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## Does it Make a Difference? The Effects of Volunteering from the Viewpoint of Recipients – A Literature Review

**Abstract:** The effects of volunteering have been studied predominantly from the viewpoint of the volunteers and of society as a whole. We know that volunteering has a positive influence on several aspects of the well-being and health of volunteers (e.g., Poulin, 2014; Townsend et al., 2014), and that volunteering increases social capital and decreases public spending on welfare (e.g., Handy and Srinivasan, 2004; Putnam and Campbell, 2010; Salamon et al., 2011). However, there is surprisingly little knowledge available on the effects of volunteering on the recipients of such volunteering services. This absence is fundamental, as the whole phenomenon of volunteering, its motivation and definitions rest on the idea that it affects the people and the issues volunteers work for. This question is central also to diaconia as many churches extensively organize volunteering in their efforts to help those in need (e.g., Grönlund and Pessi, 2015). Understanding the effects of different working methods thus is key in evaluating whether or not they are successful. Our paper reports on a literature search for academic articles concerning the effects of volunteering using several databases (e.g., EBSCO, Google Scholar) and selected journals (e.g., NVSQ, Voluntas), based on a number of search criteria and keywords (e.g., volunteering/effects, volunteer/effects, peer support/effects, volunteering/impact, volunteer/impacts, peer support/impact, volunteering/benefits). The searches produced hundreds of search results, but only 22 of them were actually focused on the recipients' viewpoint. Most of the studies located stem from medicine, psychology, or nursing science.

Our paper analyzes the results outlined in these 22 papers and presents the key effects of volunteering on the recipients identified therein. These are (1) volunteer or peer support increases sense for participation and decreases loneliness; (2) volunteering strengthens self-esteem and sense of agency. We also present the mechanisms driving these effects based on the literature identified. The results of our review show that one central influencing factor in volunteer services is the (voluntary) nature of the relationship between the volunteer and the recipient: Reciprocity, neutrality, and presence as the core of the relationship make receiving help and support from a volunteer distinctively different than

that from professional help. Volunteering, therefore, can have a specific, and unique influence on certain psychological needs.

**Keywords:** Volunteering, effects, literature review

## 1. Introduction

Volunteering can be defined as giving one's time freely and without financial reward to help other people or a cause. Although the terms that define it as well as the forms of expression it takes may vary, volunteering is nearly always at least partially motivated by a desire to contribute to the common good or the well-being of others (e.g., Musick and Wilson, 2008; 2011 State of the World's Volunteerism Report), the explicit or implicit starting point being the belief that such activity positively affects them.

Volunteering has a strong position in providing services in most societies as well as in most churches and diaconal services. The role of volunteering can range from offering fundamental welfare services to complementing them in informal service roles (e.g., Rochester et al. 2010). The explicit or implicit starting point is that volunteering benefits persons receiving such services from volunteers. This is widely accepted in most societies and churches. Yet how much do we know about the effects of volunteering on the recipients of volunteer services? What are the effects and the mechanisms driving them? And how well documented are these effects in studies of volunteering?

*Evaluation of effects* aims to show whether a targeted change has occurred. In order to evaluate such effects, we need to define a starting point – which can then be compared to the situation afterwards, revealing the possible change (i.e., effect). *Evaluation of impact* usually refers to a larger scale and longer term influence. When evaluating the impact of a specific action, we must separate its role from other factors that could be influencing the same thing. This is often done with control group settings (e.g., Dahler-Larsen, 2005).

Evaluation and measurement of effects and impacts of the work by both religious and secular nonprofit organizations as well as churches and their volunteers has been increasing in different societies since the 1990s. In part, governments and other financers have directed this development, and today boards, members, tax-payers, and other stakeholders expect evidence of the effects of the work done by nonprofit organizations. Organizations also proactively evaluate their work and its impact to develop their work and for promotional purposes (e.g., Arvidson and Lyon, 2014; Ebrahim and Rangan, 2010).

