

Volunteers In Action

Engaging
Volunteers
in the
HIV/AIDS
Sector



Findings from the 2005 British Columbia Assessment

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ENGAGING VOLUNTEERS IN THE HIV/AIDS SECTOR

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(May 2005)**



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from the 2005 British Columbia Assessment

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“I believe in what I do, and feel like I belong to something important.”

- Volunteers in Action participant

EXECUTIVE SUMMARY

Volunteers In Action (VIA) was an assessment of volunteerism in the HIV/AIDS sector in BC. It was conducted by Volunteer Resources at AIDS Vancouver during the Winter of 2005, and was supported by numerous community partners. The purpose of the assessment was to develop an understanding of the experiences, perceptions and realities of volunteers and Managers of Volunteers working in AIDS service organizations in BC, and to develop recommendations to increase the capacity of Managers of Volunteers in the HIV/AIDS Sector of BC.

VIA consisted of a provincial survey of volunteers and focus groups with volunteers and with Managers of Volunteers in four geographic regions: Kelowna, Prince George, Vancouver and Victoria. In total, 237 volunteers completed the survey, and 33 volunteers and 25 Managers of Volunteers participated in focus groups. Participating volunteers came from diverse backgrounds and experiences and were highly committed to and passionate about their volunteer work.

VIA shows that volunteers play an integral role in delivering programs and services and maintaining organizational operations. Volunteers reported a high level of general satisfaction with their volunteer experience and for the most part felt adequately supported in their work. ASOs valued volunteer involvement and relied heavily on volunteers in their operations, but this did not necessarily translate into appropriate and comprehensive volunteer management. Managers of Volunteers were often over-stretched and not fully acknowledged or resourced in their profession. Time was often split between competing responsibilities within an agency.

Overall, volunteerism in the HIV/AIDS sector is a prevailing resource with many strengths. Steps need to be taken to enhance and solidify volunteer programs and supports. This will ensure that agencies maximize the potential of their volunteers and in doing so optimize their programs and services. Several recommendations emerged from the VIA assessment. Key recommendations include developing strategies to provide the supports and resources needed for effective volunteer management, and establishing provincial linkages amongst Managers of Volunteers in order to share resources and supports. With an investment of time and resources, and a focus of building upon existing strengths within volunteer resources, the HIV/AIDS volunteer sector can reach its full potential and become an exemplary and vital resource in responding to HIV/AIDS.

1. INTRODUCTION

1. Background and Rationale

Volunteerism is at the heart of the HIV/AIDS movement. Community-based HIV/AIDS service organizations (ASOs) in British Columbia rely on volunteers to help run their programs and provide invaluable services to people living with and affected by HIV/AIDS. Professionals within ASOs have been a strong voice for volunteerism in the HIV/AIDS sector, recruiting and managing volunteers and advocating for resources. However, there has been little evidence to support and sustain volunteerism as the vital resource that it is within the sector. In addition, there is a lack of information and understanding regarding the professional and organizational needs of Managers of Volunteers in this sector.

Volunteer Resources at AIDS Vancouver has taken a leadership role in addressing information gaps through dialogue and research. Volunteer Resources is part of a larger collective of Managers of Volunteers who work collaboratively on various volunteer based initiatives in the Lower Mainland. This working group is called VISIT – Volunteer Initiatives for the Sharing of Information and Trainings. AIDS Vancouver, in collaboration with VISIT and other community partners, developed the Volunteers In Action Assessment to explore issues related to volunteerism in the HIV/AIDS sector throughout British Columbia.

The goal of the Volunteers In Action project is to increase the capacity of Managers of Volunteers in the HIV/AIDS Sector of BC. This includes how to effectively work with volunteers by understanding the motivation, recruitment, screening, training, recognition and support needs of volunteers. In turn, this increased understanding and knowledge will enhance the capacity of organizations to provide more effective management of volunteers in the areas of program planning and implementation, development of meaningful volunteer opportunities, service delivery, evaluation and best practices.

This report is a summation of the findings from the VIA assessment and includes a series of recommendations for strengthening the HIV/AIDS voluntary sector in BC. The findings are based on the consultations undertaken and are not intended to be generalized to all volunteers in the HIV/AIDS sector. Recommendations may not be relevant or appropriate for all agencies or volunteer situations.

2. METHODOLOGY

Volunteers In Action (VIA) is an assessment of volunteerism in the HIV/AIDS sector. It is a snapshot of the needs, experiences, challenges and successes related to volunteering and managing volunteers in BC's HIV/AIDS service organizations during the winter and spring of 2005. VIA is a project of Volunteer Resources at AIDS Vancouver, and the research and project management was conducted by Andrew Barker, an experienced HIV/AIDS community-based research consultant.

A review of local and national knowledge prior to VIA revealed a wealth of information about volunteer management, but very little that related to the

HIV/AIDS sector. The VISIT group compiled an inventory of their own organizations that provided an overview of some of the issues facing Managers of Volunteers in Vancouver area ASOs. This provided a basis for the development of survey and focus group questions.

The assessment consisted of two main parts, a survey and focus groups. The survey was for volunteers and looked at: who volunteers, why people volunteer, how they got involved, their experiences as a volunteer, health status, and volunteer recognition. The survey was available online and on paper. It was designed to fit on two sides of a sheet of paper and take about 5 minutes to complete. A total of 237 volunteers participated in the survey.

Separate focus groups for volunteers and Managers of Volunteers were conducted in Kelowna, Prince George, Vancouver and Victoria. A total of 33 volunteers and 25 Managers of Volunteers took part.

The confidentiality and anonymity of participating individuals and agencies was crucial given the stigma and sectoral politics surrounding HIV/AIDS. To ensure that the research protocol of VIA wouldn't cause any potential harm to participants, the study was reviewed and approved by the Community-Based Research Centre's Research Ethics Board. The survey was designed to be completely anonymous and focus group participants were provided with a statement of informed consent that ensured that no names or identifiers would be used in the findings. Furthermore, focus group participants verbally agreed not to share personal information revealed by other participants.

To recognize their time and contribution, volunteers who participated in focus groups received an honorarium.

3. LIMITATIONS AND CHALLENGES

Volunteers In Action was limited by time, resources and geography.

Volunteers In Action took place over a three month period and directly engaged participants in four geographic regions with potential Provincial scope through the online survey. Time and budget necessitated that only four regions could be included in the focus groups. The intent was to provide a balance of rural and urban perspectives while taking into consideration a provincial perspective. The Lower Mainland, Vancouver Island, North, and Okanagan were selected as key geographic regions where HIV and related services are predominant.

The online survey was available throughout BC, but many people do not have internet access. Under-resourced staff and volunteers in smaller communities and agencies combined with a short time period in which to gather data made it difficult to access staff and volunteers in these locales.

An extensive amount of information was collected with a short project timeline. No all areas of interest and practice could be fully investigated and presented. This report highlights the main themes and issues.

2. DEMOGRAPHICS

1. VOLUNTEERS

Community-based AIDS Service organizations have been established throughout BC by people who are affected and infected by HIV. Before government funding was available, volunteers invested countless hours to create services that would provide supportive environments and advocate for the rights of people living with HIV/AIDS and to educate the general public about HIV. Today, over 20 years since the epidemic began in BC, volunteers continue to be the driving force in this work. Many organizations receive some form of resources from government and private sector sources, but the day to day operations and services provided could not exist without the heavy involvement of volunteers.

The volunteers who participated in the VIA assessment represent a diverse and dedicated group who are passionate about the need for community-based HIV/AIDS services:

- 87% live within the Lower Mainland;
- Age ranges from 14 to 86 years with an average age of 38 years;
- Volunteers are 48% male, 51% female and 15 transgendered;
- 52% identify as heterosexual, 36% as gay or lesbian and 11% as bisexual;
- 10% of volunteers in the assessment have personal experience with injection drug use;
- 27% of the sample is HIV positive, 65% HIV negative and 7% do not know their HIV status.;
- Of those who are HIV positive, the average time since sero-conversion is 12 years with a range of 2 to 22 years.

The majority of volunteers responding were Caucasian (70%), reflective of the some of the challenges in engaging people from communities of colour. This is discussed further in the section on diversity.

