

COLLABORATION BETWEEN VOLUNTEERS AND PROFESSIONALS, A CHALLENGE TO HEALTH AND SOCIAL CARE ORGANISATIONS

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INTRODUCTION

According to the survey „cultural shifts in Flanders“ 19.1% of Flemish people are engaged in voluntary work (Studiedienst Vlaamse Regering, 2006). This means that over 1,000,000 people are doing all kinds of unpaid voluntary work on a regular basis. These volunteers are active in various organisations and sectors. This article focuses on voluntary work in the health and social care sector. There is no concrete figure on the number of volunteers in these kinds of sectors. The fact is that a lot of social organisations attract volunteers to a range of activities. Sometimes tensions arise between the professionals and the volunteers. A research project was set up in 2009 to develop useful tools to handle confidential information in voluntary work (Wouters, 2009). According to organisations for volunteers, this was an important issue between professionals and volunteers working together. 120 volunteers and twelve volunteer coordinators were interviewed for this project in various districts of Flanders and in surrounding areas. The interview was about the kind of voluntary work they have done. Cooperation between professionals and volunteers was a key issue in all these interviews.

THE UNIQUE PLACE OF VOLUNTEERS IN HEALTH AND SOCIAL CARE

Looking at the variety of tasks volunteers sometimes have to do, it is not so easy to indicate what gives them their unique place in an organisation: what makes them different from the professionals? Sometimes you can get the impression that they are considered to be cheaper workers, which in times of cuts in social care can be a pitfall. „In an era in which governments are seeking to reduce expenditure on human services, community-based programs provide an excellent way for this to occur and represent a form of „services on the cheap“. This is particularly true to move from institutional care to community care for dependent people, where the high costs of institutional care can be reduced“ (Tesoriero, 2010). Besides this, unions are likely to support voluntary work because of its positive effect

on social cohesion. But they warn that this can oust lower educated from the labour market and can even lead to a system of black work. This discussion on the possibilities of paying volunteers a lump sum for their costs pops up and on how much this can be. So it is important to look what precisely determines the unique place of volunteers in the welfare and health sector. The question that arises is; how do we find this? To find the answer to this question, we went back to the research project and indicated aspects in good practice that often return in the stories of volunteers. We find good practice in organisations in which volunteers are well integrated. This means that they have their own place, are recognized by the whole organisation and can contribute to a pleasant living and/or working atmosphere.

THE CORE ASPECT IS THE RELATIONSHIP

The relationship between volunteers and residents/patients/clients is one of the core aspects in the health and social care sector. For them it is easier to talk to volunteers than to professionals, because they are at the same level. Thanks to this, they can build up a relationship of trust, especially when the volunteers have regular and/or longer contacts with the same person. The research project shows that volunteers more often get confidential information than professional staff. This is a result of the low barrier between the volunteers and the people they take care of.

Volunteers can spend more time and do not have to take into account waiting lists or a full waiting room. They can be present and listen. Another positive aspect of the relationship of trust is that volunteers are not perceived as part of a system. They do not have to give an indication or a label that has consequences for the care someone gets, for example. One of the most positive effects on the relationship is maybe the fact that a volunteer can start from scratch. That is maybe one of the most positive characteristics of their relationship. Concerning the contact, at their pace, the resident/patient/client can reveal themselves within the boundaries they set out. Not being judged because of information in a file, a label or a diagnosis given, contributes to having the strongest and most reliable relationship. We discovered that volunteers and professionals from organisations that have a strict policy about the information a volunteer gets, are enthusiastic about the way contact can be built up. This creates a new dimension to the care given by the volunteers.

IMPLICATIONS FOR A POLICY ON VOLUNTEERS IN AN ORGANISATION

It is very important that organisations outline a policy for volunteers in their organisation. A part of this policy should be that attention and care is given to what makes volunteers different from professionals. Some obstacles may arise when organisations try to come up with a policy for volunteers.

Volunteers feel very engaged in and loyal to the organisation and to the professional team. Therefore, some organisations involve them in all kinds of team meetings and procedures. This might not be a problem, but the needs and aims of participating in this have to be thought of, so the volunteer can be regarded too much as a part of the system of care. One of the project's organisations systematically involved volunteers in patient briefings, because volunteers felt recognized by the professionals. However, a disadvantage appeared to be that volunteers were more preoccupied with or biased towards the patients they took care of. They become more as one of the many professionals taking care of them. They become in a way more valuable than the many professionals who are taking care of them. In this case, the organisation can search for ways to create involvement and recognition in another way.