Consequently, a range of evaluation frameworks, methodologies, and tools has been developed for use by these organizations. However, many models and approaches are based on quantitative measurements and/or financial values (albeit not all, see, for example, Davies and Dart, 2005), and these are not always suitable for human and mission-based values (e.g., Edwards et al., 2015). Such models also fail to acknowledge the unique role of volunteer services, which fundamentally differ from services provided by paid staff. As Haski-Leventhal et al. (2011, p. 139) concluded, “the unique impact of volunteers, compared to the paid workers of an organization, needs to be examined and understood.” Furthermore, the performance and impact in nonprofit organizations have been developed and debated primarily in practitioner communities (Ebrahim and Rangan, 2010).

This is not to say that the scholarly community has been completely uninterested in studying the effects or the impact of nonprofit organizations or voluntary work. But the effects of volunteering have been studied predominantly from the viewpoint of volunteers and society as a whole. We know that volunteering has a positive influence on a range of aspects of the well-being and health of volunteers (e.g., Poulin, 2014; Townsend et al., 2014). In particular, the health, well-being, and quality of life of elderly volunteers have been the focus of a relatively large body of literature (Chan, 2006; Morrow-Howell et al., 2003; Parkinson et al. 2010). Also, we know that volunteering increases social capital and decreases public spending on welfare (e.g., Handy and Srinivasan, 2004; Putnam and Campbell, 2010; Salamon et al., 2011). However, the studies on the effects of volunteering on the *recipients* of volunteering services seem to be less extensive.

This article provides an overview on the extent of studies on the effects of volunteering from the viewpoint of the recipients. We define effects as “changes in the lives of recipients of volunteer services, as documented in the results of research.” We also include studies that report the effects evaluated by recipients themselves. Thus, for example, we do not require standardized interventions or control groups for a study to be included in this overview. In addition, this article analyzes what the effects of volunteering on the recipients are, based on the literature. We also describe the mechanisms driving these effects, based on the literature.

## 2. Data and Analysis

This research is based on literature searches of academic databases. Studies were sought from

1. Publishers’ databases (Sage, Wiley interscience, Elsevier)

2. Academic databases (PubMed, Scopus, Proquest databases, EBSCO, Primo Central Index, Web of Science – core collection)
3. Selected journals (NVSQ and *Voluntas* as the key journals of volunteerism studies)
4. References in the papers and articles identified

Studies from the databases were sought using the following search criteria combinations in English: impacts/effects/benefits + volunteering/social support/peer support/befriending. The searches resulted in approximately 600 results (with overlap as some results recurred both with different search criteria and in different databases, also indicating saturation). Approximately 200 results were eventually looked through, until their relevance was very low.

Based on the titles identified in the search results, the next stage consisted of reading the abstracts of these papers. Criteria for this were an indication in the title that the study dealt with (1) volunteering or peer support and (2) its effects/impacts/benefits. If the abstracts indicated that the article included material on the effects of volunteering or peer support in relation to the recipients, the article was included in the analysis. Many of the studies appearing in the searches focused on the impacts, effects, and benefits of volunteering on the volunteer (social, psychological, and health benefits), the volunteering organization (economic and social benefits), or society (economic benefits, social capital), but few focused on the recipients. The references cited in the selected articles were then examined using the same criteria to find new relevant titles, abstracts, and articles.

In total, 40 abstracts were read through, and 22 studies were included in the analysis. These included studies on the effects of volunteering, peer support, and/or befriending on recipients. In addition, we included two studies that focus on mentoring or tutoring done on a voluntary basis and its effects on the recipients. The studies included were written in English, and the majority thereof had been published between 2000 and 2014. Table 1 summarizes the results of the search and provides an overview of the studies including methodology, field of research, type of activity studied, and the target group of the activity studied in each study.

Surprisingly, only two of the studies (8, 18) represented the field of volunteering/nonprofit sector studies, and one of them had only a partial focus on the impact on recipients. Two studies (15, 22) represented the social sciences. The rest of the studies stemmed from fields of medicine and health: four out of the 22 articles from psychiatry (3, 4, 7, 16); five from nursing sciences (1, 2, 5, 13, 19), and four from psychology (9, 10, 17, 21). Five studies represented other fields of medicine or health (6, 11, 12, 14, 20).