Just over half of the sample (51%) had paid work; this is unique to the HIV voluntary sector. Many other voluntary sectors (i.e. arts, culture and recreation¹) draw largely from volunteer pools that are not working. Despite this, 68% of the VIA sample have an annual income of \$30,000 or less.

VIA Volunteers in BC contribute thousands of hours a year with 49% of the sample volunteering an average of 13 hours or more per month. The estimated dollar amount of this contribution is in the hundreds of thousands of dollars.

¹ National Survey of Giving, Volunteering and Participating (2000).

2. MANAGERS OF VOLUNTEERS

Managers of Volunteers are the staff within a volunteer-based organization who recruit, manage and support volunteers in their placements. The role is comparable to that of a Human Resources Manager. The Managers of Volunteers who responded to VIA are a diverse group in terms of age, gender, ethnicity and sexual orientation. The large majority of this group entered the field because they had been affected by HIV in some way. A minority entered the field because they were interested specifically in volunteer management and human resource management. Some managers came from a background in social work, social justice, or international development work. Most had previous volunteer experience in either their own or another agency and almost all had some form of post-secondary education. Very few Managers of Volunteers had received specific training in volunteer management. Some had taken workshop courses offered by regional Volunteer umbrella agencies such as Volunteer Vancouver or Volunteer Victoria. There was general consensus throughout BC amongst Managers of Volunteers that volunteer management training is appropriate and necessary and should be offered to all managers.

3. MOTIVATION FOR INVOLVEMENT

"Volunteering keeps us alive and gives us purpose." – HIV + volunteer

Virtually all volunteers and staff who work at an ASO became involved because they had been affected in some way by HIV; either they are infected with HIV themselves, or they know someone who is. There are dozens of specific reasons why people start volunteering in an ASO. They can be summarized as:

- HIV positive people wanting to give something back to the agency where they receive services;
- People seeking connection to the HIV community (including people and information/resources);
- People wanting to learn new skills (potentially transferable to paid employment);
- A desire to affect change through a passion for social justice (i.e. to reduce stigma around HIV);
- To provide professional services to clients who normally wouldn't be able to access their services (i.e. acupuncture, massage, reiki).

Many people spoke of the warmth and compassion that they experience through volunteering or working at an ASO. As one volunteer stated, *"the masks come down when you hit the ASO door... you can be yourself."* Along with this comes a sense of purpose and meaning that profoundly affects the lives of many involved. It is this sense of purpose and the ability to see change that keeps people coming back to volunteer.

4. ROLES

Volunteers are the backbone of AIDS Service Organizations. Whether it be a large agency with 30 staff or a small one with one half time paid position, volunteers play a crucial role in running agencies and providing services. Volunteers are involved in a multitude of roles:

- Administration (filing, word-processing, reception, technology);
- Advocacy (i.e. National steering committee for cannabis as a therapy);
- Board of Directors²;
- Board development – dealing with bureaucrats and politicians;
- Client services: clothing “store”, meal programs, residential care support, hair-cutting, drivers;
- Communications (proposal writing, publications writer/editor, languages);
- Education and outreach: targeted (i.e. youth, First Nations, gay men), venue-based (churches, hospitals, clinics), presentations, peer training;
- “Floating” volunteers – no assigned roles. These volunteers connect with what needs to be done and create their own volunteer jobs;
- Fundraising (AIDS Walk, hot dog stands, bingo nights, etc);
- Peer support: drop-in/social support, peer support phone line, addictions;
- Professional services: counseling, chiropractic, massage therapy, acupuncture, reiki, addiction services and referrals.

The management of volunteer roles is a professional position that requires significant knowledge and skills. Managers of Volunteers are community developers and must be proficient in program planning, implementation and evaluation. Managers of Volunteers are involved at all stages of management and risk management including: recruitment, screening, training and orientation, placement, scheduling, day-to-day support, and recognition.

In most ASOs, Volunteer Management could be a full time dedicated position, but the reality is that very few agencies have the funding required to employ a full-time Manager of Volunteers. Instead, many agencies split positions with other roles such as fund development or community development. ASOs often operate within a culture of crisis due to resource shortages, and staff whose time is split between roles often de-prioritize volunteer management. Several Managers of Volunteers regularly experience this situation and expressed the need to dedicate more of their workday towards volunteer management.

² There are real and perceived challenges related to Boards of Directors and the unique role they play. Some directors don't see themselves as general agency volunteers that need to go through standard agency training. Many board members in ASOs have not sat on boards before and there can be confusion by many boards about their role. There was a need expressed by both directors and staff for clarification (and possibly training) for new board members around the roles and responsibilities of the particular board on which they sit (i.e. policy board, working board, etc).

3. ORGANIZATIONAL CLIMATE

The data collected through the Volunteers In Action assessment provides a rich description of AIDS Service Organizations and their inherent relationship with volunteers. In this section, the perceptions that individuals had of ASOs prior to volunteering will be presented along with the realities as experienced by volunteers and Managers of Volunteers.

1. PERCEPTIONS

"I thought they [ASOs] might be focused around dying from AIDS. I was happily wrong. They're mostly about living with AIDS."

HIV/AIDS is a highly stigmatized and politicized field and ASOs have always been directly affected and shaped by this climate. Many ASOs were conceived as a direct response to inaction on the part of government and the general public when HIV/AIDS first emerged. As the epidemic has progressed, ASOs continue to fight for care, support and recognition of the rights of people infected and affected by HIV/AIDS. Within organizations, issues of sustainability and urgent client needs can create a culture of crisis where "putting out fires" takes precedence over long-term planning. Depending on their community of origin, potential volunteers may or may not know of these realities, and their perceptions of ASOs varies. Current HIV/AIDS volunteers had the following perceptions of ASOs in their communities prior to volunteering:

- 46% of the volunteers involved with VIA were unaware of the role of ASOs, the extent of services offered and who could access them;
- 41% had positive perceptions of ASOs and the work they did. Positive perceptions focused around the warmth, support and important work that ASOs exemplify;
- 9% had negative perceptions of ASOs but chose to volunteer anyway. Negative perceptions included: belief that ASOs are full of subcultures, private/secret/unpublic places, poorly run and full of internal politics, and depressing places focused on dying;
- Many expressed a belief that everyone involved with ASOs (volunteers, staff as well as those people accessing services) is HIV positive.
- There was a lack of understanding about the significant role and contribution that volunteers play in ASOs;
- Volunteers believe that ASOs are poorly funded and constantly stretched for resources. *"ASOs do the best they can with limited resources."*

It is important to monitor and address public perceptions because they impact on critical factors such as volunteer involvement and fund development. Organizations with good public perceptions attract new volunteers and donors. Poor public perceptions often translate into ASO staff feeling alone and unsupported.

2. REALITIES

A. Agency Culture: Volunteers are arguably one of the most valuable resources that an organization can have. Agency culture around volunteerism exemplifies the value and attitude that is placed on volunteers and can impact profoundly on the quality of a volunteer's experience. There is agreement amongst both staff and volunteers that agencies value the role that volunteers play, and staff acknowledged that their agencies couldn't run without volunteers. Beyond this, how agency cultures reflect the value they place on volunteers is mixed and at times contradictory.

Managers of Volunteers expressed several disconnects between the value placed on volunteers and the realities of resource allocation, support and demands made on volunteers. There was a general sense that in many ASOs volunteers are taken for granted and under-cultivated. It is perceived that beyond the Manager of Volunteers, the staff and management of many agencies lack the understanding of the need to support and train volunteers appropriately. At the same time there can be an unhealthy reliance and expectation placed on volunteers with an attitude of *"don't worry, we're going to get volunteers to do it."* In some instances volunteers are expected to perform tasks that staff don't want to do and that should be contracted out. For example, unblocking a clogged sink. At times, and without appropriate consultation, volunteers are seen as an after-thought and an easy solution to Human Resource problems for new projects. Managers of Volunteers stated a strong need to sit down with staff and management in their agencies to develop an agency strategy for volunteer management. Appropriate consultation should inform this strategy, and staff orientation to the strategy will ensure effective volunteer management and continuity when either a volunteer or staff person leaves a position.