When looking at the tasks volunteers can take up, an organisation has to find out where this specific relationship of trust, this unbiased contact, can be very important. Taking this into account, the conclusion of which tasks can be done by volunteers can be different. Voluntary work creates a lot of opportunities to volunteers as well as to organisations. Long-term voluntary work is always built on a relationship of reciprocity. The balance between give and take is very important. Volunteers in the health or social care sector are people who are willing to and able to give much. Therefore, it is very important to take care of them and create a way in which they feel supported in their work. Education and even consultation with other colleagues are crucial to create possibilities to meet each other and to exchange experiences.

IMPLICATIONS FOR THE COLLABORATION BETWEEN VOLUNTEERS AND PROFESSIONALS

Cooperation between professionals and volunteers is not just plain sailing. On the one hand, volunteers often do not feel recognized nor do they feel as a full member of a team. In the interviews, they indicated, however, that this is mostly compensated by the gratefulness they get from the people they care for. On the other hand, we also have to

consider the professionals" perspective. Caring is being increasingly associated with voluntary efforts. New social policy initiatives and political ideologies reveal a contrast in the values of volunteers and those of professionals. They also portray the volunteer as capable of expressing care in its "pure form": there is no self-interest in their work, they operate outside the structures that make professional work look so bureaucratic and rule-driven, their own life experience gave them moral authority and they are the representatives of "common sense".

Volunteers can be seen as figures possessing all the positive qualities which were previously eliminated from social professions (Lorenz, 2002). Professionals that have made a conscious decision and who want to do their jobs with passion also think it is very important to build up a good and trustful relationship with people. Moreover, it is crucial to give quality care. Norcross (2011) states that the best research available clearly shows the healing qualities of a therapy relationship as well as the beneficial value of adapting this relationship to the patient"s characteristics beyond diagnosis. At work, however, professionals are confronted with an increase of time pressure. In addition to this, managerialism has entered the social work and the care sector. Working with procedures and protocols and presenting figures and results have also become indispensable. So, the helping relationship is more and more under pressure which leads to volunteers taking over this aspect of the job.

A good voluntary policy must also pay attention to the cooperation between volunteer and professional. Special attention should be paid to recognizing commitment and the burden of the professional as well as of the volunteer. This means that an organisation does not just put volunteers in a team or a department but that it opts for a dialogue between volunteers and professionals in which needs, wishes and ambitions of both parties are listened to.

TO LOOK AFTER CONFIDENTIAL INFORMATION

Another aspect of cooperation is how volunteers deal with confidential information. Professionals or volunteers who act in an „essential confidential relationship" have professional secret, that is part of the penal Code in Belgium. Van der Straete (2005) defines this „essential confidential relationship" as a helping relationship in which the client needs to give confidential information in order to receive help. This help is based on the mutual exchange of information. So, the person that provides help not only needs the information to do an intervention, but exchanging information is a part of the process. Depending on the

task, volunteers are bound to this professional secret. But all volunteers have to be discrete with information they receive.

Based on advice of the ethical commission of Het Vlaams Welzijnsverbond (2006), we want volunteers to pay attention to three core aspects: trustful relationships, carefulness and responsibility.

Volunteers in the health and social care sector often build up a relationship based on trust with the people they take care of. As mentioned before, this is of great value. So, one has to be aware that information, given by clients/patients/residents, is part of this relationship. So exchanging this information, even with professionals in the same team, can damage the relationship, because the person had no intention to share this information, even to professionals that care for them as well. So every time a volunteer thinks they need to share information, they have to consider what effect this will have on their relationship.

