

# Hospice Volunteers



Hospice volunteers are essential and valued contributors towards person-centred, high quality care at end of life, and as the population ages their role will become increasingly important. However, at the same time that hospice managers are experiencing increased demand for volunteers, some studies indicate that fewer individuals are choosing hospice settings in which to contribute.

Research tells us important things about why volunteers choose hospice work and how organizations might maximize and maintain satisfying roles into the future. The following is a summary of the research literature, which may guide us.



What do we know, what can be done to support them and what do we still need to know?



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- Hospice volunteers are more likely to be women, in older age groups and predominantly Caucasian. These volunteers are committed to whole person care and forging meaningful, intimate connections with patient and family members. They tend to focus on the patient's life and comfort, rather than impending death, and their interpersonal focus on the meaning of life and belief systems provides elements of care that may be missing in health care institutions.
- A few studies suggest that men may be more likely to volunteer if the hospice role is perceived as less emotionally demanding and more task-focussed; however, all volunteers, including men, are motivated to contribute if they have had personal experience with dying. Overall, younger individuals tend to volunteer for instrumental, career-based motivations, and older individuals for social or altruistic motivations, such as a desire to be of service.

## What do we know?

- Many volunteers report personal growth as a result of their contribution in a hospice setting and feel this offsets the lack of monetary compensation. Other benefits volunteers have described include increased resilience, broader life perspectives, better understanding of death, and even deep transformative experiences of the self.
- Families usually express a high degree of satisfaction with their hospice volunteer, viewing the role primarily as emotional support with a little practical care. Volunteers often function as "in-between" persons, providing communication and emotional translation among family members.
- Most volunteers feel valued by the patient, family and health care team. They understand the volunteer role well. However, volunteers may be less satisfied with their relationship to the hospice organization. Some volunteers desire more organizational involvement, including being informed of the overall vision and strategic planning of the organization.
- Interestingly, most volunteers describe their hospice role as stress-free. The main stresses that are reported include experiencing the death of their patient, negotiating conflicts within families, seeing disfigurement of a patient, and not having enough time with a patient. The boundaries between friendship and professional roles can also pose problems for volunteers. Volunteers may find themselves in complicated situations, such as witnessing less than optimal care or hearing patients state a desire for euthanasia.
- Ways in which volunteers deal with stress include talking with others for support and advice, taking time away from volunteering and participating in enjoyable activities. They also describe making meaning in situations through religion, looking at the good or seeing things as being better off than someone else.

# What can be done?

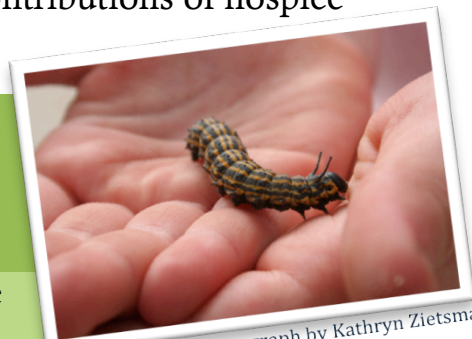
- Many volunteers want more feedback from the organization, and more knowledge about overall hospice operations. The opportunity to debrief with other volunteers and receive ample contact with managers or coordinators has been suggested as a means of volunteer retention (as they have), providing positive experiences with the organization. It is important for organization managers to provide training and to adequately support volunteers in their challenges, such as experiencing the death of a patient and negotiating boundaries and conflicts within families, as this is key to volunteer satisfaction.
  - The provision of focussed preparation improves the experience, effectiveness and retention of volunteers. Volunteers who had been prepared for their role by receiving intensive training sessions, caregiving assignments and regular follow-up with staff reported a sense of personal well being, increased compassion and decreased fear of death.
  - More formal or structured integration of volunteers into hospice environments may attract new and diverse individuals to volunteering, and may offer increased personalized care for families. However, volunteer managers will need to strike a balance between developing more formal volunteer roles and maintaining the sense of freedom and flexibility that volunteers have reported is an incentive.
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- More focussed attention on attracting and retaining volunteers in formal and informal ways will help hospice organizations create high-quality end of life care for patients and families.
  - Many volunteers come from professional backgrounds, such as counselling, and their skills and expertise should be validated and incorporated into end-of-life care in more formal ways than has traditionally been done. Hospice organizations could make efforts to maximize the considerable skills and background that volunteers bring to hospice work.
  - Increasing the diversity of volunteers in terms of gender, age and ethnicity is a challenge hospice managers and coordinators must face. The rich potential for hospice volunteering to improve individual careers and personal growth are tangible benefits that recruiters can emphasize in their campaign promotions.



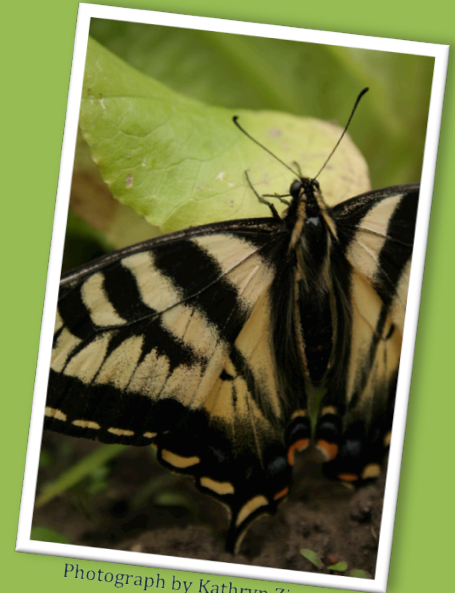
# What do we still need to know?

- There is a need for more research to clarify the ideal elements to include in training programs and the right mix of support for volunteers.
- The psychological traits of volunteers have been the focus of research; however, it is too early to draw firm conclusions for screening and recruitment purposes. It is possible that there are differences related to empathic capacity and emotional protective factors that characterize successful hospice volunteers. The literature suggests that volunteers may tend to be more emotionally robust, demonstrate enhanced empathy and possess developed coping skills.
- The invisibility of hospice volunteer work in the community is a barrier to increasing and enhancing volunteerism. We need to find ways to assist organization managers with changing this perception, perhaps by focussing on the distinct benefits of volunteering in recruitment promotions.
- We also need to know more about the benefits for patients of having a hospice volunteer. One unique study concluded that patients with a volunteer lived significantly longer than patients without one. We need further studies like this to confirm the valuable contributions of hospice volunteers.

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