Volunteers experience varied and complex cultures within the organizations where they volunteer. Throughout BC there is consensus amongst volunteers that volunteer involvement is valued. The majority feel supported and appreciated in their work. They believe that their agencies are good at understanding personal challenges and situations that arise and make necessary accommodations without guilt. Positive agency cultures create a feeling of acceptance, volunteers are treated with respect and have positive interactions with staff and management. On the flip side, some volunteers feel taken for granted and feel disempowered and beaten down if they try to stand up to management or staff for what they believe in. In these circumstances volunteers blame organizational politics, over-stretched resources and an organizational lack of understanding about the value and skill sets that volunteers bring.

B. Managers of Volunteers: Managers of Volunteers are responsible for ensuring that the volunteer human resource needs of an organization are met. Given the heavy ASO reliance on volunteers, this is a crucial role. Despite this, many Managers of Volunteers feel that the profession lacks the respect and credibility it deserves. This is true both within organizations and in the broader HIV and social justice communities. Managers of Volunteers cited examples where they have less opportunities for professional development, support or programming resources than their colleagues in

other departments. For years this role has been referred to as a Volunteer Coordinator, but more recently the term Manager of Volunteers has been adopted to provide a more accurate description and one that has more professional credibility. The provincial and national voluntary sectors have taken leadership in acknowledging and accrediting the profession of Managers of Volunteers. The HIV/AIDS sector needs to do the same. Volunteer management is a paid profession with clear skills, knowledge and experiences and should be regarded with the respect afforded to other professionals. Managers of Volunteers also hold information, skills, and protocol integral to the operation of the agency. When individuals leave their jobs, this information is often lost. Documenting and implementing best practices, standards and policies of management ensures continuity.

Managers of Volunteers who split their time between other agency roles, find that the time required for volunteer management is far more demanding than they had expected or been told. Job interview questions and orientations for staff who will work with volunteers and/or do some volunteer management do not adequately prepare new staff for the realities of their positions. In these situations, *"volunteer coordination is a job within a job."* However, volunteer management items can *"fall through the cracks"* when the manager has other responsibilities. Managers of Volunteers feel they have to conduct volunteer management off the side of their desk and do what they need to in the moment – which often supercedes volunteer management. One volunteer recalled how a volunteer appreciation party had to be cancelled because the manager was too busy.

C. Maximizing Volunteer Skills: Volunteers come from diverse backgrounds and interests outside of the HIV/AIDS field, and can offer a wide array of skills to organizations. Of the volunteers surveyed, the top four skills they possess are:

- computer and technical (58%)
- managerial (42%)
- communications (38%)
- education (36%)

A large majority of volunteers surveyed (71%) felt that their skills and experience were being used to their full potential while 19% did not. Focus group discussions uncovered that many volunteers are satisfied with how their skills are being used, but given the opportunity they could offer much more. This contrasts with many managers' beliefs that the volunteers' skills are being maximized. Organizations need to recognize, take inventory and investigate opportunities for volunteers to expand and/or fulfill more meaningful roles.

3. CHALLENGES

There are common challenges to volunteer management across sectors (arts, sports, cultural, social, health or otherwise)³. The VIA assessment uncovered several unique challenges faced by volunteers and Managers of Volunteers engaged in HIV/AIDS work in BC. These challenges are closely related to many of the social determinants of health and the political landscape related to HIV/AIDS and can be grouped into the areas of recruitment, retention, stigma, health status, personal-professional boundaries, honoraria, and confidentiality.

A. Recruitment: The stigma, isolation, social and cultural barriers related to HIV pose challenges for identifying and recruiting people who are infected and affected by HIV/AIDS. Traditional volunteer recruitment strategies (volunteer fairs, outreach at public events, etc.) tend to yield low results, especially outside of large urban centres. Many people shy away from wanting to publicly identify themselves with HIV/AIDS and go out of their way to avoid the "AIDS booth". For example, in BC many minority groups face additional barriers due to socio-cultural beliefs and values regarding HIV/AIDS. This is particularly prevalent in immigrant and refugee communities where individual and collective denial of HIV exists. Many organizations draw from their client base to build their volunteer pool. Outside of the agency, personal contact through presentations, regional volunteer resource centres, ads in local papers and appeals at business community events have achieved some success at bringing in new volunteers.

Within the ASOs who participated in VIA, volunteer recruitment and placement followed the basic path of: in-depth application form, reference checks, criminal record check (depending on type of volunteer role), interview, a basic HIV/AIDS training and specialized program training.

B. Retention: Volunteers contribute significant amounts of their lives to their volunteer work (57% of volunteers contribute 9 hours or more per month). Within the VIA assessment, individuals have been volunteering from a few weeks up to 23 years; the average length of time volunteering for an ASO is 3.6 years. ASOs throughout the province have a core group of long-term volunteers who often predate staff. These volunteers hold a valuable role in maintaining agency continuity and history. Long-term volunteers can take ownership over programs and projects. Occasionally volunteers resent programming changes and staff may feel held hostage by volunteers. Many volunteers have lived through agency upheavals, staff changes, and funding cuts; the importance and impact of the work keeps them coming back.

Outside of the pool of long-term volunteers natural attrition occurs for a variety of reasons. Volunteers outgrow their roles, life situations change, health status changes, volunteers burn out from overextending themselves, volunteer placements may be inappropriate, Managers of Volunteers are over-burdened, and agency politics create toxic environments. Many of these factors are part of the natural volunteer cycle and necessitate ongoing

³ A listing of volunteer management resources is in the appendix.

recruitment and support, while others are symptomatic of larger agency issues that need to be addressed.

- C. Stigma:** HIV/AIDS is surrounded by stigma and this impacts everyone engaged with ASOs. Much of the stigma around HIV/AIDS is related to judgment, fear and lack of knowledge. Due to religion, moral beliefs, rites of passage and culture, many communities don't want to acknowledge that HIV exists within their communities. Stigma around homosexuality, sex, injection drug use and poverty all contribute to a climate of persecution surrounding HIV/AIDS which in turn creates challenges and barriers for testing, support and education. Stigma impacts potential and existing volunteers in many ways. Some don't want to walk through the door of an ASO for fear of being identified and labeled as HIV positive, gay or a junkie. Others don't recognize the necessity of the work that ASOs conduct. As a consequence, volunteers have lost friends, dealt with negative attitudes in public, had to constantly "explain" themselves, and been (incorrectly) perceived as gay or a "lefty freak" as a result of their volunteer work.

Volunteers and Managers of Volunteers agreed that the ripple effects of volunteerism educate the public, help to reduce stigma, ease tension and fear and draw new volunteers into agencies.

- D. Health status:** *"I can't quit, but it's hard to keep going."* Given that over one quarter of volunteers are HIV positive, individual health status can impact upon volunteer resources. Health concerns outside of HIV can also impact upon the volunteer role. These may include, but are not limited to, psychiatric conditions, Hepatitis C co-infection, and addictions. Ninety-four percent of respondents (HIV positive and negative combined) rated their health status as average or better and 60% reported that their health has at some point impacted on their ability to volunteer.

There are numerous benefits to volunteering, and many HIV positive volunteers said that volunteering impacts their life and health in positive ways. Some indicated that they take on so much volunteer work that it could be impacting their health. Managers of Volunteers shared this concern and indicated the need to recognize limitations and set boundaries to prevent burnout or sickness. This needs to be incorporated into program planning and delivery. Volunteers expressed concern and guilt about getting sick and not being able to do their volunteer work; particularly if they had a cold and couldn't go in for fear of passing it on to people with compromised immune systems. A very serious challenge in working in HIV/AIDS is that friends, clients and volunteers get sick and pass away. Dealing with progressing illness and death takes an emotional toll on staff and volunteers and is dealt with differently from one ASO to another; most have some form of ritual for dealing with a person's death.

- E. Personal-professional boundaries:** People engaged with ASOs are often in the unique position of assuming multiple roles that can at times be contradictory. The roles of client, volunteer, member and staff person frequently overlap causing confusion for the individual and others within the agency. The most prevalent duality is that of client-volunteer. Client-volunteers may feel disempowered as a volunteer and afraid to speak their

mind to staff because they don't want to risk jeopardizing the services they access. When volunteers become employed as paid staff this can cause confusion for other volunteers, and clarity around their new role, responsibilities and boundaries is important. In rare situations, staff may volunteer within the agency where they work. This situation challenges organizational power structures and can be confusing for other volunteers and staff. Furthermore this can result in burnout of the individual.

