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# **AIDS Vancouver Volunteer Survey '98**

## **A Report of Volunteers' Experiences**

prepared for AIDS Vancouver  
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## I Introduction

Since 1983, AIDS Vancouver has provided direct support services to persons with HIV and AIDS. The organisation has also served to educate people and advocate for public awareness about HIV and AIDS. Many of the programs and departments associated with AIDS Vancouver's support, education and advocacy services are dependent on volunteers. Additionally, AIDS Vancouver is reliant on volunteers for its internal administrative support—from telephone reception to the Board of Directors.

The core volunteer programs and departments at AIDS Vancouver are:<sup>1</sup>

- **Special Events** (91) volunteers assist with events such as World AIDS Day. These annual events require long term and short term involvement.
- **Care Teams** (40) are specially trained to service the practical and companionship needs of persons with AIDS. This is a version of the original "Buddy" system.
- **Helpline** workers (36) provide multilingual support, information and referrals to callers concerned about HIV/AIDS. The service operates during weekday business hours.
- **Grocery** volunteers (33) attend to all aspects of the AIDS Vancouver grocery, including stocking shelves, packing bags and delivery to persons too unwell to pick up their supplementary foods.
- **Counsellors** (30) are professionally qualified practitioners who provide no-fee services to individuals who are unable to afford therapy.
- **Visitors** (26) are on-call, attending to hospital, hospice, and home bound patients.
- **Reception & Switchboard** (21) workers are often the front line representatives of AIDS Vancouver, as well as the members of the Pacific AIDS Resource Centre (PARC). Duties include office work, telephone, and general operations.
- **Library** (16) volunteers maintain the collections of books, journals, videos, and files pertaining to HIV/AIDS.
- **Man to Man** (17) volunteers are sexual health and HIV awareness advocates for men who have sex with men. Volunteers distribute information at community events and in public sex places, as well as facilitate workshops and maintain information displays.
- **Massage** (5) therapists are professional practitioners who offer treatment to individuals who are unable to afford therapy.
- **Community Outreach** (4) workers promote HIV/AIDS awareness through a number of formal and informal methods. This program ceased operation shortly after this survey.
- **The Board of Directors** (6) comprises elected individuals with a variety of skills and backgrounds essential to the administration of the organisation.
- Other volunteer sectors include **Fund Development** and **Resource Development & Distribution**. In general, they draw on many of the administrative, public relations, and creative talents of volunteers serving the other programs and departments.

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<sup>1</sup> ( ) indicates number of active volunteers as of January 1999.

**Selected comments:**

"I have learned as much if not more from the staff at AV as I have from the actual work that I've done. The people I have met have made volunteering that much more rewarding."

"I like the support from AV. The people involved are so positive and the clients so thankful."

"The attention AV pays to volunteers—mailings, cards—it's hard to miss that we are appreciated."

"Encouragement and support from paid workers at AV helped to reinforce to me that I was a necessary part of a team."

Very few hindrances to volunteer satisfaction were identified. Some volunteers expressed regrets at limitations arising from their other personal obligations. There were also concerns that in some situations the ratio of clients to volunteers is too low. The implication here is that AV might restrict volunteer recruitment in areas where the client base is not growing. One volunteer from Reception felt displaced and unneeded by organisational restructuring. Concern was also expressed at the abolition of the Community Outreach program.

**Summary:**

Volunteers are very satisfied with their work. Positive relations with AIDS Vancouver staff, colleagues, and clients were identified as key factors. In this regard, AV is doing all the right things with its volunteers. Limitations to volunteers' satisfaction appear to be isolated to areas where there are insufficient clients to share among volunteers. Therefore, the Volunteer Co-ordinator should review areas where volunteer availability may exceed client demand, and adjust recruitment accordingly.

**B Recruitment**

Volunteers rated recruitment at 3.7 (3 = satisfactory; 4 = very good). Nevertheless, 25% of respondents did not answer this questionnaire item and many commented that they were unaware of a recruitment process at AIDS Vancouver. Typical comments were:

**Selected comments**

"I approached AV to do volunteer work, so I'm not really sure of the recruiting process."

