

VOLUNTEERS IN FORMAL LONG TERM CARE SETTINGS IN ENGLAND

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Volunteering and LTC: an historical relationship

- Religious & philanthropic efforts
- The earliest charities were in education and social care
 - St John's hospital founded in AD 939 for the care of the old and infirm
- Continuum change in the nature of relationship between charity/voluntary sector and the state
- Particularly in relation to evolved welfare state since the WWII
 - Welfare became a citizen's right
- Major redefinition of the role of charity

Rediscovery of volunteering and LTC

- Further development of mixed welfare economy
- Policy aspiration ‘Big Society’
- Financial austerity and public funding cuts
 - Calls to maximise volunteers’ potential
- Potential benefits of enhanced social capital and civic engagement
 - for volunteers, LTC sector and wider society
- Increasing role of charities, community organisations and social enterprises in delivering public services
 - Recent policy developments of mutuals and social work practices

Volunteers' conceptual value in LTC sector

- Variable role definition and impact
- Volunteering in formal settings is 'highly active' and demanding form of civic engagement
- Volunteers need recognition and 'freedom' of activities to benefit from their civic engagement
- Changing structure of voluntary organisations from grass-root activism to professional delivery of complex services may impact choice and participation

Empirical evidence of volunteers' contribution and role in LTC

- Based on large workforce national data, an 'elected' sample of 7,534 volunteers within 769,186 records
 - Completed by employers, identifying volunteers within their workforce
 - Providing personal, job, organisational and local characteristics
 - Linked to local area profile including rurality, unemployment and deprivation levels
- Analysis' aims
 - Investigate prevalence of volunteers in the formal LTC sector
 - Map volunteers' profile in comparison to 'paid' formal LTC workforce
 - Identify the relationships between volunteering and individual (micro), organisational (meso) and local area (macro) characteristics

Volunteers' activities in LTC settings

- An average of 1% of total workforce
- A considerable group of employers (84% of employer sample) reported 'no' volunteers contribute to their service delivery
- Organisations with at least one volunteer were almost equally divided between the voluntary and the private sector
- Voluntary organisations more likely to have larger numbers of volunteers
- Volunteers are more present in day care and adult community care settings

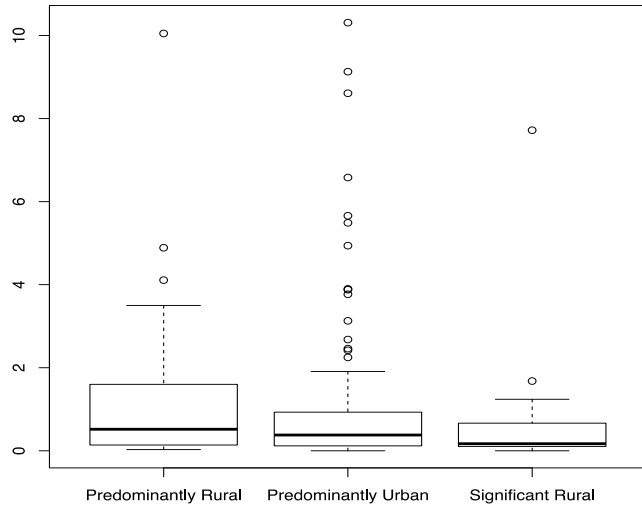
Service setting	Number of volunteers	Distribution of volunteers	Total number of workers	Prevalence of volunteers
Residential care	1,212	19.0%	386,919	0.3%
Day care	1,350	21.2%	22,254	6.1%
Domiciliary care	725	11.4%	225,770	0.3%
Community care	3,091	48.5%	69,350	4.5%
Total	6,378	100.0%	704,293	0.9%

Sector of LTC organisation	Number of volunteers	Distribution of volunteers	Total number of workers	Prevalence of volunteers
Public sector	315	4.2%	129,037	0.2%
Private	665	8.8%	472,229	0.1%
Voluntary	6,548	87.0%	166,794	3.9%
Total	7,528	100.0%	768,060	1.0%