Ten of the studies (1–4, 7, 13, 15–18) report on the impacts of befriending on different groups of patients (including those with brain damage, depression,

Table 1: Articles included in the analysis

Study	Field of research	Type of activity	Target group	Method
1 Andrews, G. J., et al. (2003). Assisting friendships, combating loneliness: users' views on a 'befriending' scheme. <i>Ageing and Society</i> 23(3), 349–362.	Nursing science	Befriending	Elderly	Qualitative Interviews
2 Balaam, Marie-Claire (2014). A concept analysis of befriending. <i>Journal of Advanced Nursing</i> , 71(1), 24–34.	Nursing science	Befriending	Concept analysis of previous research	Concept analysis
3 Cox, A. D., Puckering, C., Pound, A., Mills, M., & Owen, A. L. (1990). <i>Newpin: the Evaluation of a Home Visiting and Befriending Scheme in South London. Report to the Department of Health, London.</i>	Psychiatry	Befriending	Families with children	Qualitative and Quantitative Comparative literature review
4 Cox, A. D. (1993). Befriending young mothers. <i>The British Journal of Psychiatry</i> , 163(1), 6–18.	Psychiatry	Befriending	Mothers	Synthesis of literature review

Study	Field of research	Type of activity	Target group	Method
5 Dennis, C.-L. (2010). Post Partum depression peer support: Maternal perceptions of a randomized controlled trial. <i>International Journal of Nursing Studies</i> , 47(5), 560–568	Nursing science	Peer support	Mothers, post partum depression	Quantitative Randomized controlled trial
6 Embuldeniya, G., Veinot, P., Bell, E., Bell, M., Nyhof-Young, J., Sale, J. E., & Britten, N. (2013). The experience and impact of chronic disease peer support interventions: A qualitative synthesis. <i>Patient education and counseling</i> , 92(1), 3–12.	Medicine, health sciences	Peer support	Patients with chronic disease	Qualitative
7 Harris, T., Brown, G. W., & Robinson, R. U. T. H. (1999). Befriending as an intervention for chronic depression among women in an inner city. 1: Randomised controlled trial. <i>The British Journal of Psychiatry</i> , 174(3), 219–224.	Psychiatry	Befriending	Women with chronic depression	Quantitative Randomized controlled trial
8 Haski-Leventhal, D., Hustinx, L., & Handy, F. (2011). What money cannot buy: The distinctive and multidimensional impact of volunteers. <i>Journal of Community Practice</i> 19(2), 138–158.	Volunteerism research	Volunteering	Parents with ill children	Qualitative

Study	Field of research	Type of activity	Target group	Method
9 Hiatt, S. W., & Jones, A. A. (2000). Volunteer services for vulnerable families and at-risk elderly. <i>Child abuse &amp; neglect</i> , 24(1), 141–148.	Psychology	Peer support	Families with children, elderly	Literature review
10 Hiatt, S. et al. (2000). Characteristics of volunteers and families in a neonatal home visitation project: The Kempe community caring program. <i>Child Abuse &amp; Neglect</i> 24(1), 85–97.	Psychology	Peer support	Families with babies	Analysis of data and documentation collected by the program
11 Hibbard, M. R., Cantor, J., Charatz, H., Rosenthal, R., Ashman, T., Gundersen, N., ... & Gartner, A. (2002). Peer support in the community: initial findings of a mentoring program for individuals with traumatic brain injury and their families. <i>The Journal of head trauma rehabilitation</i> , 17(2), 112–131.	Medicine	Mentoring, peer support	Individuals with brain injury and their families	Quantitative and Qualitative interviews and questionnaires
12 Jack, B. A., Kirton, J., Birakurataki, J., & Merriman, A. (2011). 'A bridge to the hospice': The impact of a Community Volunteer Programme in Uganda. <i>Palliative medicine</i> , 25(7), 706–715.	Medicine	Peer support, volunteering	Individuals with HIV	Semi-structured individual, group, and focus group interviews

Study	Field of research	Type of activity	Target group	Method
13 Lester, H. et al. (2012) An exploration of the value and mechanisms of befriending for older adults in England. <i>Ageing and Society</i> 32(2), 307–328.	Nursing science	Befriending	Elderly	Qualitative interviews
14 Malpas, & Weekes (2001). An Investigation Into Drop-ins: Exploring the Impact of Peer Support on Mental Health. London: Mental Health Foundation.	Mental health	Peer support	Individuals with mental health problems	Qualitative interviews
15 McGowan, B. & Jowett, C. (2003) Promoting Positive Mental Health through Befriending. <i>International Journal of Mental Health Promotion</i> , 5(2), 12–24.	Health and social sciences	Befriending	Individuals with mental health problems	Case study analyzing a befriending service
16 Mead N., Lester H., Chew-Graham C., Gask. & Bower P. (2010) Effects of befriending on depressive symptoms and distress: systematic review and meta-analysis. <i>The British Journal of Psychiatry</i> , 196 (2), 96–101	Psychiatry	Befriending	Individuals with depression	Review and meta-analysis of quantitative studies Randomized control-led trial