Member-driven organizations are run by and for a membership which is generally HIV positive. Some members don't see the need to volunteer, jeopardizing the agency's ability to exist. On the flip side, members can have a strong sense of ownership. This can be problematic if members over-reach their role or unfairly challenge or ignore staff who have been hired to fulfill specific roles. Clarity around roles, responsibilities and boundaries helps minimize these situations.

F. Honoraria: ASOs use honoraria as a way of supporting volunteers in the work that they do. In most cases honoraria are designed to cover out of pocket expenses that volunteers may incur in the course of their volunteer work. For example, reimbursement of expenses related to gas, taxis, child-care, and meals. Some volunteers feel that these expenses are just part of the "giving" that they do through volunteering. For others, particularly those on income assistance or disability, the reimbursement of expenses is essential. Some organizations would like to provide honoraria to cover expenses but do not have the funds available to do so. Other ASOs offer honoraria as a form of recognition to volunteers who fill in with "emergency" situations such as a last minute speaking engagement. In other situations volunteers are provided with meal vouchers as a form of recognition and to ensure that they have an opportunity for a meal after or during their volunteer shift. In a few cases volunteers receive regular honoraria for their weekly volunteer shifts.

The challenge with providing honoraria is that volunteers can come to rely on the money as a form of income and if their health fails or Managers of Volunteers need to change the situation, the standard of living for volunteers can be seriously impacted. Furthermore, disparities are created between volunteers who do and do not receive "payment" for the work that they do. In situations where this dynamic exists, the precedent is usually a result of past surplus funds and is not supported by clear rationale or policy. An examination of when and where honoraria are necessary and appropriate and development of policy around honoraria can aid Managers of Volunteers in establishing equitable protocol and expectations with volunteers.

G. Confidentiality: Stigma, fear and the personal nature of HIV/AIDS require a high level of confidentiality when dealing with volunteers and clients. Volunteers and Managers of Volunteers feel that confidentiality is understood and respected. There is, however, an underlying fear, particularly in smaller towns and rural communities, that confidentiality could be breached and an individual could be "outed" as either having HIV or volunteering with an ASO. Volunteers expressed challenges to maintaining confidentiality and had to remember not to inadvertently say "hi" to clients or other volunteers outside

of the ASO. This is particularly challenging for volunteers who know many people.

4. RESOURCES

Within the HIV community, funding for programs and services has and continues to be a challenge. Many, if not all, ASOs would like to increase their funding in order to purchase more resources in the form of staff, supplies, and informational materials. 93% of survey respondents indicated that they are provided with the resources necessary to do their current volunteer work. Discussion revealed that there are numerous gaps and restrictions on what needs to be accomplished. Managers of Volunteers across the province strongly expressed a need to enhance resources in order to better manage and support volunteers and volunteer-based programs. A recurring theme throughout the VIA assessment was the need for resources to provide for:

- Increased staffing and paid hours for volunteer management;
- Increased opportunities for training;
- Expense reimbursement for volunteers;
- Volunteer-based services related to HIV, including increased education, and supports for HIV positive people dealing with addictions and mental illness;
- Complementary care options;
- Access to geographically isolated communities (some ASOs provide services to expansive geographic regions with little funding for travel);
- Improving the “decrepit” state of some of the buildings in which ASOs are housed;
- Current, relevant and local print resources;
- Formal and appropriate volunteer recognition.

5. THE HIV/AIDS VOLUNTARY SECTOR

Within HIV/AIDS there has been a shift to a professional and structured approach to volunteer management that is consistent with standards established by the larger voluntary sector. Within some of the better-resourced agencies, program coordinators who work with volunteers, but are not responsible for the agency’s volunteer management, have taken steps to coordinate their approaches to volunteer management. Managers of Volunteers have recognized the need for professional development and are advocating for resources, time and opportunities to continue developing their skills. This strengthens the capacity of both the staff and agency as a whole to provide quality volunteer-based programs and services. An example of this is the Vancouver-based VISIT coalition of Managers of Volunteers who work at agencies providing services to people infected and affected with HIV/AIDS. VISIT members meet on a regular basis to share skills and experiences and to strategize around how to deal with particular challenges and situations that arise within an ASO context. While this model of collaboration and sharing is possible in a larger city with numerous organizations, it is not replicable in every community in BC.

There are numerous examples of best standards and practice in the broader voluntary sector. Many of these are relevant to the HIV/AIDS context. Several

Managers of Volunteers draw on voluntary sector resources including sectoral trainings, networks and resources. These opportunities exist in many cities and towns throughout BC. A list of resources can be found in the appendix of this report. In addition to sectoral opportunities, there is also a need for specialized practices that reflect the unique needs and challenges of ASOs. Provincial networking and collaboration amongst Managers of Volunteers in different agencies and cities can help to overcome some of the isolation that staff feel. Opportunities to connect with resources and people who can relate to their own experiences and challenges can be found at provincial gatherings such as the skills building sessions offered through the Pacific AIDS Network.

4. MANAGING VOLUNTEERS

1. DIVERSITY

ASOs attract a diverse group of clients, volunteers and staff. Differences in age, culture, religion, immigration status, ability, socio-economic status, sero-status, gender, sexual orientation and life experience can result in competing wants and needs within an organization. Furthermore, people with different beliefs and backgrounds may not be comfortable or familiar with each other. This can lead to tension and misunderstanding. Despite this, an overwhelming majority of volunteers feel safe, comfortable and welcome as volunteers. To engage and support diverse volunteers, Managers of Volunteer need to employ different forms of recruitment, training, supervision, support and recognition. For example, street-involved volunteers working in a front-line meal program have different support and recognition needs than professional counselors volunteering their services to clients. People dealing with HIV-related health issues may require more flexibility in their scheduling than someone who does not have the same issues.

HIV affects marginalized and stigmatized groups in society. Many people volunteering and accessing services at ASOs have dealt with stigma in their lives. It is important to reach out to these individuals and groups and provide culturally competent education and support services. There are, however, many communities where cultural values and beliefs create barriers around HIV education and ASO access. For example, in BC ASOs are seeing increasing numbers of new immigrants and refugees coming through their doors to volunteer their time or access services. Most ASOs do not have the cultural competency to receive or outreach to diverse communities. Consequently, outreach attempts may be seen by communities as undesired external interference.

To address the complex dynamics related to diversity, agencies and staff need to understand the different cultural dynamics at play, and investigate ways to work with diverse communities. Volunteers from South East Asian communities, for example, suggested the need to link with key individuals from communities who would be willing to work from within their community to raise awareness of HIV vulnerabilities, testing and available services. Peer volunteers that individuals can identify with and relate to may increase willingness to become engaged with an ASO. On the flip side, there is also the possibility that seeing a member of one's own community in an ASO might scare someone away for fear of being identified. This is a challenging issue and not one with any quick or easy solutions. Awareness of the issues and efforts to be open and available (i.e. multi-lingual staff and services) will help to minimize and begin to overcome some of these barriers and challenges.

2. SUPPORT

A supportive environment is important in maintaining an effective human resource team of both volunteers and staff. Ongoing supervision, motivation, and moral support contribute to a positive environment. The vast majority of volunteers feel that they work in a supportive environment while some were distinctly unhappy

with the level of attention they received. Of the volunteers surveyed, 94% indicated that they receive the desired amount of supervision. This contrasts with the experiences of Managers of Volunteers in several organizations. Management and paid staff often don't understand the need to integrate volunteer management throughout the agency, and Managers of Volunteers can feel unsupported in their roles.