"I'm not aware of any recruiting."

delay in taking part in active work may be unnecessary. For example, there may be valid reasons to allow persons offering to assist with tasks such as desktop publishing or mailouts to commence activity prior to completion of AIDS 101 training. Given that professionally qualified volunteers, such as massage therapists, are able to bypass this requirement, similar exceptions may be possible on a case-by-case basis.

## **D Training & Education**

The volunteer core training, AIDS 101 received very high regard from the survey respondents. The raw score was 4.25 (4 = very good; 5 = excellent). This intensive weekend training session appears to have considerable impact on volunteers and many commented positively on the trainers and the program.

### **Selected comments:**

“I have attended many training sessions in other areas of interest. The core training was by far the most comprehensive and powerful.”

“I found it extremely fun as well as educational.”

“Learned lots. Good formats. Variety of presentations, sessions, styles.”

“Even as a nurse I found some of the jargon too technical for most volunteers.”

“Too long and too quick to learn the relevant information.”

In addition to core training, specialised training sessions are offered for the Care Teams, Visitation, Help Line, Outreach, and Man to Man. The purpose of these training sessions is to provide Volunteers with the information to perform specialised tasks. For instance, Help Line workers are trained to respond to frequently asked questions, perform problem assessment and make appropriate referrals, and to listen empathetically. Overall, survey respondents rated specialised training as 4 -- “very good.” One respondent suggested that an orientation program for the Board of Directors would be welcome.

Ongoing Education for volunteers takes the form of workshops and in-services. This category of training was rated 3.75 (3 = satisfactory; 4 = very good). Some volunteers commented that there appear to be a variety of training sessions, but they do not attend due to scheduling difficulties, travel requirements to come in to the city, or simply because the topics don't appear to be salient to their volunteer work. Two respondents also mentioned that the training room is an uncomfortable facility. On the other hand, several mentioned that the newsletters and training updates are appreciated and help them to feel connected to the organisation, even if they don't attend education sessions. One participant also expressed concern that some AIDS Vancouver presenters might strive for a more professional appearance, particularly when hosting sessions for outside agencies. Overall, those volunteers who do take part in the formal ongoing

“I don’t volunteer for the sake of recognition and appreciation. When appreciation occurs, it’s great!”

Although volunteers rated communications from the agency as being “very good,” there were many suggestions for improvements in this area. It was noted that past leadership and sour politics had already been replaced by a more positive approach.

Additional to face-to-face interaction with volunteers, the agency uses telephone and mail-outs to maintain relations. The agency newsletter, *The Volunteer Voice*, has been sporadic in its publication for the past year and survey respondents noted this. Several indicated that they would like to see more frequent publication of *The Volunteer Voice*. It was also suggested that the newsletter could give greater emphasis to profiling volunteers and the work they do, as a means to giving exposure to the positive aspects of volunteering as well as the diversity in volunteer programming.

There appears to be mixed feelings around the use of postal services to keep volunteers informed. Some expressed concerns about the costs associated with printing and postage, whereas others clearly felt that regular mail from AIDS Vancouver was beneficial because it helped them feel “connected.” Several volunteers welcomed the possibility of communication via email and an updated Website. As a cost saving measure, one respondent suggested that volunteers who frequent the agency collect mailings on site.

Some volunteers mentioned a need for greater communication and feedback with respect to clients’ needs and the relationships of clients vis-à-vis volunteers. This might be particularly salient to areas where clients have personalised contact with volunteers in the Care Teams and Counselling department. For example, one survey respondent noted:

“I haven’t been contacted very much since being set up with my client. It would probably be useful to be called every 4 – 6 months just to check up on how it’s going. I realise that there may not be the time or resources to do this.”

