



**Rapid Review of Literature Concerning the Health and Well-being Impacts of
Volunteering for Older People**

(October 2014)

**Dr. Daryll Archibald
Research Fellow**

Scottish Collaboration for Public Health Research and Policy (SCPHRP)

University of Edinburgh

Email: Daryll.Archibald@ed.ac.uk

1. Introduction

An increase in the population of older people in Western countries brings with it stern challenges to health care services and public economies. However, when people retire from work they often do so in reasonable health and a desire to stay active. With that in mind, a useful way for older people to keep active, socially connected and involved in their communities is to engage in voluntary work (Wagnet 2010). Through this type of work older people can potentially make a significant contribution to the lives of others by contributing to services of economic and social value (Von Bonsdorff & Rantanen 2011).

Volunteering in later life can improve physical and mental health, provide an opportunity for personal development, and to build and pass on skills and knowledge (Warburton 2006). The Scottish Government estimates that 30 per cent of people aged 50-59, 26 per cent of those aged 60-74 and 15 per cent of those over 75 give up their time to some kind of voluntary work (<http://www.scotland.gov.uk/Topics/People/OlderPeople/Learning/Volunteer>). In general older people are less likely than younger age groups to engage in voluntary work. However when they do they are likely to commit more time to these activities. Nevertheless, previous studies have found that those volunteering in later life are more likely to be from higher socioeconomic groups, be married, have larger social networks and be in reasonable health (Onyx & Warburton 2003)). Thus it is currently unclear whether health benefits are derived from volunteering or if healthier people are choosing to volunteer (Naylor et al. 2013).

2. Aim

The aim of this brief rapid review is to concisely identify the most salient health and well-being impacts of volunteering for older people.

3. Objectives

The wider objectives of the rapid review are to:

- Review and summarise existing methodologically diverse literature that considers the health and well-being impacts of volunteering for older people.
- Describe what is currently known about the health and well-being benefits that volunteering can have on the lives of older people.

- Identify barriers to volunteering for older people.
- Identify factors that motivate older people to volunteer.
- Identify the key research gaps in the field.

4. Methods

The following four-stage sequential approach was undertaken:

- i. Most recently published (<5years) review-level literature was identified.
- ii. When available, the search strategies used in identified reviews were used to undertake updated searches of databases (e.g. MedLine, Embase, CINAHL, ERIC, ISI Web Of Knowledge) to identify any primary literature published after included reviews were published or not included in the published reviews.
- iii. Studies from western countries published in English and using diverse methods (i.e. RCTs, observational methods, mixed methods and qualitative) were included in this rapid review.
- iv. Website searching was also used to identify relevant grey literature.

5. Findings

5.1 Included Studies

Three systematic reviews published within the last 5 years that considered the health and well-being impacts of volunteering in later life were included. Three further primary studies that were either published after the systematic reviews or were not included in any of the systematic reviews were also published. Five further non-peer reviewed reports (grey literature) were also included in this rapid review.

Table 1: Included studies by type (i.e. review, primary study, grey literature)

Type of Study	Author	Studies Included in Review
Review	Cattan et al. (2011)	n=22
	Von Bonsdorff & Rantanen (2011)	n=16
	Anderson et al. (2014)	n=73
Primary studies not included in one of the included reviews	Pillemer et al. (2009)	
	Parkinson et al. (2011)	
	Bushway et al. (2011)	
	Mike et al. (2014)	
Grey literature	Davis Smith & Gay (2005)	
	Warburton (2006)	
	Lee (2008)	
	Wagnet (2010)	
	Watson (2014)	
Total included: n=12		

The evidence reported in the three included review studies will form the bulk of this rapid review. Each of these reviews had a different focus. For example, Cattan et al. (2011) included quantitative and qualitative studies that focused on the benefits of volunteering on older people’s quality of life, Von Bonsdorff & Rantanen (2011) focused only on quantitative population-based longitudinal

studies concerned with health and well-being impacts of volunteering for older people, whilst Anderson et al. (2014) focused on quantitative and qualitative studies reporting results on outcomes associated with the psychosocial functioning impacts of volunteering for older people.