Study	Field of research	Type of activity	Target group	Method
17 Mitchell, G. & Pistrang, N. (2011) Befriending for mental health problems: processes of helping. <i>Psychology &amp; Psychotherapy: Theory, research and practice</i> , 84(2), 151–169.	Psychology	Befriending	Individuals with mental health problems	Qualitative interviews
18 Paylor, J. (2011). Volunteering and health: evidence of impact and implications for policy and practice. A literature review. London: Institute of Volunteering Research.	Volunteerism research	Peer support, befriending	Literature review	Literature review
19 Schafer, E., Vogel, M. K., Viegas, S., & Hausafus, C. (1998). Volunteer peer counselors increase breastfeeding duration among rural low-income women. <i>Birth</i> , 25(2), 101–106.	Medicine / nursing	Peer support, peer counselling	Mothers	Intervention- and control groups
20 Shilling, V., Morris, C., Thompson Coon, J., Ukoumunne, O., Rogers, M., & Logan, S. (2013). Peer support for parents of children with chronic disabling conditions: a systematic review of quantitative and qualitative studies. <i>Developmental Medicine &amp; Child Neurology</i> , 55(7), 602–609.	Medicine	Peer support	Parents of children with chronic disabling conditions	Literature review

Study	Field of research	Type of activity	Target group	Method
21 Tierney, J. P., Grossman, J. B., & Resch, N. L. (1995). Making a difference: An impact study of big brothers/big sisters. Re-issued 2000.	Psychology	Mentoring	Youth	Comparative research, Survey
22 Ussher, J., Kirsten, L., Butow, P., & Sandoval, M. (2006). What do cancer support groups provide which other supportive relationships do not? The experience of peer support groups for people with cancer. <i>Social science &amp; medicine</i> , 62(10), 2565–2576.	Social sciences	Peer support	Individuals with cancer	Qualitative

chronic illnesses, and cancer) or other groups of people with a specific problem or need (e.g., mothers with challenges in parenting). Most of the studies examine the impacts of effects from the viewpoint of care, that is, whether the activity is beneficial from the viewpoint of the prognosis of the illness or progression of treatment. Thus, these studies tended to focus on the impacts or effects of volunteering/peer support on a predefined problem.

It is interesting that the effects of this vast field of activity on its recipients seem not to have been studied more in the field of volunteering and nonprofit sector studies, or more broadly in the field of social sciences. As mentioned above, only two of the 22 articles represented the field of volunteerism or nonprofit sector studies. The first of these (8) only partially focused on the impact/effects on the recipients, as the article studied the effects on different groups of stakeholders. The other of these two studies (18) was a literature review on effects/impacts and was part of a broader study targeted at the influencers of health-sector policy and practice. Four of the studies (5, 7, 16, 19) used control group settings (or a literature review of them), while most of the studies represented qualitative approaches or used previous research as their data (literature reviews, concept analyses).

A large proportion of the studies examined families with children and parents as the target group. Eight (3, 4, 5, 8, 9, 10, 19, 20) of them examined the impacts/effects of befriending or peer support on parents of ill children, postnatal depression, and young mothers. Three studies (1, 9, 13) focused on senior citizens as well as on the impacts/effects of befriending on the quality of life and well-being of this target group. Mental health patients were the target group in six articles (5, 7, 14, 15, 16, 17). The viewpoint of these studies ranged from studying whether befriending has an impact on recovering from depression, to how befriending affects the well-being of patients with depression, and how befriending helps them. Four articles (6, 11, 12, 22) focused on peer support and somatic illnesses such as HIV and cancer; one (20) focused on peer support among parents of children with chronic disabling conditions.