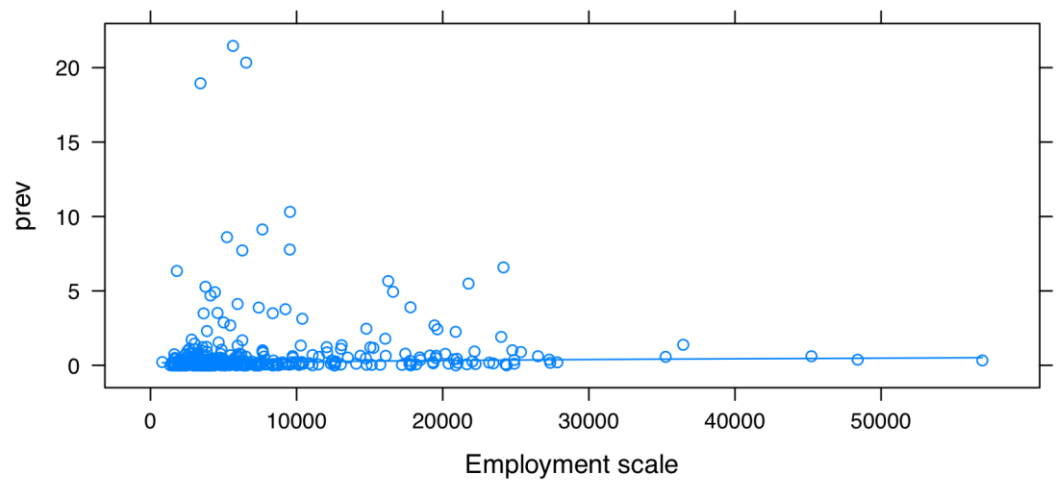
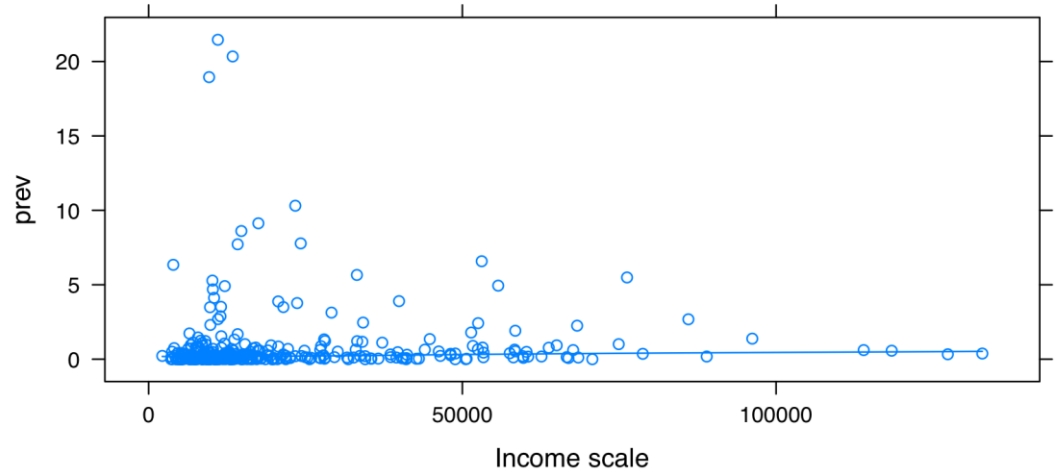
Organisation & Local area characteristics and volunteering

- Volunteers appeared to be more attracted to small to medium sized organisations
- Volunteers tend to be more present in organisations providing services to carers (older people or adults) and users on the autistic spectrum disorder
- Higher prevalence of volunteers in the North West and North East of England, West Midlands and London
- Volunteers are more present in predominantly rural areas than predominantly urban areas
- No significant, but tentative, association between prevalence of volunteering and poverty or unemployment levels

