
Reason to get out of the house	7	12.7	25
Help others	7	12.7	25
Have ideas respected	5	9.09	17.9
Involvement in/giving back to community	4	7.27	14.3
Satisfaction	4	7.27	14.3
Offers creative expression	3	5.45	10.7
Honorarium/metro-pass	3	5.45	10.7
Enjoy learning	3	5.45	10.7
Confidence building	3	5.45	10.7

Help organize	2	3.64	7.14
Instead of work	2	3.64	7.14
Social action	1	1.82	3.57
Only job offered	1	1.82	3.57
Can't donate, give time instead	1	1.82	3.57
“Economy of the heart is greater than money”	1	1.82	3.57
Total	55	100	196

Support and training

Seventy-seven percent of our respondents got support and/or training at their volunteer placements: 40% had orientation and training, 27% got general help, 20% were under regular supervision, and 13% learned from volunteers. Eighty percent thought the support they received was very helpful; the remainder thought it was somewhat helpful.

Current volunteering experiences

Just under two-thirds (64%) of the respondents experienced no difficulties in their placement, however among the remaining third, 40% had problems adjusting to staff members and 30% had trouble learning new skills. Table 3 presents the full list of difficulties mentioned.

Table 3. Difficulties experienced in current volunteer placement

	Frequency	% of respondents
None	18	64
Some	10	36
Areas of difficulty		% of respondents w/difficulty
Adjusting to staff members	4	40
Learning new skills	3	30
Lack of routine	2	20
Adjusting to schedules/time of meeting	2	20
Physical demands	2	20
Self esteem issues	1	10
Communication issues	1	10
Lack of cohesion	1	10
	16	150

Eighty percent of the respondents claimed they enjoyed volunteering very much, 15% enjoyed it somewhat and 5% qualified it by saying that sometimes they enjoyed it but sometimes they did not. Table 4 lists the reasons they gave for their enjoyment. Unlike their motivations for

volunteering, the predominant reason given for enjoying their volunteer placement was that it provided them with an opportunity to “give back” to the community and help others (32%). Interacting with others was mentioned by 21% of respondents. Almost all of the other reasons, however, related to their own sense of well being.

Table 4. Reasons for enjoying volunteering.

Reasons	Frequency	% of responses	% of respondents
Give back to community/help others	9	24.3	32.1
Interaction with others	6	16.2	21.4
Sense of accomplishment	6	16.2	21.4
Get out of the house/good use of time	5	13.5	17.9
Like the work	4	10.8	14.3
Better appreciate self	3	8.11	10.7
Keeps mind and body active	1	2.7	3.57
Escape stigma of mental illness	1	2.7	3.57
Passion for volunteering	1	2.7	3.57
Staff	1	2.7	3.57
Total	37	100	132

The most rewarding aspects of volunteering were also helping people and the community followed by socializing and working with others. However, several respondents mentioned the rewards of learning new things and seeing the impact of their volunteering on others.

Table 5. The most rewarding aspects of volunteering

Aspects	Frequency	% of responses	% of respondents
Helping people and the community	9	28.1	32.1
Socialization/working with others	7	21.9	25
Learning new things	4	12.5	14.3
Increased self confidence/self-esteem	4	12.5	14.3
Every aspect	4	12.5	14.3
Seeing results and impact on others	2	6.25	7.14
Working with staff	1	3.13	3.57
Freedom	1	3.13	3.57
Total	32	100	114

Not all experiences were rewarding however. The most frequently mentioned irritant related to volunteering was conflict followed by a sense of under-appreciation and a lack of challenge. For a complete list please see Table 6.

Table 6. Least rewarding aspects of volunteering

Aspects	Frequency	% of responses	% of respondents
Conflicts	6	33.3	21.4
Under Appreciation	3	16.7	10.7
Lack of challenge	2	11.1	7.14
Doing things no one else will do	2	11.1	7.14
Not knowing the full impact of efforts	1	5.56	3.57
Wasted time	1	5.56	3.57
Location	1	5.56	3.57
Paperwork	1	5.56	3.57
Insufficient staffing	1	5.56	3.57
Total	18	100	64.3

When asked about the personal gains they got from volunteering, our respondents focused more on internal gains, related to feelings, rather than to gains related to skills or social networking. The three most frequently mentioned personal gains were: a sense of accomplishment, a good feeling and increased confidence, self-esteem and/or empowerment. These accounted for almost half of all the gains mentioned. Skill acquisition accounted for 17% and four people claimed that volunteering gave them a reason for living or saved their lives. See Table 7.

Sixty percent of the respondents indicated that they would like to volunteer more, but could not because they had too many other things to do and had no time (50%), or they were in poor health or could not find placements. One respondent said it was to keep options open for paid work. Of those who had no desire to volunteer more, half found it too stressful, could not handle more or were in poor health and the other half wanted to do other things in life including waiting for paid work.

Close to 70% of the respondents felt that there were no disadvantages to volunteering. The remainder cited lack of remuneration (N=3), burnout and lack of challenge (N=2), too much work, physically demanding and being “taken advantage of” (N=1 each).

