PRACTICE FORUM

Do Not Forget about Your Volunteers: A Qualitative Analysis of Factors Influencing Volunteer Turnover

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he number of individuals who share their time and talents as volunteers is on the rise. In 1993 it was reported that formal volunteer work was performed by 89.2 million Americans, worth an estimated \$182.3 billion (Grube & Piliavin, 2000). In particular, most hospitals rely on volunteers to complete a multitude of tasks that both the clinical and the administrative staff cannot fit into their schedules.

Those individuals who manage and oversee volunteer programs face a twofold challenge: orienting, training, and monitoring volunteers as well as retaining these volunteers (Forsyth, 1999). There appears to be a cause and effect relationship between these two facets of volunteer program development. An effective orientation and training of a program's volunteers will engage participants in a way that results in volunteers' willingness to participate in the agency's volunteer program for a significant period of time. However, if there is a breakdown in one of these functions, it is not long before an organization's volunteer program starts to flounder.

REVIEW OF RELEVANT LITERATURE

From the moment a program trains a group of volunteers, the focus should be on retention. Lynch (2000) stated that volunteer retention, in its simplest form, is making volunteers feel good about their assignment and themselves. If the volunteer experience makes the volunteers feel good, then they will continue to want to volunteer (McCurley & Lynch, 1996). Shanti National Training Institute, an organization that serves people who work as leaders of volunteers, identifies a number of factors that influence volunteer retention, including the quality and thoroughness of the initial training experience, the effectiveness of volunteer manage-

ment, and the degree of personal satisfaction achieved through volunteering (www.shanti.org/snti/retention.html).

Retention has an evil twin: turnover, or the number of volunteers who leave the organization that have to be replaced. Retention and turnover are important variables to volunteer program managers because they present serious problems for organizations that depend on volunteers to execute their mission statement. Although volunteer turnover is to be expected in volunteer organizations and creates opportunities for organizational change, high rates of turnover can hinder the capacity of organizations to deliver the quality or range of services and programs clients come to expect (Razzak, 2001). In addition, high turnover rates are critical when there is a need for volunteers with special skills or intensive training; volunteer responsibilities that require long-term commitments; the clients served by volunteers are disrupted by the absence of volunteers; and there is a shortage of qualified volunteers (Wymer & Starnes, 2001).

According to McCurley and Lynch (1996), studies of volunteer retention have determined that the first six months of volunteers' experience is critical toward their retention, as the greatest loss of volunteers occurs during this period. Wymer and Starnes (2001) have constructed a two-part life cycle of volunteerism that provides insight into when a large portion of volunteers depart from their commitment to the agency. Volunteers start their service in a "honeymoon" stage, which is composed of euphoria, self-congratulation, and eagerness to give of themselves. Upon gaining some experience, volunteers regress to a "post-honeymoon blues" phase. The idealism motivating their initial endeavor has now dissipated. This regression may occur when volunteers realize they are not

able to accomplish what they had initially anticipated or when they realize that the organization does not represent the values or issues they originally thought. Such realizations put a damper on an individual's initial motivating forces, and it merely becomes a matter of time before the volunteer steps out of the role of servitude. Volunteers also require more attention at "anniversaries," at the end of large projects, or at the completion of an agreed term of participation (McCurley & Lynch, 1996).

Several things contribute to a positive volunteer experience, which in turn increases retention and reduces the risk of turnover. First, retention of volunteers is accomplished through the development of feelings of importance and belonging to a particular agency (Murk & Stephan, 1991). Wymer and Starnes (2001) suggested that volunteers will be satisfied with volunteering if they have the chance to develop friendships, share experiences, communicate with others, and develop support groups.

Volunteers will feel positive about their experience if they have an opportunity to cultivate their role identity (Grube & Piliavin, 2000). Grube and Piliavin defined *role identity* as one's concept of the self that corresponds to the social roles held by the individual. A volunteer should perceive his or her role as important to the overall success of the organization. When this occurs, self-esteem should be increased, thereby fostering commitment to the individual's role identity as a volunteer. In essence, general role identity as a volunteer will predict volunteer role performance.

Finally, a positive volunteer experience can also be achieved when the volunteer experiences new learning opportunities with the potential for personal or professional growth (Wymer & Starnes, 2001). Wymer and Starnes indicated that one of the most frequent motivations for discontinuing volunteer service is inadequate training. Training for volunteers is overlooked when agencies view their volunteers as employed professionals who are just giving of their spare time. On the contrary, that someone is a professional does not mean that person does not need training in volunteer work (Logue, 2001). Training not only helps volunteers work better, but also helps to motivate them to donate time. There is no money to pay volunteers "so we always have to work on motivation... experience is the best way for volunteers to learn and stay motivated" (Logue, p. 64).

CARING HEARTS: A PROGRAM STRICKEN BY TURNOVER

Caring Hearts is a volunteer-based bereavement program administered at a military hospital in Texas. The program offers on-site and follow-up support to families who have a loved one who dies at the hospital. The hospital's chaplain administers the program, but volunteers power the program.

Participation in Caring Hearts is not limited to those individuals with a background in social work or counseling. To volunteer, individuals must attend a two-day course on bereavement. On completion of the course, volunteers are asked to take the pager for 24-hour shifts on six separate occasions.

Because many of the deaths that occur at the hospital are neonatal, the course largely focuses on this type of loss. Hospital chaplains teach the class using a curriculum developed by Gundersen Lutheran Bereavement Program. The training is a combination of interpersonal sharing and classroom learning. Over the course of the training, volunteers listen and respond to panels of experts and family members who share their experiences with grief and loss. In addition, volunteers sit through lectures and receive handouts on the stages of anticipatory parenthood, the grieving process, and what is expected of the volunteer when responding to a crisis call. Throughout the training, volunteers are encouraged to use breaks as an opportunity to get to know the other volunteers and the program administrators to begin building a support network. Training classes are held annually unless there is a large enough demand to hold additional seminars.