Box-plot of the distribution of volunteers' prevalence at CSSR level by level or area rurality, NMDS-SC December 2010



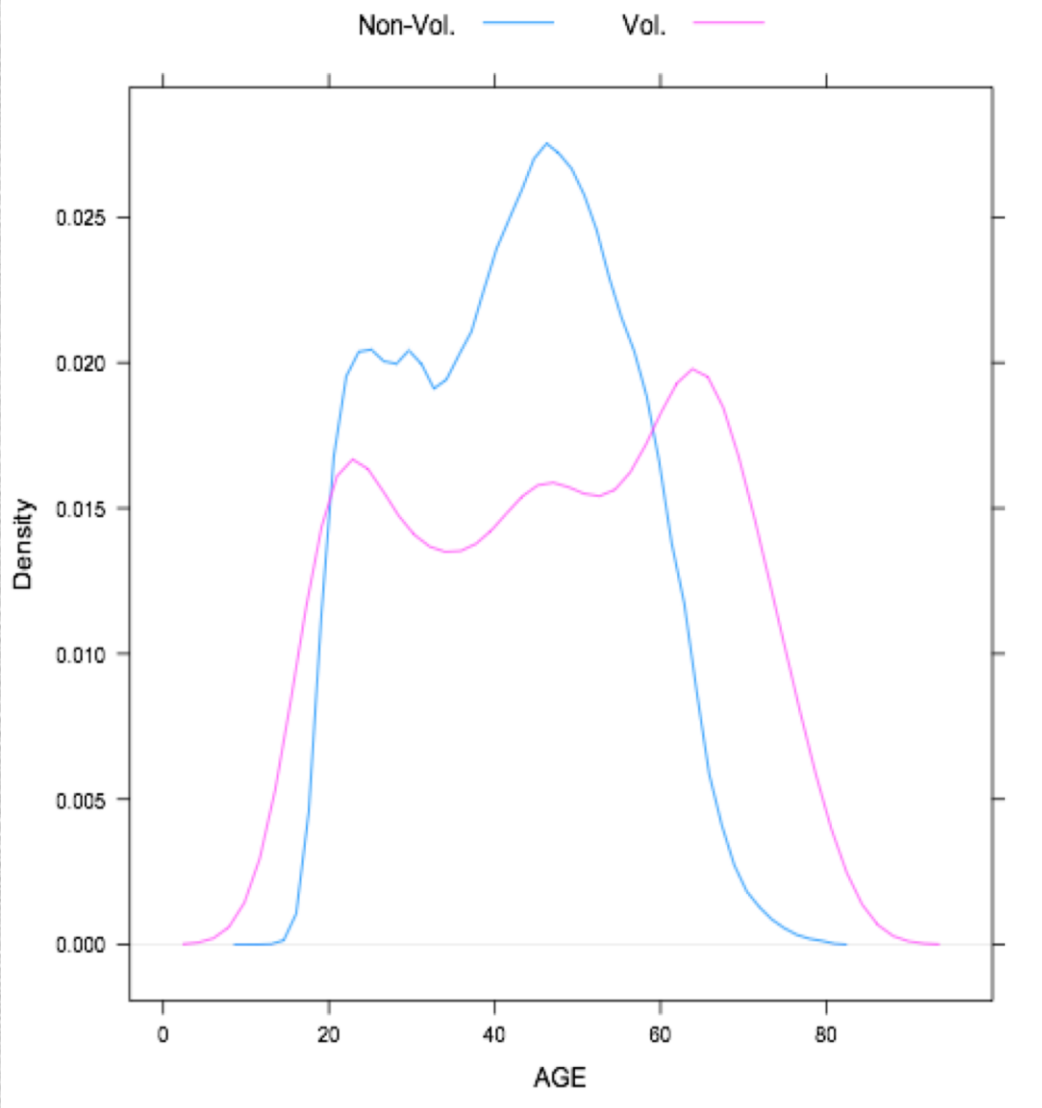
Scatter plot of prevalence of volunteering in LSOAs by income and employment scales