Carefulness means to us „to handle with care“ but also „to be secure“. When one hears, sees, receives personal information, the volunteer always has to deal with this information with great care. Transparency on the type of information has to be shared and it is essential with whom the information is shared. The first rule is that all information that arises from a relationship of care or help is not meant to spread around and is strictly personal. If one thinks it is necessary to share this information, because of the quality or possibilities to offer help, then the person themselves is best placed to bring their own story. Many volunteers have good intentions when they decide to share information with others. Some simple questions can give insight and another perspective on a situation and maybe there is no need to „tell the story“. Why should I give this information? Who is in the best position to pass on the information? Who needs the information and which part of the information I have is necessary to organise the best help? How do I share this information? In an informal way? Does this information become part of the file and who has access to the information?

Being a volunteer also means acting responsibly. This means that volunteers have to establish a climate that stimulates discretion. There is also the responsibility for the relationship. As human beings, we balance between autonomy and connectedness. So interaction and sharing information about ourselves is part of our lives. In this interaction a helping network can be built up. Contemporary social work and care need to stimulate people in networking to find and keep support on the long term. At last there is the responsibility to society. Giving and sharing information is necessary to establish efficient and effective care.

NEW TYPE OF VOLUNTEERS AND PROFESSIONALS

According to most volunteers who took part in the research project, being a volunteer appeared to be somehow old-fashioned. However, all research indicates that this is not the case. The number of volunteers is stable or is even rising slightly, but there is more variety in the kind of voluntary work they do (Beullens, 2007). Traditional volunteers were part of an ideological movement like the Church. Nowadays, new movements and organisations with specific aims arise and in many cases they are attractive to „new volunteers“. Hustinx (2003) made an overview of characteristics of old and new volunteers. Old volunteers identify themselves with traditional cultural identities of responsibility to the community or society. They volunteer on a regular and long-term basis and are very loyal to their organisations. They consider the professionals as the central authority. The culture of new volunteers is more oriented towards individuality and self-identity. They are looking for their own identity and the meaning of life. They are into short-term engagements and clearly defined tasks with fewer limitations to organisations. This kind of volunteering stands for the professionalisation of voluntary work and volunteers present themselves more as experts. An example of this type of voluntary work in social work in Flanders is volunteers who work for Youth at Risk. This project, based on voluntary work, targets the group of youngsters that have committed a crime. Together with a volunteer, they work on three concrete personal goals during nine months. The volunteer is the assistant and the coach during this period. This well-outlined, limited voluntary commitment is attractive to new volunteers. It is clear that professionals are confronted with another type of volunteers. It is not the person, who is overshadowed by the professional, but they need attention and you should have consideration for them. Professionals need a flexible, transparent attitude and have to opt for a dialogue with them. This cannot be taken for granted and organisations have to be aware of this.

CONCLUSION

In this article we focused on some aspects of the collaboration between professionals and volunteers. We stated that volunteers do more than just lighten the workload of professionals or do unpaid work that would not be done without them. An organisation needs to pay attention to many points in its volunteer policy. Specific needs and motivation, underlying values of professionals and volunteers and the unique place and role of volunteers are very important issues. The new type of volunteer has specific expectations,

but this is also the case for (new) professionals. Therefore, an organisation needs to organise and stimulate a dialogue between volunteers and professionals.

REFERENCES

BEULLENS, K. S. B., 2007. *Vrijwilligers onder de loep. Een literatuurstudie*. Turnhout: Vormingplus Kempen.

Ehische commissie Vlaams Welzijnsverbond., 2006. Zorgvuldig omgaan met informatie-uitwisseling in het welzijnswerk. *Tijdschrift voor welzijnswerk*, 30 (279).

LORENZ, W., 2002. The Social Professions in Europe. *European Journal of Social Education*, pp. 10-11.

NORCROSS, J. L. M., 2011. *Relationships that Work. Evidence Based Responsivness*. New York: Oxford University Press.

Studiedienst Vlaamse Regering, 2006. [Online] Available at: <http://www4.vlaanderen.be/dar/svr/Cijfers/Pages/Excel.aspx> [Accessed on 15 May 2012].

TESORIERO, F., 2010. *Community Development. Community-Based Alternatives in an Age of Globalisation*. Frenchs Forest: Pearson Australia.

Van der Straete, I. P. J., 2005. *Beroepsgeheim en hulpverlening*. Brugge: Die Keure.

WOUTERS, W. H. K. P. J., 2009. *Omgaan met vertrouwelijke informatie. Praktische handvaten ten behoeve van vrijwilligers in de welzijnszorg*. Geel: unpublished