Some of the key elements that volunteers enjoy as a form of support are:

- Access to paid staff and people in positions of "authority" within the agency;
- Feeling physically safe;
- Staff who advocate for the self-care of volunteers and who set limits to volunteering;
- Mechanisms for expressing concern;
- Regular check-ins with volunteers;
- Volunteer job descriptions;
- Ongoing opportunities to learn new skills;
- Flexibility with scheduling (particularly related to health issues);
- Investing the time to build trust between staff and volunteers;
- Staff remembering volunteer names;
- A friendly rapport with Managers of Volunteers;
- Receiving the same respect afforded to paid staff

Volunteers receive support through the following mechanisms:

- Face-to-face contact (80%)
- Email (73%)
- Phone (54%)
- Social events (43%)
- Team meetings (38%)
- Contact at every shift (27%)
- Personal Meetings (27%)
- Debriefing Sessions (20%)

Managers of Volunteers expressed the need to be recognized by their organizational management and colleagues for their profession and professional role. In some agencies this is done very well and there are strong linkages between management, Managers of Volunteers, and other paid staff who work with volunteers. In such situations there is a clear understanding of the role of volunteers and the need to support them. Communication and standardized volunteer management strategies are in place (i.e. monthly agency meetings focused on volunteerism). Managers of Volunteers whose supervisors are client-service focused find their supervisors don't fully understand the principles and values of volunteerism. Consequently these Manager of Volunteers have difficulty finding the support and supervision that they need. Similarly, staff who have not been oriented to volunteerism may not help create the welcoming environment needed to retain volunteers. Peer-based networks for Managers of Volunteers (i.e. VISIT) provide a valuable opportunity to connect with colleagues, discuss issues related to volunteerism and share resources and volunteer management strategies. Regional volunteer centres such as Volunteer Victoria and Volunteer Vancouver are a good resource and provide opportunities for skill development

3. ORIENTATION AND TRAINING

Training and orientation are important mechanisms for preparing new volunteers for their roles and for enhancing the skills and knowledge of existing volunteers. Some form of initial or “core” training that covers the basics of HIV/AIDS is offered at all ASOs involved with VIA. This training is generally required of all new volunteers although there are some exceptions. For example, some client-volunteers and board directors don’t see the need to attend trainings, and unless training is a consistent requirement for all new volunteers, won’t attend. Many agencies request that staff participate in core training but this is often not enforced or followed. General consensus is that all volunteers, board directors and staff should be required to participate in core training regardless of their experience or background. Orientation provides an overview of the agency and includes agency culture, philosophies, structure, policies, expectations of the role and physical site.

Almost all volunteers participate in some form of training when they begin their volunteer work. 94% of volunteers surveyed indicated that they had received adequate training for their volunteer position. The majority of volunteers (73%) would like to receive ongoing training opportunities, and 80% of volunteers have access to such trainings (either internal or external to the agency). Some longer-term volunteers and staff feel that there has been a general erosion in trainings for volunteers over the past decade. Core training has in many cases been compacted down from 2 full days or more to 1 day or less and for some volunteers this does not allow for enough information to be conveyed. In many cases opportunities for ongoing training have decreased as time and resources have become more scarce. This is particularly noticeable outside of major centres, and volunteers from smaller communities can feel intimidated and overwhelmed by the politics at large provincial meetings.

Core trainings provide basic information about HIV/AIDS including transmission and illness progression. Some also provide information on social determinants of health related to HIV/AIDS, an overview of health and social support services, and other specialized skills. The content of core trainings throughout the Province is currently not standardized and it is felt that sharing resources and training modules that could be adapted to local contexts could be beneficial. Many programs offer specialized trainings that build on the information presented through core trainings. For example, strategies for conducting outreach to gay men. The majority of volunteers would like to see continued or increased opportunities for ongoing training⁴. This is seen as both an opportunity to learn emerging information, develop new skills, maintain connection with the agency and can be a form of volunteer recognition. Specialized trainings and ongoing in-services can be costly to arrange. Cross-trainings with other ASOs or health and social-service agencies within a region is a way of sharing costs and building networks. For example, ASO volunteers providing services in a hospice receive training from both the ASO and the hospice. Finally, mentoring relationships between new and existing volunteers and new and existing staff could be a way to foster confidence and build knowledge.

⁴ A list of desired training topics can be found in the Recommendations section.

4. RECOGNITION

Volunteer recognition is an agency's way of thanking and honoring the work that volunteers do and the contributions they make. Recognition can take many forms and has different meanings to volunteers. As a whole, volunteers involved with VIA appreciate being thanked and recognized and feel that it is important for their agency to give something back to them. Recognition reminds volunteers about why they got involved, builds a sense of team and community, and motivates them to continue volunteering. Some volunteers expressed concern about agency dollars being spent on recognition that they felt could be better spent on client services. However, these volunteers still felt that it was important to be recognized in some form.

Volunteer recognition is often equated with money, but there are many forms that recognition can take and many of them don't require any expense at all⁵. Formal recognition events (annual dinners and parties) and gifts (movie tickets, gift cards, pins) are important and appreciated forms of recognition. Informal recognition such as going for coffee, opportunities to attend trainings or conferences, and potluck get-togethers can have little or no cost and are equally meaningful to volunteers. On the job recognition is one of the most appreciated forms of recognition of all. This includes little things like remembering a volunteer's birthday, enquiring after their partner or children, or just saying "thank you" at the end of a shift.

With limited resources for volunteer management, recognition is sometimes overlooked or combined with other events. Volunteers feel that combined events, such as a recognition event and fundraiser, take away from the sincerity of the gesture. In some agencies, each program recognizes volunteers in different ways, and volunteers may perceive there to be inequities when in reality the cost associated with certain items may not be understood. For example, one program provides regular meal vouchers for volunteers while other programs spend the same money, or less, per volunteer and have two big recognition dinners a year. The volunteers receiving the vouchers do not also receive a dinner and feel that they are being "ripped off."

It is important for management of ASOs to understand the significant contribution that volunteers make to their agencies. Staff receive a regular paycheck to motivate them. Volunteers do not. Recognition motivates volunteers but also makes them feel appreciated and can reduce turn-over. On a less tangible level it can help maintain consistency and a sense of team within an agency. Even with tight agency budgets, volunteer recognition should not be overlooked as it is a crucial part of sustaining volunteer resources.

5. POLICY AND PROCEDURE

Policies and procedures are the foundation and principles that guide an organization in its operations. They can cover areas such as health and safety, volunteer management, human resources, financial management, and drug and alcohol use, and they can be an important reference point for clarifying contentious situations. All ASOs had some policy in place, but none had a complete and comprehensive set

⁵ A comprehensive list of volunteer recognition ideas can be found in the recommendations section.

of policy in place. In most instances policy is a continual work in progress. Many Managers of Volunteers were unsure as to whether or not their agencies had policy in place to cover issues related to volunteers. Health and safety were seen as the most important areas for policy, and most agencies had some form of policy in place to cover this area. Policies related to volunteerism and/or HIV/AIDS organizations can be modified from existing documents and are available online or through contacting other agencies such as Volunteer Vancouver⁶.

⁶ A list of resources can be found in the appendix.

5. THE VOLUNTEER EXPERIENCE

The volunteer experience is determined in combination by the expectations, motivations and interests of the individual volunteer and by the support, climate and activities in which they are involved. The volunteer experience is described here in terms of the contributions that volunteers feel they are making, their satisfaction levels with their experience, and the self-identified benefits derived from volunteering.

1. CONTRIBUTIONS

"If you touch one person it's worth it."

Volunteers give their time for a variety of personal reasons. For many, this translates into a desire to contribute to the agency or HIV/AIDS movement in some way. To retain volunteers it is important that they feel that they are making a meaningful contribution. In the survey, 97% volunteers believe that the work they do is making a difference. This is an important finding and speaks to the passion and commitment of both volunteers and the agencies who support them. For countless individuals, their volunteer work is what brings meaning and purpose to their life: *"I hate my [paid] work life. My volunteer work comes first and is what provides meaning. I would love to do it five days a week."* Some questioned whether their contribution was making a difference but realized that not all roles can see immediate results. Several people wished that they had started volunteering earlier.

2. SATISFACTION

Volunteers were extremely satisfied with their volunteer experience and felt that their volunteer work brought considerable joy and meaning to their lives:

- Overall, 96% of survey participants are satisfied with their volunteer experience.
- 99% of volunteers agree that they get along with other volunteers.
- 97% feel welcomed by paid staff at the organization where they volunteer.
- 98% of volunteers feel physically safe at the organization where they volunteer.