**Summary:**

Volunteers gave high marks for the support, recognition, and communication they receive from AIDS Vancouver. Indeed, for some volunteers, the recognition is so overwhelming that it risks the appearance of being insincere. For others, the recognition appears to be a motivating factor to continue volunteering. Many commented that they missed the regular newsletter. Consistent with digital technology, several volunteers suggested that email be employed as a less expensive and more efficient form of communication. At the same time, volunteers seem to value personal contact either in person or by telephone.

For some volunteers, particularly those who work directly with clients but not necessarily in co-operation with other volunteers or staff, there appears to be an experience of isolation. This is particularly significant to volunteers who do not work

as well as fundraising and public relations. There was also concern at the restructuring of the buddy system. Additionally, volunteers could assist with recruitment of new volunteers and clients.

## **H Trends & Emerging Needs**

The survey respondents identified a variety of trends and areas where volunteers might have a useful role. These included:

- Education of women's groups, particularly on the North Shore
- Education in outer regions such as Maple Ridge and Langley
- Education for young gay men
- Co-ordinate AIDS Vancouver volunteer services with other community agencies
- Provide education and presence in the school system
- Host in the lounge
- Offer volunteer services to community health agencies in order to promote awareness of AIDS Vancouver
- Promote a Christmas event
- Assist the Eastside with the task of sensitising BC government about HIV issues in that community
- Utilise the volunteer therapist program for staff burnout
- Outreach and education in the Downtown Eastside<sup>2</sup>

## **IV Conclusion**

This first survey of AIDS Vancouver's volunteers is a positive step in the evaluation of volunteers' experiences and the determination of where volunteers might offer more effective service. Overall, the survey indicates that volunteers are very satisfied with their work and the support they receive from AIDS Vancouver. Furthermore, the survey offers some baseline measures for future reviews of volunteers' experiences.

Volunteers offered a number of suggestions where they might provide more efficient services to the community. In general, these take the form of greater outreach services, to marginalised populations and to the greater public.

A shortcoming of this survey is that it does not assist in developing a profile of volunteers at AIDS Vancouver. It is suggested that a future survey employ a design

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<sup>2</sup> It was recognised that this is not considered a safe area to work. Nevertheless, there appear to be some volunteers who are interested in providing service should AIDS Vancouver be in a position to assist with the unique training needs and supervision associated with this area.

similar to that of Statistics Canada's "National Survey of Giving" so that data can be collected to develop a profile of volunteers.

Another gap in this survey is that the questionnaire was not designed to elicit data about the motivations of volunteers to give their services to AIDS Vancouver. Similarly, the survey was not designed to determine factors that might influence a person to either continue or terminate volunteering. These data are important in order to address issues of recruitment and retention and should be collected in any future survey.

Finally, the Volunteer Survey '98 does not illuminate two other fundamental areas with which AIDS Vancouver is concerned. These are: (1) how clients perceive their experiences with volunteers, and (2), how staff members perceive their experiences with volunteers. In future reviews of its services, it is suggested that AIDS Vancouver consider a comprehensive survey, or series of surveys targeting specific groups, to generate knowledge about the quality and impact of the organisation's services to the HIV and AIDS population.



## VOLUNTEER SURVEY '98

Thank you for the contribution you have made to AIDS Vancouver as a volunteer. Your work is greatly appreciated!

We are currently reviewing the role, direction and effectiveness of AIDS Vancouver, both in the community and internally, and are seeking the input of volunteers to assist us in this process. Your thoughts and insights will help in identifying our strengths, needs, and opportunities for growth in the area of volunteer resources.

Your participation in this survey is voluntary. Your responses will be kept strictly confidential. Survey results will be summarized and made available to all volunteers. Only group results will be reported.

Please return your completed survey in the enclosed envelope before **December 31, 1998**.

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1. What area(s) are/were you involved with at AV?