The majority of research on the topic of the health and well-being impacts of volunteering on older people has been conducted in the United States, Canada and Australia using data from a small number of longitudinal studies. Indeed, the review by Von Bonsdorff & Rantanen (2011) for example included 16 studies from the US which used data from three population based prospective data sets and one RCT.

5.2 Definitions of Volunteering

Volunteering is defined as an activity that is freely chosen, does not involve remuneration and helps or benefits those beyond an individual's immediate family (Cattan et al. 2011). Formal and informal forms of volunteering are also distinguished in the literature. What distinguishes formal from informal volunteering is observed in the stronger sense of obligation that is apparent in informal volunteering examples of which are caring for close relatives. Formal volunteering instead is more dependent on the ability and opportunity of the helper and is co-ordinated by public agencies, non-profit agencies, religious organisations, or via government programmes covering disparate activities (Von Bonsdorff & Rantanen 2011). Examples of such activities are tutoring, mentoring, instrumental, supportive or non-skilled; skilled or unskilled assistance technical advice and public safety (Von Bonsdorff & Rantanen 2011). Each of the three reviews included here (and indeed the remaining primary and grey literature) focus on differing forms of formal volunteering.

5.3 What is currently known about the benefits volunteering can have on the lives of older people?

5.3.1 RCT Evidence

Only one RCT (conducted in the USA and titled 'Experience Corps') has been undertaken internationally to investigate the effects of volunteering in older people. Publications from this RCT are included in each of the three included reviews). As it is the only RCT that has been conducted on this topic world-wide, the design and results of the study will be briefly stated firstly.

The Experience Corps RCT randomly assigned older adults (n=128 predominantly Afro-American aged 60 and over) to either a waitlist control group, or to groups of 15–30 volunteers working in public elementary schools across the USA. Volunteers served an average of 15 hours a week, and performing activities such as supporting literacy development in kindergarten (pre-school nursery), supporting library functions, teaching children conflict resolution through problem solving and play, and enhancing school attendance (Anderson et al. 2014).

A wide range of objective measures of physical and cognitive functioning were assessed. The key findings are as follows:

- Providing high commitment support to young children at school increased the physical, social and cognitive activity levels of older people significantly, reduced depressive symptoms and increased quality of life (Cattan et al. 2011).
- Volunteering was associated with increases in the estimated amount of physical activity in which older people engage in their everyday lives and these gains were maintained 3 years later (Anderson et al. 2014).
- Volunteering was associated with improved self-reported strength and objectively measured walking speed over time (Anderson et al. 2014).
- Elderly volunteers experienced improvements in cognitive and physical functioning (Von Bonsdorff & Rantanen 2011).
- The protective benefits associated with volunteering were amplified if volunteers:
 - i. Felt reciprocity (i.e., that their work is appreciated and “matters”)
 - ii. Contributed their time for prosocial reasons
 - iii. Made a moderate but not excessive commitment to volunteering (Anderson et al. 2014).

5.3.2 Physical well-being Benefits

The review by Von Bonsdorff & Rantanen (2011) found that the majority of (their included) studies focused on the impact of volunteering on physical health, finding that in general volunteering predicted better self-rated health. Additionally, they reported that all studies demonstrated that volunteering for those aged 60 and over predicted fewer difficulties or disability in activities of daily living tasks compared to non-volunteers (follow ups ranging from 2 to 8 years) (Von Bonsdorff & Rantanen 2011).

The review by Anderson et al. (2014) reported similar findings on physical health outcomes, finding that overall older adults who volunteer report better physical health and have a reduced mortality risk than those who do not engage in voluntary work. In particular, all prospective cohort studies included in this review reported associations between volunteering and reductions in functional limitations. Anderson et al. (2014) conclude that the results from these studies suggest that volunteering is associated with health improvements in physical activity and fitness changes that can be expected to offer protection against a variety of health conditions.