There is, however, room for improvement, and volunteers suggested areas they would like to see change. There is a desire for more meaningful involvement including better use of personal skills and access to more challenging roles. Some volunteers feel agency barriers prevent them from fully participating. For example, not receiving invitations to attend sectoral gatherings such as the Pacific AIDS Network meetings. Participation in such events is considered an important way to maintain connection and learn new skills and information.

3. BENEFITS

"I get back 150,000 times what I put in."

Volunteering gives people a sense of purpose, a sense of connection and opportunities to learn and grow as people. Volunteers who are in recovery say that volunteering gives them a sense of purpose and direction and keeps them occupied and their mind off their addiction. Individuals who are on disability are given a new sense of purpose and are able to develop new skills and keep their minds active and challenged; for some this includes preparing to return to work. People who are isolated due to HIV, sexual orientation, cultural barriers or other issues find that volunteering provides them with the opportunity for social connection.

6. STRENGTHENING THE HIV/AIDS VOLUNTARY SECTOR

1. RECOMMENDATIONS

Based on the findings from the VIA assessment and suggestions put forth from volunteers and Managers of Volunteers, a series of recommendations have been developed. These recommendations are grouped into the areas of: sectoral, policy, organizational development, volunteer management, training and orientation, and recognition. The recommendations are intended as a guide for strengthening volunteer-based programs within the HIV/AIDS sector in BC. They can also be used to inform policy development and for advocacy either within or outside of an agency.

- A. Sectoral:** Develop provincial and regional networks of Managers of Volunteers.
- share resources (including policies)
 - develop peer-based supports for staff
 - combine trainings
- B. Policy and Procedures:**
- Develop agency **policy for volunteerism** including: health and safety, fairness, volunteer management
 - Ensure staff and volunteers are **familiar with agency policy**
 - Develop **procedures** for implementing policies, particularly around dealing with crisis or emergency situations.
- C. Organizational Capacity:**
- Strive for a **strong public profile** for the agency and use all public exposure (media, presentations, workshops) as an opportunity to recruit new volunteers.
 - Educate and advocate with management, staff and boards so that they **understand the value that volunteers bring** to an agency (i.e. in-kind dollar amount, skills, opportunities, compassion). Board and management should set the agency tone around volunteerism.
 - Maintain clear **volunteer statistics** and use these as evidence and support for fund development.
 - Create **dedicated volunteer management** positions (either full or part-time) that is not diluted by other responsibilities. This position should be professional, empowered, and referred to as a Manager of Volunteers.
 - Include **questions on volunteerism** in all staff hiring processes.
 - Distinguish volunteer work from **unpaid overtime**. Staff should not volunteer within the same program or area where they work.
 - Develop **standardized volunteer management** support structures and systems (i.e. monthly support meetings, volunteer recognition plan, annual reviews with volunteers).
- D. Organizational Structures and Processes:**
- **Check in regularly** with volunteers and provide opportunities for regular debriefing.

- Provide Managers of Volunteers with **access** to volunteer management supports and resources both within and outside of the HIV/AIDS sector.
- Establish **communication strategies** to keep volunteers connected and informed about agency news. Consider using: newsletters, email list-serves, websites, bulletin boards, log-books, regular 1-on-1 check-ins and periodic volunteer meetings. Be clear with volunteers when making changes to programs, volunteer roles or the agency, and elicit buy-in.
- Recruit new volunteers through **word-of-mouth** and personal invitations.
- **Reimburse** volunteers for expenses they incur as a result of volunteering (i.e. gas, taxis, childcare). Provide links to other volunteers for carpooling as appropriate.
- Establish an **agency committee on volunteerism** to look at issues pertaining to volunteerism, including: policy and governance, recognition, support and training. This should be comprised of staff and volunteer representatives and be an ongoing open dialogue.
- **Build relationships** with marginalized populations and communities of colour. Connect with key individuals who have community influence and work with them to recruit volunteers.
- **Set limits** for volunteer involvement to minimize potential burn-out and/or negative health impacts from overworking.
- **Be flexible** and provide volunteers with opportunities for change, growth, challenge and advancement within their role.
- Establish and maintain clear **boundaries** between when an individual is volunteering and when they are accessing services.

E. Volunteer Training and Orientation: Volunteers and Managers of Volunteers would like to see increase resources and opportunities for training offered in the following areas:

- Standardized core training content to be shared throughout the province (allowing for and respecting regional, cultural and agency diversity)
- Board development workshops
- Crisis intervention training for front-line volunteers and staff
- Mentorship/shadowing opportunities for new volunteers, board members and staff
- Volunteer management for all new Managers of Volunteers (and provide access for other staff as relevant)
- Client confidentiality
- Emerging information about HIV/AIDS
- Public speaking skills
- Fund development strategies
- CPR and First Aid
- Computer skills
- Addictions
- Mental illness
- Grief and loss
- Practical care skills (i.e. physical care for people who are sick)

F. Volunteer Recognition: Develop a volunteer recognition plan that reflects the diversity of volunteers, motivations for volunteering and personal values. Recognize volunteers throughout the year using a combination of formal, informal and daily recognition ideas. Distinguish between honoraria and paid

work. The following volunteer recognition ideas that have been used with success throughout BC:

- **formal:** pins and certificates for years of service, letters of reference, thank you ads in newspapers, volunteer profiles in agency newsletter, letters/cards of thanks
- **social:** annual recognition dinners/parties, theme events (i.e. Halloween party or Spring tea), bowling nights, picnics, potlucks, program-specific get-togethers, fireside chats
- **gifts:** mugs/key chains with agency logo, birthday cards, gift cards (i.e. Tim Hortons, Starbucks, book stores), Halloween goody bags, tickets to movies or the theatre (many entertainment companies donate these to charities)
- **day-to-day:** saying “hello” and “thank you” to volunteers, coffee chats, bringing food to meetings, offering attendance at trainings

The Volunteers In Action assessment yielded a wealth of data. It is recommended that AIDS Vancouver seek additional funds to conduct further in-depth analysis that was beyond the scope of this project.

2. CONCLUSIONS

Volunteers in Action provides a provincial snapshot of the experiences, perceptions and realities of volunteers and Managers of Volunteers working in AIDS service organizations. Throughout BC, volunteers play an integral role in delivering programs and services and maintaining organizational operations. Volunteers come from diverse backgrounds and experiences and are committed and passionate about their volunteer work. Volunteers report a high level of general satisfaction with their volunteer experience and for the most part are well-supported in their work. ASOs value volunteer involvement and rely heavily on volunteers in their operations, but this does not translate into the supports and resources needed to provide effective volunteer management. Managers of Volunteers are over-stretched and often split their time between competing responsibilities.

Overall, volunteerism in the HIV/AIDS sector is a prevailing resource with many strengths. Steps need to be taken to enhance and solidify volunteer programs and supports. This will ensure that agencies maximize the potential of their volunteers and in doing so optimize their programs and services. Appropriate volunteer management resources and strategies will support this. The establishment of provincial linkages amongst Managers of Volunteers will allow for the sharing of resources and supports that will capitalize on economies of scale. With an investment of time and resources, and a focus on optimizing existing volunteer resources, the HIV/AIDS volunteer sector can reach its full potential and become an exemplary and vital resource in responding to HIV/AIDS.