Currently	How Long Have You Been Involved?	In the PAST	How Long Were You Involved?
<input type="checkbox"/> Reception	_____	<input type="checkbox"/> Reception	_____
<input type="checkbox"/> Library	_____	<input type="checkbox"/> Library	_____
<input type="checkbox"/> Print Resources	_____	<input type="checkbox"/> Print Resources	_____
<input type="checkbox"/> Man to Man	_____	<input type="checkbox"/> Man to Man	_____
<input type="checkbox"/> HelpLine	_____	<input type="checkbox"/> HelpLine	_____
<input type="checkbox"/> Small Group Facilitation	_____	<input type="checkbox"/> Small Group Facilitation	_____
<input type="checkbox"/> Community Outreach	_____	<input type="checkbox"/> Community Outreach	_____
<input type="checkbox"/> Hospital Visitation	_____	<input type="checkbox"/> Hospital Visitation	_____
<input type="checkbox"/> Care Teams	_____	<input type="checkbox"/> Care Teams	_____
<input type="checkbox"/> Volunteer Counselling	_____	<input type="checkbox"/> Volunteer Counselling	_____
<input type="checkbox"/> Therapies Program	_____	<input type="checkbox"/> Therapies Program	_____
<input type="checkbox"/> Volunteer Massage	_____	<input type="checkbox"/> Volunteer Massage	_____
<input type="checkbox"/> Bodywork Therapies Program	_____	<input type="checkbox"/> Bodywork Therapies Program	_____
<input type="checkbox"/> AIDS Vancouver Grocery	_____	<input type="checkbox"/> AIDS Vancouver Grocery	_____
<input type="checkbox"/> Board of Directors	_____	<input type="checkbox"/> Board of Directors	_____
<input type="checkbox"/> Fund Development	_____	<input type="checkbox"/> Fund Development	_____
<input type="checkbox"/> Other _____	_____	<input type="checkbox"/> Other _____	_____

2. Please rate your overall level of satisfaction with your current volunteer work.

Dissatisfied     Fair     Very Satisfied     Highly Rewarding

What has contributed to this level of satisfaction?

Appendix 1

3. The following questions ask you to rate how AV is doing in your initial and subsequent involvement with the agency. Please circle your choice on a scale of 1 to 5 (Poor, Fair, Satisfactory, Very Good, Excellent) and write any additional comments in the space provided.

A) Recruiting new volunteers?

1	2	3	4	5
Poor	Fair	Satisfactory	Very Good	Excellent

Comments:

B) The volunteer application form?

1	2	3	4	5
Poor	Fair	Satisfactory	Very Good	Excellent

Comments:

B) The selection and screening process?

1	2	3	4	5
Poor	Fair	Satisfactory	Very Good	Excellent

Comments:

C) Core training?

1	2	3	4	5
Poor	Fair	Satisfactory	Very Good	Excellent

Comments:

D) Specialized training for the work you are doing?

1	2	3	4	5
Poor	Fair	Satisfactory	Very Good	Excellent

Comments:



**Appendix 2**

***Breakdown of number of survey respondents per category<sup>3</sup>***

<b>Area of volunteering</b>	<b>Current work</b>	<b>Past work</b>	<b>Average years of service</b>
Reception	8	3	2
Library	6	3	1.5
Print Resources	n/a	1	n/a
Man to Man	5	2	2.2
Helpline	10	2	1.7
Small Group Facilitation	2	n/a	3
Community Outreach	4	3	2
Visitation	9	1	2.5
Care Teams	7	1	1.8
Volunteer Counselling	10	2	2.9
Therapies Program	1	n/a	3
Volunteer Massage	1	n/a	1.5
Bodywork Therapies	1	n/a	3
Grocery	3	2	5.3
Board of Directors	1	1	2
Fund Development	3	7	n/a
Other	10	6	3
<b>Total</b>	<b>81</b>	<b>34</b>	<b>n/a</b>

<sup>3</sup> Calculations for average years of service will be underestimated because not all respondents contributed data. Total exceeds actual number of survey replies (70) because some respondents volunteer in more than one category of service.