Data from other included studies particularly emphasised the benefits of environmental volunteering for physical health. This type of volunteering encompasses many solitary or group based activities that aim to address environmental concern in contexts such as parks or nature reserves or providing environmental education (Bushway et al. 2011). Pillemer et al. (2009) for example cited evidence from an American national survey (Librett et al. 2005) of 2000 individuals that found environmental volunteering can lead to increased physical activity. Compared to non-volunteers, environmental volunteers were 2.6 times more likely to meet guidelines for physical activity established by the Centers for Disease Control and Preventions, which contrasted with a figure of 1.8 times more likely for other types of volunteer work. Thus, taking part in environmental volunteering in particular may be associated with increased physical activity, over and above other types of volunteering.

5.3.3 Mental well-being Benefits

Each of the three included reviews reported on mental well-being benefits of volunteering for older people. For example the review by Cattani et al. (2011) found that older people who participate in volunteering gained important benefits relating to quality of life such as a sense of control and

feeling appreciated along with a sense of purpose, fewer depressive symptoms and being able to 'give something back'. The review by Von Bonsdorff & Rantanen (2011) found that 6 of their included studies analysed the impact of volunteering on depression in older people. Each of these studies reported that older who volunteers had decreased depression at follow-up of between 6-8 years.

In addition the review by Anderson et al. (2014) also found broadly that volunteering reduces symptoms of depression in older people. Anderson et al's review also reported that volunteering is associated with higher levels of (and improvements in) positive affect or happiness and general life satisfaction in older people. However, they point out that the majority of the evidence in favour of an association between later life volunteering and both positive affect and life satisfaction comes from cross-sectional rather than prospective cohort or randomized controlled trials (Anderson et al. 2014).

Anderson et al. also report data from three qualitative studies where older volunteers explained that their voluntary work had existential benefits such as allowing the opportunity to refine their self-definition and re-examine things that were important to their lives. Furthermore Anderson et al. also found that volunteering among older people is related to improvements in social support and social networks as the process of engaging in voluntary work facilitates the meeting of new people and thus making new friends.

The social benefits of volunteering for older people were also highlighted in other included studies. For example, Bushway et al. (2011) stated that environmental volunteering in particular can provide special opportunities for social integration in later life in that environmental organizations are often more age-integrated than senior citizens groups and activities meaning that they routinely bring together people of different generations in meaningful activity which can act to reduce isolation of older persons and the ageism they experience. The desire to increase social activity to combat isolation and loneliness is also a motivating factor for older people to take up volunteering (Warburton 2006). Motivating factors will be discussed in the next section.

5.4 What motivates older people to volunteer?

According to Waganet (2010) connecting (environmental) volunteerism with retirement is a win-win for both the individual and the community. However, older people are less likely to volunteer than younger age groups (rates of volunteering tend to peak among middle aged individuals) but are nevertheless likely to commit more time to voluntary work and 'stick with it' when they do engage in this type of activity than other age groups (Anderson et al. 2014). It can therefore be a challenge to motivate older volunteers to become engaged in voluntary work, and as a result an understanding of what motivates older people to volunteer is an important issue (Waganet 2010).

Motivational factors relating to volunteering among older people was not focused on in any depth in the three included reviews. However, these issues were touched on in other included studies. For example, the work of Davis Smith & Gay (2005) found that for some older people volunteering was an opportunity to contribute something to society, whilst for others it provided a chance to continue learning new skills and new experiences. For many older people volunteering had played an important role in the transition process to retirement, with respondents drawing attention to the contribution of volunteering in helping to fill the void sometimes felt upon retirement. (Davis Smith & Gay 2005).

There is also a suggestion in one included study (Parkinson et al. 2011) that men and women have different motivations for volunteering. However these are not explored in any detail and require further investigation to elucidate.