Profile of volunteers in the care sector

- Higher prevalence than the paid workforce of 'white' ethnicity
 - 87% vs. 82%; more similar to the general population
- Higher proportion of volunteers identified as having any disability than paid workforce
 - 13.2% vs. 2%; possibly related to a combination of higher disclosure rate and inclusivity
- Clear differences in relation to age and gender
 - Proportionally more male volunteers (33.6% vs. 17%)
 - Median age higher than the paid workforce (48 vs. 43 years)
 - However, different age-distribution with peaks around 'active' volunteering age, those younger than 20 years and 65 years old or more

Density function plot of the distribution of volunteers' and non-volunteers' age



Distribution of non-British volunteers by nationality

Nationality	Number of volunteers
Germany	10
Ireland	6
Nigeria	5
India	4
Korea	4
Austria	2
Italy	2
Kenya	2
Pakistan	2
Poland	2
United States	2
Angola	1
Australia	1
Brazil	1
Taiwan	1
Georgia	1
Finland	1
Hungary	1
Indonesia	1
Philippines	1
Somalia	1
EEA	22
Non-EEA	29
All	51

Roles & activities of volunteers in LTC

- Volunteers are involved in certain job roles more than others
 - particularly providing counselling, support, advocacy and advice
 - They constitute considerable proportions of ‘advice, guidance and advocacy’ jobs as well as ‘counselling’ → 24% & 30% of the overall workforce of these jobs
- Without the work of volunteers, these services could be significantly reduced
- A large proportion of volunteers do not hold relevant qualifications in social care
 - indicating the potential for attracting volunteers from a broad group of people who may not have work experience within the care sector

Recruiting volunteers

Main motivations- from literature

- Values
- Career
- Social
- Esteem
- Protective

Source of recruitment in our sample

Recruitment source	%	N
Voluntary work	69%	302
Social care sector	12%	54
Other sector	5%	20
Other sources	9%	40
Unemployment	2%	9
Student work experience	2%	8
From abroad	1%	4
Total	100%	437

Main findings

- The current data set indicates that volunteers constitute just 1% of the overall formal LTC workforce
- When organisations indicate the presence of volunteers, the contribution of volunteers within such organisations is high
 - In many cases reaching over a quarter of the workforce
- A tentative finding that areas with highest levels of volunteering are the wealthiest
 - ‘inverse care law’; where volunteering is facilitated in better-off areas
- Volunteers are not highly present in ‘significantly’ rural areas
 - may relate to the dispersed nature of residencies and possible transport barriers
- Clear evidence of the diversity of volunteers especially in relation to age and gender
 - With some similarity of age with clients but also large prevalence of younger people and men

Volunteering in LTC: Policy Challenges (& Opportunities)

- Commissioning and local funding cuts
 - Tighter budget
 - may affect organisational behaviour to become less attractive/rewarding to volunteers; negatively affect voluntary organisations' infrastructure
- Personalisation
 - Regulation, protection and risk
- Increased demand due to population ageing and other factors
 - Appreciate volunteering roles especially regarding time intensive tasks e.g. counselling & befriending; Complement not substitute
- Changing demographics
 - Widening civic engagement, empowerment and autonomy associated with the act of formal volunteering
- Managing expectations
 - Volunteers, sector and society

Acknowledgment & References

- Grateful to the Department of Health for funding the study and to Skills for Care for providing the data
- References:
 - Hussein, S., (2011), Volunteers in the formal long-term care workforce. *Social Care Workforce Periodical*, Issue 13: June 2011, London: ISSN 2047-9638.
 - Hussein, S. and Manthorpe, J. (online, 2012) Volunteers supporting older people in formal care settings in England: personal and local factors influencing prevalence and type of participation. *Journal of Applied Gerontology*.



THANK YOU