In the following section, we demonstrate the results of a qualitative content analysis on the 22 studies included in the analysis. We examined the ways in which volunteering/peer support/befriending affect and benefit the recipients of the service.

### **3. Analysis of the Effects of Volunteering on the Recipients**

Two central groups of effects were identified in the analysis of the selected articles. These are “sense of participation and lessening of loneliness” and “strengthening self-esteem and sense of agency.” These two themes occurred regardless

of the activity being studied or its target group. Although they are described separately in detail in the following, they are also intertwined: Having a sense of participation or belonging strengthens self-esteem and decreases loneliness – which in turn strengthens agency, which again strengthens self-esteem and helps the individual to fully participate in communities and society. Also, a sense of participation or belonging in itself decreases loneliness and increases self-esteem. Voluntary (peer) support can thus start a positive cycle and reinforce all these positive effects, which mutually strengthen each other.

### **3.1 Sense of Participation and Reduction of Loneliness**

The studies included in the analysis focused on groups with limited opportunities to participate or be involved in society. Voluntary (peer) support significantly increased the feeling of participation or belonging among the target groups (e.g., 1, 3, 16). At its simplest voluntary (peer) support is a relationship based not on professional roles or kinship, and one that is expected to be of benefit to at least one of those involved. Such a relationship is based on reciprocity, informality, and addressing issues as peers, even difficult ones; on sharing and discussing experiences instead of defining a problem to be solved. Voluntary (peer) support can be defined as “being with” instead of “doing for” (3).

A popular form of voluntary (peer) support is befriending. The content and effects of such activities can be understood slightly differently in different contexts (2), but the core of befriending lies in introducing people to each other in a coordinated way in order to provide social contact and support to people in underprivileged or vulnerable situations (2). Target groups of befriending include mental health patients, senior citizens, and the parents of small children. Befriending is usually performed by volunteers and is based on equality/peer relationship (2).

In most of the studies included in the analysis, voluntary (peer) support proved to decrease levels of emotional stress, social isolation, and feelings of loneliness. The incidence of both social and emotional loneliness was also reduced. The company of another person in itself did not reduce loneliness, rather the special features of voluntary (peer) relationship were shown to be the mechanism driving this positive effect. Reciprocity, presence as the core of the relationship, and neutrality (1, 3, 7, 13, 15, 17) were central to reducing feelings of loneliness. For many recipients, volunteers were the only people who spent time with them with the sole purpose of being there for them. The presence of volunteers and the reciprocity of the relationship increased feelings of being heard and seen. Expansion of the circle of life, experience of oneself as an active agent, and having a reciprocal relationship with the volunteer improved the mood especially among elderly recipients (1, 13) and mental health patients

(7, 17). An emotional relationship with a volunteer led to less social isolation, loneliness, and depression. This effect was especially meaningful for groups in risk situations, such as the elderly, patients suffering from mental health problems or physical illness, and families of ill children (5, 6, 7, 11, 12, 14, 15, 16, 17, 18, 20, 22). The reciprocity and equality of the relationship had a positive and empowering effect on the self-esteem of the recipients as well as on their view of the surrounding world. This significantly lessened the recipients' isolation (e.g., 1, 13, 18)

One specific group that can benefit from voluntary (peer) support is families with children, particularly the parents. Parenting small children increases the overall risk of loneliness. Voluntary (peer) support in turn decreases the feelings of loneliness experienced by new mothers as well as reducing the confusion following their new role and situation of life (3, 4, 5, 10). According to one of the papers included (10), first-time mothers benefitted from a program whereby voluntary support persons visited the families' homes during the first year of the children's lives. The program served to strengthen the mothers' relationship with their children, to encourage the use of services, and to provide positive social support. The recipients experienced positive feedback, support, and encouragement. Also, voluntary (peer) telephone support had positive effects: Sharing thoughts and experiences with volunteers decreased new parents' insecurities and feelings of loneliness when they heard about others struggling with similar issues (5).

### **3.2 Strengthening Self-Esteem and Sense of Agency**

According to the papers included in this study, voluntary (peer) support also influences the sense of agency. This is a result of self-esteem and strengthening of positive self-image, both of which result from the above discussed reciprocal encounter. Particularly elderly recipients were empowered by the reciprocity of the relationships with volunteers (1, 13). The experience of having something to give to the volunteer, and the experience that the volunteer also received something from the relationship, were meaningful for strengthening the self-image and agency of the recipients. Also, reviewing memories and earlier, active life (for example, working life) empowered elderly recipients (13).