In terms of environmental volunteering, Bushway et al. (2011) state that the strongest motivation for partaking in voluntary work in later life flows from a desire to leave the world a better place for future generations. Bushway et al. cite evidence from the American Association of Retired Persons (AARP) conducted in 2008 that suggested top ranked motivation for volunteering in general was helping individuals in need. Other motivating factors uncovered by the AARP research were to:

- Give a greater meaning to one's life
- Help others
- Make a difference on an issue or problem
- Stay healthy and active

A further study by Mike et al. (2014) hypothesised that personality and particularly the possession of 'conscientiousness' among individuals predicted the likelihood of volunteering following retirement. However conscientious individuals are defined by Mike et al. (2014) as high achieving and relatively

wealthy individuals who are correspondingly more likely to be in good health upon retirement than individuals of lower socio-economic groupings. Thus, it is also important to consider the barriers to volunteering for older people.

5.5 What are the barriers to volunteering for older people?

As mentioned in the introductory section of this review, it is currently not clear whether health benefits flow from volunteering or if healthier people choose to volunteer. Thus, self-selection may influence some of the findings reported here regarding positive benefits. Cattan et al. (2011) state that older people with poor mental and physical health may be less likely to engage in volunteering compared with those with positive past experiences of volunteering. This is despite the existence of evidence to suggest that older people with low socioeconomic status can perceive more socio-emotional and health benefits from volunteering than high-income older people because they feel more in control and empowered as a result of the volunteering (Cattan et al. 2011)

The view that low-socioeconomic status is a barrier to volunteering in later life is found in the review by Von Bonsdorff and Rantanen (2011) who state that it is an established fact that older people who are in good health and possess adequate social and economic resources tend to volunteer more. These people are also more likely to have high self-esteem and more control over their lives which enhances their ability to volunteer and reap the physical and mental health rewards as a result.

With this in mind, Cattan et al. (2011) cite evidence from a study conducted on the Experience Corps RCT (mentioned above) which suggested that one way to overcome this particular barrier may be the payment of expenses to low income adults, which could be a significant way to allow these groups of individuals to try volunteering.

Other included studies such as that by Davis Smith & Gay (2005) considered other barriers to volunteering in older people. For example included insurance restrictions, health and safety regulations, and lack of access for disabled people were named as significant barriers to volunteering in later life. In addition, they report that in the UK there is under-representation of older volunteers from black and minority ethnic communities. Davis Smith & Gay noted further that the failure to recruit volunteers from minority ethnic groups was down to lack of resources to embark on outreach work. However they further note that organisations which had been successful in diversifying their

volunteers had done so by prioritising partnership working with community leaders along with black and minority ethnic groups in their community. (Davis Smith & Gay 2005)

5.6 What are the key gaps in the research?

The benefits of volunteering in later life for physical and mental well-being appear to be well established. However in addition to the problem of developing ways to encourage older adults from lower socio-economic groupings to volunteer, there is also a key gap in understanding the mechanisms underlying associations between volunteering and enhanced health and well-being in later life (Von Bonsdorff & Rantanen 2011) Given that the majority of studies analysing the impact of volunteering on health in later life have used large datasets (particularly in the USA) more detailed analyses are required. Indeed, Cattani et al. (2011) state that there is a lack of high-quality qualitative and multi-method research, which would help to explain why and how volunteering impacts on older people's quality of life.

In addition to this key gap in the evidence base, further evidence is required regarding how volunteering on later life impacts on the cognitive abilities of older people (Anderson et al. 2014). Furthermore, Anderson et al. (2014) also note that to date there have been no studies conducted to examine the association between volunteering and risk of dementia or the association between volunteering and a host of other health conditions that put seniors at higher risk for dementia such as diabetes and stroke.

There also appears to be a paucity of studies conducted in the United Kingdom on the subject of volunteering and its impact on health and well-being in later life. The majority of the research appears to be US focused; however recently there has been growth in studies conducted on this topic in Australia and Canada in particular.