Table 7. Personal gain from volunteering

Personal gain	Frequency	% of responses	% of respondents
Sense of accomplishment	7	17.9	25
A good feeling	6	15.4	21.4
Increased confidence/self-esteem/empowerment	6	15.4	21.4
Keeping busy	4	10.3	14.3
Reason for living/saved life	4	10.3	14.3
Met new people	4	10.3	14.3
Gained skills, helped get paid position	3	7.69	10.7
Learned new things	2	5.13	7.14
Learned patience	1	2.56	3.57

Leadership skills	1	2.56	3.57
Kept abreast of community affairs	1	2.56	3.57
	39	100	139

Impact of volunteering

Since there are consumer survivors and professional workers who are against client-volunteering, claiming that the work done through volunteering should be paid, we asked our respondents whether volunteering has affected their prospects for getting paid work. Fifty-seven percent did not think so. The remaining respondents who did say that volunteering had an impact, pointed to positive reasons. They felt the skills they acquired while volunteering would give them better job prospects. One person said that he found a paid job through volunteering. When asked whether volunteering had an impact on their community connectedness, 85% of respondents said yes because working with, being with and helping others gave them a sense of connectedness.

We also asked whether volunteering had any impact on their mental and physical well-being. Almost half of the respondents said they felt better about themselves, had more pride and self-esteem. Another third talked about peace of mind and acceptance of their illness. Twenty-nine percent claimed an improvement in the quality of their lives. Table 8 lists all the ways in which volunteering affected their well-being.

Table 8. Effect of volunteering on well-being

Effect	Frequency	% of responses	% of respondents
Feel better about self/pride/self-esteem	13	29.5	46.4
Peace of mind/better spirit/more accepting of mental illness	9	20.5	32.1
Improved quality of life	8	18.2	28.6
Personal support/satisfaction	5	11.4	17.9
Working with others	4	9.09	14.3
More interested in work/things	2	4.55	7.14
Better grades	1	2.27	3.57
No effect	2	4.55	7.14
	44	100	157

Our final question asked the respondents: “If someone wanted to set up a volunteer program for people with psychiatric disabilities, what would you suggest is necessary to create a successful volunteer program?” Table 9 lists their suggestions. By far the most important feature for a successful program was related to support and supervision, followed by a variety of interesting activities.

Table 9. Suggested features for a good volunteer program.

Suggestions	Frequency	% of responses	% or respondents
Support/supervision/training/feedback/appreciation	7	30.4	25
Variety and interesting activities to match skills and talent	4	17.4	14.3
Flexibility	2	8.7	7.14
Clearly defined rules and expectations	2	8.7	7.14
Financial appreciation/honorarium/transit costs	2	8.7	7.14
Treat as equals, not as mentally ill	2	8.7	7.14
Provide opportunities for group activities to meet friends	2	8.7	7.14
Start locally	1	4.35	3.57
Educate people about mental illness	1	4.35	3.57
Total	23	100	82.1

Discussion and conclusions

Although volunteering is generally viewed in a positive manner, this is not always true for people with disabilities. In fact, for some people there is a stigma associated with volunteering. People with disabilities typically experience significant barriers to obtaining paid employment. This persists, even though in recent years a number of training and employment initiatives have been instituted to support people with disabilities in obtaining and keeping paid jobs. According to the Canadian Council on Social Development, in the year 2000, 46.7% of women and 36.5% of men with disabilities were not gainfully employed. This stands in stark contrast to the general, non-disabled population, where only 22.5% of non-disabled women and 12.8% of non-disabled men were unemployed. Thus, three times as many disabled men and twice as many disabled women were out of work than their non-disabled peers. For disabled people who want to work, having to resort to volunteering can indeed be perceived as a stigma.

This was not evident, however, in our sample of respondents, where only one person felt being taken advantage of. Nevertheless, it is important to note a limitation of this study. Our sample is a purposive one where volunteers volunteered to talk to us about their experiences. They either lived in supportive housing that offered volunteer opportunities, or were affiliated with an agency, or day club or drop in centre serving people with psychiatric disabilities. We were unable to reach people who were volunteering outside these settings. Nor were we able to reach consumer survivors who were not volunteering for whatever reasons.

The data from our limited sample clearly indicate that among our respondents volunteering is a positive experience, providing them with opportunities to get out of the house, socialize, learn new things, and while doing all this, also help others and give something back to the community. Our respondents also reported that volunteering had positive benefits on their mental health. In fact, the benefits of volunteering are expressed in answers to several of our questions. It is important to note that the findings reported in this paper are based on open-ended answers to questions about volunteering. The answers therefore, reflect the immediate and

unprompted feelings of the respondents. The consistency of the answers to questions probing different aspects of the volunteering experience serves to reinforce the strength of these feelings and opinions.

Our respondents reported very few disadvantages to volunteering or difficulties in their placements. The difficulties they reported were related to adjustment problems and to learning new skills. Both the benefits and the difficulties they reported closely parallel the benefits and personal barriers reported by our expert key informants in the first phase of this study, reported at last year's Arnova conference.

In conclusion, despite some concerns that volunteering may be an unfair replacement to for paid work, our sample of respondents felt that volunteering was beneficial to them in many ways. This reflected the opinions of the expert key informants interviewed in Phase 1 of this study.

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