The experience of presence and of being encountered had a positive effect on the ability of mental health patients to act in other social relationships (17). People suffering from a range of illnesses experienced voluntary (peer) support to be beneficial for them by gaining and sharing information about their illness. The studies did not find that voluntary (peer) support actually affected the illnesses. On the other hand, peer support did increase the chances of reducing the symptoms of depression (7), although it did not have an effect

in clinically curing depression (16). In any case, voluntary (peer) support can have a significant effect on stress and other negative impacts of illnesses.

Although the physical situation does not change, the social and emotional situation can improve. Interaction based on volunteers' own experience and knowledge increased the recipients' abilities of empowerment and agency (19). Learning from others' experiences, sharing beneficial knowledge, solving problems together, and learning new skills leads to increased motivation and self-esteem and, through these, empowerment (20). For example, volunteers at an HIV hospice influenced the agency of patients who were living at home. With the advice from volunteers, the patients came to understand the importance of regular medication and were better committed to it (12).

The new perspective and presence provided by volunteers also increased the agency of parents. The opportunity to reflect on issues in the company of a neutral person as well as the opportunity to go out with the volunteer improved the parents' self-image and their belief in their own skills. Control over one's own life and positive thinking were strengthened as well (3). First-time mothers who received information about social events and services from volunteers evaluated the service as being important. This in turn strengthened their agency in parenthood (5). The experienced knowledge of voluntary support persons also proved to have an impact on breastfeeding, both the likelihood of starting breastfeeding and its duration. In a low-income area, a rural group of mothers increased their own knowledge by studying, which was supported by volunteers. This helped them to make better-informed decisions regarding breastfeeding and helped them to gain trust in themselves in making decisions (19).

The studies included here related to children and youth mainly reflected mentoring and voluntary support services, not peer support. Nevertheless, like the studies described above, these services affected the psychological and social well-being of the recipients and their sense of agency. For example, young people participating in a mentoring program were significantly less likely to use drugs compared to youths in the same area who did not participate in the program. Also, their school performance and their relationships with their parents and friends improved (21). Again, the sense of esteem and belonging were central effects of voluntary support.

#### **4. Discussion and Conclusion: The Distinctive Effects of Volunteering on the Recipients**

Our review found a limited amount of research focusing on the impacts, effects, or benefits of volunteering on the recipients. The number of studies was surprisingly small, especially in light of the extent of volunteerism research and

the extent of volunteering activities performed around the world. Our review included only studies in English, which may explain some of this paucity. It is also possible that our review did not locate all relevant research. Even so, the prominently low number of studies found from among the hundreds of search results indicates a shortfall in this type of research. This may have to do with the practicalities of doing such research: It is easier and also ethically simpler to research volunteers and organizations than to study individuals in vulnerable positions, life situations, and/or in need of others' support. The viewpoints of volunteers and organizations are also often directly applicable to the field of nonprofit organizations, as they help in developing volunteering programs and the work of these organizations, which in turn can motivate research. The bias may also be connected to a preconception of the recipients of services as passive and the failure to recognize their agency as informants of research. Furthermore, an action that aims at the good in others may come to be viewed as automatically resulting in good effects. Thus, the effects of such actions may not be recognized as a relevant research question.

Despite the small number of papers identified for this study, they all indicate a similar impact of volunteering on the recipients (indicating saturation). Regardless of the target group examined, the studies show that volunteering/peer support decreases the recipients' loneliness and increases their sense of agency by reaffirming a positive self-image and a positive outlook toward their living environment. Volunteering is also shown to create an experience of participation. According to the studies included here, a central influencing factor is the voluntary nature of the relationship between the volunteer and the recipient. Reciprocity, neutrality, and presence as the core of the relationship make help and support from a volunteer distinctively different from that of professional help. Thus, volunteering can have a specific influence on certain psychological needs, and loneliness seems to be one psychological need where volunteering can be especially beneficial.