Lastly, as has been mentioned above, the motivation for volunteering among older people is not particularly well understood and this is especially so in the case of older adult volunteers (Bushway et al. 2011). Bushway et al. argue therefore that a sense of place could play a critical role in the motivation to undertake environmental volunteering in later life. They state that very little work has used a sense of place framework to examine volunteer how volunteer behaviour is motivated by "making places better" an understanding of which would be beneficial to communities and neighbourhoods.

6. Conclusion

This short rapid review of literature concerning the health and well-being impacts of volunteering for older people has demonstrated that there is ample evidence available to suggest that volunteering can have a positive impact on later life volunteers in terms of improved self-esteem, wellbeing and social engagement. Older volunteers also appear to experience decreased mortality risk, less depression, better cognitive functioning and improved mental wellbeing relative to those who do not volunteer. However a key issue in the literature is that it is currently not clear whether health benefits flow from volunteering or if healthier people choose to volunteer Naylor et al. (2013). In addition, a further key point is that very little is known about the possible mechanisms underlying positive impacts of volunteering for older people. This represents a major gap in the evidence base and warrants further investigation using mixed-method and qualitative research designs.

REFERENCES

- Anderson, N. D., Damianakis, T., Kröger, E., Wagner, L. M., Dawson, D. R., Binns, M. A., Bernstein, S., Caspi, E., Cook, S. L., & The BRAVO Team (2014, August 25). The Benefits Associated With Volunteering Among Seniors: A Critical Review and Recommendations for Future Research. *Psychological Bulletin*. Advance online publication. <http://dx.doi.org/10.1037/a0037610>
- Bushway L, Dickinson JL, Stedman RC, Wagenet LP, Weinstein DA. Benefits, motivations, and barriers related to environmental volunteerism for older adults: developing a research agenda. *Int'l. J. Aging and human development*, vol. 72(3) 189-206, 2011.
- Cattan M, Hogg E, Hardill. Improving quality of life in ageing populations: What can volunteering do? *Maturitas* 70 (2011) 328– 332
- Davis Smith J and Gay P (2005) Active ageing in active communities: Volunteering and the transition to retirement. Joseph Rowntree Foundation.
- Mike A, Jackson JJ and Oltmanns TF. The conscientious retiree: The relationship between conscientiousness, retirement, and volunteering. *Journal of Research in Personality* 52 (2014) 68–77.
- Naylor C, Mundle C, Weaks L and Buck D (2013) Volunteering in Health and Care: securing a sustainable future. The Kings Fund: London.
- Parkinson L, Warburton J, Sibbritt D, Byles J. Volunteering and older women: psychosocial and health predictors of participation. *Aging Ment Health* 2010;14(8):917–27.
- Pillemer K, Wagenet LP, Goldman D, Bushway L and Meador RH (2009) Environmental Volunteering in Later Life: Benefits and Barriers: purposeful activity and meaningful roles. *Journal of the American Society on Aging*. Volume 33 Number 4.
- Von Bonsdorff MB, Rantanen T. Benefits of formal voluntary work among older people – a review. *Aging Clin Exp Res* 2010.
- Wagenet L (2010) Environmental volunteering and older adults. *Rural New York Minute*. Department of Development Sociology, Cornell University. Issue Number 39.
- Warburton J (2006) Volunteering in later life: is it good for your health? *The Journal of the Institute for Volunteering Research*, vol 8, Number 2.
- Watson L (2014) Volunteering, Social Inclusion and Older People. Unpublished presentation. Accessed 17/9/14 from: www.volunteerscotland.net%2Fmedia%2F279111%2Fpresentation_from_liz_watson_volunteering_socialinclusion_and_older_people_february_2014.pptx&ei=yCcUVJzpDMjbaK2agkA&usg=AFQjCNHzNeXRLDBTsMC_RxX9VXhMDkf3tA&bvm=bv.75097201,d.ZWU.