Recently, program administrators witnessed a puzzling decline in volunteer participation. In an effort to understand this decline, a qualitative analysis was developed to obtain feedback on volunteers' experiences in Caring Hearts.

The survey was made up of six open-ended questions. Two of these questions consisted of two parts. Volunteers were asked to reflect on their need for professional development, what they need as volunteers to further cultivate their knowledge of bereavement, and what motivates them to continue their work as Caring Hearts volunteers. Each volunteer met the social worker for a brief, face-to-face interview. To achieve greater participation, the social worker conducted interviews at locations most convenient for the respondents, which often meant traveling across the military post to meet

volunteers at their place of employment; interviews were scheduled at times that were most suitable for the respondent (that is, lunch time, early morning). Respondents were assured that as data were collected and analyzed their individual responses would remain anonymous. The duration of the interviews varied among respondents. Many interviews were brief, barely 10 minutes in length. However, many volunteers talked much longer than anticipated, demonstrating their compassion and concern for the bereaved and the Caring Hearts program.

The ability to contact the program's volunteers provided a clear indication that retention and volunteer turnover had already become a grave situation for Caring Hearts. The most recent contact list, consisting of 90 names, was used to solicit study participants. More than half of the volunteers on the contact list were either no longer interested in participating in the program or had phone numbers that were no longer in service; said that they would like to be indefinitely inactive until further notice; or were unable to be reached, despite multiple attempts to contact them. Forty-two volunteers were willing to discuss their experiences as a volunteer in Caring Hearts. Their responses provided some insight about the steps the program administrators of Caring Hearts could take to reduce turnover within the organization.

MAJOR FINDINGS

Analysis of the survey responses revealed three major findings: (1) Volunteers feel alone in their volunteer work; (2) more attention could be given to ongoing training and professional development; and (3) there are ample opportunities to cultivate their role identity as Caring Hearts volunteers.

First, those who participated in the Caring Hearts evaluation said that they often feel alone in their volunteer work. Many volunteers said that there is limited contact among the program's volunteers, creating a sense of isolation. Furthermore, in light of the type of service being performed by the volunteers, feeling alone is particularly difficult because what the volunteers encounter when working with the bereaved can be heavy on one's heart. After leaving the room of the bereaved, some volunteers may not know how to work through their own emotions regarding what they just experienced.

Respondents said they would appreciate and benefit from the opportunity to meet with other volunteers in a support group setting. They said that this opportunity would help them process, evaluate, and share their experiences of being on call and working with the bereaved. Listening to other volunteers' stories could have the potential for both renewal and motivation, encouraging volunteers to maintain their commitment to Caring Hearts. Those interested in a support group acknowledged that it would also provide a source of strength and comfort while simultaneously building a sense of teamwork and cohesiveness among the volunteers.

Next, Caring Hearts volunteers felt more attention could be given to ongoing training and professional development. Respondents indicated that although they enjoyed the initial two-day training class, it is unreasonable to assume that once a volunteer has completed the training, he or she is equipped with appropriate and adequate knowledge for the duration of the bereavement volunteer experience.

Many of the volunteers expressed a desire to attend annual refresher courses. Some volunteers felt that a portion of each refresher course should be dedicated to reviewing the basic tenets of the grief process and that the remainder should focus on presenting new material for skill building. Many volunteers indicated that after their initial training they felt prepared to deal only with neonatal loss. As a result, these volunteers said that they would like to learn more about how to deal with the death of children, young adults, and elderly adults.

In addition to annual refresher courses, volunteers said they would benefit from regular professional development workshops. Volunteers indicated that these workshops should be held quarterly. Some of the suggested topics for these quarterly workshops were empathetic talking and empathetic listening; interacting with a family who is not willing to talk; how to approach the bereaved; and including the bereaved father in the grieving process. To maximize the learning potential of these quarterly workshops, volunteers felt it would be best to present these topics in a discussion format, allowing volunteers to share their experiences and ask questions of one another.

Finally, not all of the feedback from the survey was critical. Volunteers who participated in the program analysis believed there had been ample opportunities to cultivate their role identity as Caring Hearts volunteers, which is evidenced by their

ongoing commitment to participate in the program. Most volunteers indicated that they joined the program because they enjoy helping other people. Furthermore, volunteers continue to give their time to Caring Hearts because there is a sense of personal fulfillment, which develops as a result of doing things for others.

In addition, volunteers indicated that they enjoy the opportunity to help others going through a difficult time—especially those military families who have no one nearby to support them. Volunteers also found value in being able to listen to others' grief, especially given that the volunteer is the first point of contact for the bereaved. The opportunity to sit with someone when he or she is most vulnerable emotionally clearly appeals to Caring Hearts volunteers, making the experience worthwhile.

IMPLICATIONS FOR PRACTICE AND FURTHER RESEARCH

The next step in Caring Hearts' effort to reduce volunteer turnover would be to develop both a support group and ongoing training seminars. It would be imperative for the program's administrator to monitor closely whether these newly developed programs are meeting the needs and desires of the volunteers. Coupled with this, it would be essential to develop a longitudinal study to monitor the long-range influence of these new programs on volunteers' inclination to leave Caring Hearts.

CONCLUSION

The results of this survey outline the factors that most heavily influence the length of time a volunteer is willing to commit to an organization. Although respondents to this survey volunteer their time specifically to bereavement, their sentiments are indicative of what any volunteer might experience during his or her service to an organization. Volunteer program administrators would be wise to take note of these recommendations and evaluate their programs for the presence of these features. HSW

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