APPENDIX

Volunteers In Action: Survey Results n = 237

1. What city do you live closest to:

- Vancouver 87%
- Victoria 5%
- Kelowna 3%
- Prince George 2%
- Nelson 1%
- Nanaimo 1%
- Other BC (specify): 2% _____

2. How old are you? _____

Range: 14 – 86
Mean (average): 37.6 yrs
Median (mid-point): 35 yrs
Under 25: 22%
25-34: 25%
35 – 49: 29%
50-64: 18%
65+: 4%

3. Do you identify as:

- Male 48%
- Female 51%
- Transgendered 1%

4. Do you identify as:

- Straight 52%
- Bisexual 11%
- Gay / lesbian 36%

5. Do you have personal experience with injection drug use?

- Yes 10%
- No 90%

6. Which best describes your volunteer involvement:

- Volunteer 76%
- Client and volunteer 24%

7. Do you know your HIV Status?

- HIV-positive 27%
- HIV-negative 65%
- Don't know 7%

If HIV-positive, for how long? _____

Range: 2 – 22 yrs
Mean: 12.3 yrs (55 respondents)
Median: 12 years

8. How long have you been volunteering for an HIV/AIDS organization? _____

Range: 0 – 23 yrs
Mean: 3.6 years
Median: 2 years

9. How many hours per month do you volunteer?

- up to 4 hours 21%
- 4-8hrs 22%
- 9-12hrs 18%
- 13-16hrs 16%
- 16hrs+ 23%

10. Which best describes your cultural/ethnic background? (check all that apply):

- African 2%
- Asian 9%
- Caribbean 1%
- Caucasian 70%
- Latino/Hispanic 3%
- Middle Eastern 2%
- 1st Nations/Aboriginal 6%
- Pacific Islander 1%
- South Asian 2%
- Other (specify): 5% _____

11. Are you currently (check all that apply):

- Working (paid) 51%
- Student 28%
- On disability 27%
- On leave from school or work 3%
- Retired 6%
- Choosing not to work 8%

12. What was your income in the past year?

- Under \$10,000 36%
- \$10,000-\$29,999 32%
- \$30,000-\$49,999 16%
- \$50,000-\$69,999 8%
- \$70,000+ 5%

13. What education have you completed?

- Some high school 11%
- High school 19%
- College/technical 24%
- University 47%

14. What skills do you have (check all that apply)?

- Computer & Technical 58%
- Managerial 42%
- Fine Arts & Design 18%
- Health Professions 19%
- Trades (i.e. carpentry) 9%
- Communications 38%
- Education 36%
- Activism 28%

15. What type of volunteer work have you done in the past year (check all that apply):

- Administrative (front-desk, mail-room, secretarial, etc) 46%
- Professional services (counselor, nutritionist, etc) 15%
- Board of directors 22%
- Outreach and education (public speaking, bath-house outreach, needle exchg) 26%
- Support services (peer counseling, food distribution) 43%
- Fund development, public relations/communications 17%
- Special events. 51%

16. Of the responses below, which best describes your reason for volunteering at an HIV/AIDS organization? (Check 1 only)

- My life has been affected by HIV/AIDS 19%
- To meet other people affected by HIV/AIDS 3%
- I was already a client/member 3%
- I wanted to give something back to the community 32%
- I was already a financial donor and wanted to give time 2%
- To learn new skills, knowledge and understanding 14%
- Requirement for school/work (i.e. a practicum) 2%
- To be part of a larger team or movement working towards social change 32%

17. How did you hear about your volunteer opportunity (check all that apply):

- Volunteer centre 14%
- Newspaper 6%
- Friend/family 38%
- Brochure 7%
- Internet/website 23%
- Volunteer fair 5%
- Television 2%
- Events 12%
- Other (specify): 15% _____

18. What was your perception of AIDS service organizations before you became a volunteer? (open-ended)

Good/positive: 41%
Poor/negative: 13%
No existing perception/unaware of ASOs: 26%

19. "I get along with other volunteers"

- Strongly agree 68%
- Agree 31%
- Disagree 1%
- Strongly disagree 0%

20. "I feel physically safe at the organization where I volunteer."

- Strongly agree 70%
- Agree 28%
- Disagree 1%
- Strongly disagree 1%

21. "I feel welcomed by paid staff at the organization where I volunteer."

- Strongly agree 74%
- Agree 23%
- Disagree 3%
- Strongly disagree 0%

22. "Overall, I am satisfied with my volunteer experience."

- Strongly agree 69%
- Agree 27%
- Disagree 1%
- Strongly disagree 1%

23. "I believe that the work I do is making a difference."

- Strongly agree 65%
- Agree 32%
- Disagree 2%
- Strongly disagree 1%

24. "I continue to volunteer because:"

25. Does the organization where you volunteer have a paid Manager/Coordinator of Volunteers?

- Yes 93%
- No 5%

26. "I feel supported by paid staff where I volunteer."

- Strongly agree 69%
- Agree 26%
- Disagree 2%
- Strongly disagree 1%

27. "I received adequate training for my volunteer position"

- Strongly agree 57%
- Agree 37%
- Disagree 5%
- Strongly disagree 1%

28. Does the organization you volunteer with provide access to ongoing training opportunities (either internally or externally)?

- Yes 80%
- No 19%

29. Would you like to receive ongoing training opportunities?

- Yes 73%
- No 24%

If yes, in what topic areas? (specify):

30. "Within my current volunteer role I believe that my skills and experience are being used to their full potential."

- Strongly agree 39%
- Agree 32%
- Disagree 16%
- Strongly disagree 3%

31. "It is important to me to have the opportunity to provide input into the program I volunteer with."

- Strongly agree 56%
- Agree 39%
- Disagree 5%
- Strongly disagree 0%

32. "I have the opportunity to provide input into the program I volunteer with."

- Strongly agree 45%
- Agree 43%
- Disagree 10%
- Strongly disagree 2%

33. "I am provided with the resources and supplies necessary to do my volunteer work."

- Strongly agree 58%
- Agree 35%
- Disagree 6%
- Strongly disagree 1%

34. "I receive the amount of supervision that I need."

- Strongly agree 61%
- Agree 33%
- Disagree 4%
- Strongly disagree 1%

35. What kind of ongoing support do you receive from your Manager or Coordinator of Volunteers? (check all that apply):

- Face-to-face 80%
- Phone 54%
- Email 73%
- Contact at every shift 27%
- Team meetings 38%
- Personal meetings 27%
- Debriefing sessions 20%
- Social events 43%

36. How would you describe your health today?

- Excellent 53%
- Good 33%
- Average 8%
- Fair 5%
- Poor 1%

37. Does your health status ever impact your ability to volunteer?

- Often 6%
- Sometimes 19%
- Occasionally 35%
- Never 39%

38. How would you most like to be recognized for your volunteer efforts (check one only):

- Social events (parties, dinners) 25%
- Recognition items (certificates, pins, letter of thanks, newsletter), 9%
- New opportunities (letters of reference, training, more responsibility) 33%
- Gifts (tickets to events, t-shirts) 10%
- Agency membership 2%
- I prefer no formal recognition 24%

Volunteers In Action
Focus Group Questions – VOLUNTEERS

1. What was your impression of HIV/AIDS organizations before you became a volunteer?
2. What is your main reason for volunteering at an HIV/AIDS organization? What keeps you coming back?
3. Describe your volunteer experience. Is it what you expected? Why or why not?
4. Do you experience any challenges in volunteering with an HIV/AIDS organization?
5. Is there anything you would change about your volunteer experience?
6. Does your agency value volunteer involvement? Why or why not?
7. Describe how your agency supports you in your role. How does your manager or coordinator support you?
8. Do you feel you received adequate preparation for role? What kind of ongoing training is available to you? Is there any additional support that you feel your agency could provide to you?
9. Do you feel your volunteer work is meaningful? Do you feel your role makes a difference?
10. How does your agency recognize the work that you do? Does this work for you? How would you like to be recognized?

Volunteers In Action

Focus Group Questions – MANAGERS OF VOLUNTEERS

1. Describe your position as a paid staff person who supports and works with volunteers at an HIV/AIDS organization (size of agency, number of volunteers, dedicated/vs. non-dedicated Manager of Volunteers)
2. What is your main reason for working at an HIV/AIDS organization? What keeps you there?
3. Describe your experience as a Manager of Volunteers in an HIV/AIDS organization. Is it what you expected? Why or why not?
4. Do you experience any unique challenges to working with volunteers in an HIV/AIDS organization? (recruitment, training, retention, health, populations).
5. Describe how your agency supports volunteer involvement? Does your agency have policies and procedures that recognize and support volunteer involvement?
6. How does your agency support you in your role? Is there any additional support could your agency be providing to you in your role? (professional development, dedicated paid Manager of volunteers, etc.).
7. How do you provide support to your volunteers? (training, supervision, debriefing, recognition, other).
8. How do you recognize your volunteers? Is this sufficient?

**Volunteers In Action
Engaging Volunteers in the HIV/AIDS Sector
Participant Information (Volunteers)**

The Volunteers In Action Assessment is led by AIDS Vancouver with support from VISIT (a coalition of Managers of Volunteers that provide leadership and support to the HIV/AIDS community).

Volunteerism is at the heart of the HIV/AIDS movement. To strengthen volunteer opportunities and support, a provincial assessment of volunteerism in the HIV/AIDS sector is being conducted. This assessment includes a survey and focus groups with volunteers and Managers of Volunteers at HIV/AIDS organizations in Victoria, Prince George, Kelowna and Vancouver.

This focus group is for people who have been actively engaged as a volunteer at an HIV/AIDS organization within the past 12 months. The purpose of this focus group is to explore who volunteers with HIV/AIDS organizations, and what the experience is like.

Individual responses will be kept confidential by the project team, and findings will be presented in general terms with no individual or agency identification. Your candor is appreciated. Participants are asked to respect the contributions of others, and the privacy of those who may disclose personal information in the session. Participants are requested not to disclose personal information about other participants outside of the focus group setting. The focus group will be tape-recorded and the transcripts and tapes will be protected.

Participation in this focus group is completely VOLUNTARY. The focus group will take approximately 90 minutes. You may choose not to answer any question, and may withdraw at any point in time. We do not anticipate any risks from participation, and the benefit of taking part is the potential enhancement of support strategies for volunteers.

By participating in this focus group you will be contributing to the development of the HIV/AIDS volunteerism sector. In recognition of your contribution to the Volunteers In Action Assessment, you will receive a \$30 honorarium.

Findings and recommendations from the assessment will be made available to HIV/AIDS organizations throughout BC in the summer of 2005.

For further information about Volunteers In Action please contact:

Andrew Barker, Volunteers In Action Project Manager: 604.683.1757 or ajbarker@telus.net.

Parm Poonia, Manager of Volunteers, AIDS Vancouver: 604.893.2212 or parmp@aidsvancouver.org.

As a volunteer who works in the HIV/AIDS community, we value your input and appreciate your candor and participation in this focus group.

SUMMARY OF VISIT VOLUNTEER PROFILES

AGE	<ul style="list-style-type: none"> ➤ Ages range from 15 – 78 years ➤ 19years being minimum age for all VISIT members; exception with A Loving Spoonful and YouthCO AIDS Society
GENDER	<ul style="list-style-type: none"> ➤ female 50 – 55% ➤ male 45 – 50 %; exception being BCPWA where male is 80% and female is 20%
ETHNICITY	<ul style="list-style-type: none"> ➤ all members reported diverse ethnic groups; exception with ASIA where volunteers are mostly of Asian descent ➤ Caucasian ➤ Asian ➤ South Asian ➤ Latin ➤ African ➤ Aboriginal
SKILL SETS	<ul style="list-style-type: none"> ➤ Computer / Technical ➤ Arts ➤ Sciences/ Health Care Professionals ➤ Trades ➤ Managerial ➤ Writers, Educators and Community Activists
BACKGROUND	<ul style="list-style-type: none"> ➤ Students (diverse, but many in medical / sciences field) ➤ Professionals in various fields ➤ Healthcare workers ➤ Service industry ➤ The Arts
MOTIVATION	<ul style="list-style-type: none"> ➤ Interested in HIV/AIDS and related issues ➤ Academic goals ➤ Professional goals ➤ ESL students ➤ Want to give back to the community ➤ Personal growth and development ➤ Receive(d) support and services from organization ➤ Friend/family member living with HIV/AIDS
AVERAGE LENGTH OF RETENTION	<ul style="list-style-type: none"> ➤ 6 month s to 1 year
REASONS FOR ATTRITION	<ul style="list-style-type: none"> ➤ Change in schedule ➤ Relocation ➤ Time and commitment changes with school / work ➤ Health issues ➤ Agency / volunteer experience was not a good “fit” ➤ Burn out
PREVIOUS VOLUNTEER EXPERIENCE	<ul style="list-style-type: none"> ➤ Yes for majority of volunteers ➤ Average 30 – 60 %; YouthCO reporting 90%

LISTING OF RESOURCES FOR MANAGEMENT OF VOLUNTEERS

Management Courses

Volunteer Vancouver: on-going workshops <http://www.volunteervancouver.ca/>

Charity Village Learning Institute: list of management course in Canada and the States
<http://www.charityvillage.com/CV/learn/index.asp>

Resources - Hardcopy

General/Management/Key Topics:

Canadian Code for Volunteer Involvement: available through Volunteer Vancouver

Volunteer Management: Mobilizing all the Resources of the Community. McCurley, S.; Lynch, R. Downers Grove, Illinois, Heritage Arts Publishing 1996

Stronger Together: Recruiting and Working with Ethnocultural Volunteers
[Central Volunteer Bureau of Ottawa-Carleton](#)

Volunteers and the Law
The People's Law School, Vancouver, 2000

Building a Stronger Voluntary Sector
The Voluntary Sector Initiative, 2002

Developing Programs:

Measuring Up: Assessment Tools for Volunteer Programs. McCurley, S.; Vineyard, S. Downers Grove, Illinois, Heritage Arts Publishing. 1997

Creating Bridges: A Practical Planning Guide and Checklist for the Development of a Cross-Cultural Volunteer Program. LEVANT, R.; SEEL, K. Volunteer Calgary. 1995

Training:

Training Staff to Succeed with Volunteers: The 55-Minute In-Service series STALLINGS, B. Pleasanton, California, Building Better Skills. 1996

Recognition:

Beyond Banquets, Plaques and Pins: Creative Ways to Recognize Volunteers and Staff
VINEYARD, S. Downers Grove, Illinois, Heritage Arts Publishing. 1989.

Resources - Online

Key Organizations:

Administrators of Volunteer Resources of British Columbia - <http://www.avrbc.org>
Canadian Administrators of Volunteer Resources - <http://www.cavr.org/>
Canadian Centre for Philanthropy - www.ccp.ca
Charity Village - www.charityvillage.ca
Leadership Vancouver - www.leadershipvancouver.org
Volunteer B.C. - www.volunteerbc.bc.ca
Volunteer Burnaby - www.volunteerburnaby.ca
Volunteer Canada - www.volunteer.ca
Volunteer Vancouver - <http://www.volunteervancouver.ca>

Key Initiatives and Resources in the Voluntary Sector:

AIDS Volunteer – a virtual resource for ASOs - <http://www.aidsvolunteers.ca>
CIVICUS - www.civicus.org
Coalition of National Voluntary Organizations - www.nvo-onb.ca
E-Volunteerism - www.e-volunteerism.com
Giving and Volunteering - www.givingandvoluntering.ca
Go Volunteer - www.govolunteer.ca
Virtual Volunteer Resources - <http://www.serviceleader.org/new/virtual/>
Voluntary Sector Forum - www.voluntary-sector.ca
Voluntary Sector Initiative (VSI) - www.vsi-isbc.ca
Voluntary Sector Knowledge Network - <http://vskn.ca>
Volunteer Internet Resources - <http://www.volunteertoday.com/internetresources.html>

Board Development:

Board Match Fundamentals - www.boardmatch.org
Board Source - www.boardsource.org

Other Useful Links:

Association of Fundraising Professionals - www.afpnet.org
Vancouver Chapter - <http://www.afpvancouver.org/>
Australian Non-profit Management Resource Guide - <http://www.governance.com.au/ResourceGuide/ResourcesGuideHome.htm>
Canadian Association of Gift Planners - www.leavealegacy.ca
Canada Revenue Agency - www.cra-arc.gc.ca
Charity Job Search - www.charityjobsearch.com
Citizenship and Immigration Canada - www.cic.gc.ca
Developing Human Resources in the Voluntary Sector - www.hrvs.ca
Energize Inc. - www.energizeinc.com
Give Meaning - www.givemeaning.com
Non-Profit Good Practice Guide - <http://www.nonprofitbasics.org>
Non Profits Can - www.nonprofitscan.ca
Points of Light Foundation - www.pointsoflight.org
Spirit of Vancouver - www.boardoftrade.com/sov_page.asp?pageID=56
The Red Book *Online* - www2.vpl.vancouver.bc.ca/redbook
United Way of the Lower Mainland - www.uwlm.ca
Vancouver Board of Trade - www.boardoftrade.com
Vancouver Foundation - www.vancouverfoundation.bc.ca
2010 Olympic and Paralympic Winter Games - www.winter2010.com