Loneliness is defined as a negative psychological state in which an individual experiences distress because of perceived social isolation or outcast. Loneliness is always a subjective experience, and as such it differs from social isolation, although these phenomena are related. Furthermore, loneliness is more closely related to the quality of relationships than to their number (e.g., Masi et al., 2011). One of the more classical researchers of loneliness, Robert Weiss (1973), concluded that an individual has a profound need both for close affection with another person and for a network of peers that provides opportunities for social interaction. If these central social needs are not fulfilled, an individual suffers from loneliness, defined by Weiss as chronic distress without redeeming features. Loneliness is also quite common: Up to 7% of middle-aged and older adults suffer from intense or persistent loneliness (Masi et al., 2011).

Loneliness has also been shown to be an aversive signal that makes individuals sensitive to social threats. This results in their focusing on the negative aspects of social context, which again negatively influences behavior and social interaction. Loneliness also affects self-image; individuals suffering from loneliness come to view themselves as outcasts, unwanted companions, and failures at social interaction (e.g., Cacioppo and Hawkley, 2009). Interestingly, these negative features and results of loneliness mirror the positive features and benefits of volunteering. The first of the two distinctive effects of volunteering extracted from the studies included in our review is “sense of participation and lessening of loneliness,” specifically as it relates to loneliness. But also “strengthening self-esteem and sense of agency” can be viewed as a means of battling the negative influences of loneliness to self-image and sensitivity to social threats.

Interacting and forming relationships with volunteers represent the two profound needs described by Weiss (1973). Volunteers, who by definition are involved voluntarily and are largely motivated by altruistic motives, combat the negative self-image of an individual suffering from loneliness as an unwanted companion. In addition, positive (and safe) experiences of social interaction help recipients to view social interaction more positively; volunteers are there to assist or support the recipient. A sense of participation, feelings of loneliness, self-esteem, and a sense of agency thus lie at the core of loneliness as a phenomenon as well as at the core of the effects of volunteering. This finding is important, as the consequences of prolonged loneliness include serious negative effects on physical and mental health and well-being including painful feelings of isolation, suicidal behavior, less restorative sleep, elevated systolic blood pressure, diminished immunity, and cardiovascular disease (for a summary, see Masi et al., 2011).

The benefits of volunteering to the recipients described in our results – sense of self-esteem, agency, and participation – resemble the benefits of volunteering to *volunteers* as demonstrated in a number of studies (e.g., Casiday et al., 2008; Jenkinson et al., 2013; Piliavin and Siegl, 2007). Also, the mechanisms of the benefits of volunteering to the volunteers are similar to the benefits to the recipients, at least to some extent. For example, Weinstein and Ryan (2010) concluded that volunteers experience relatedness and competence in volunteering especially when they are offering help of their own volition. Thus, the voluntary nature and intrinsic motivation for the interaction is key to the benefits for both the recipient and the volunteer. The voluntary nature is also the feature that differentiates the relationship from those involving professional help, and to some extent it is also different from the help from family and relatives, who can also be viewed as being obliged to visit and help. These results highlight the unique nature of volunteering as a form of help or support, both to the volunteer and the recipient (whose roles can blur because volunteering often



benefits both parties). Volunteering has unique benefits that are difficult to obtain by other sources of help or support.

The phenomenon of loneliness highlights the distinctive features of volunteering to both recipients and volunteers, as it reveals needs volunteering can answer. The experience of loneliness is viewed as a physiological alarm signal that alerts an individual when he or she is lacking vitally important connections with others altogether, or when the quality of the connections is insufficient (e.g., Masi et al., 2011). Volunteering addresses this vital psychological – and even physiological – need, both by increasing human contact but especially through its voluntary quality. This view of human contact as a physiological need also explains the rewards gained by volunteers in volunteering.

This view of volunteering as a form of meaningful encounters and as an answer to profound questions about the interdependencies among human beings may seem obvious, especially in the context of diaconia, religious communities, and religious organizations. However, such a view can be contested or neglected, as volunteering is often viewed through the perception of human nature as rational and economical, which declares volunteering to be primarily egocentric (e.g., Haski-Leventhal, 2009). A more balanced approach is needed in volunteerism research in order to further the understanding of the positive effects and results described in the results of our review. Also, these humane features of interdependency, belonging, and reciprocity which underlie voluntary services could be stressed more strongly in the work of religious communities, which design their work on such understanding of humanity and communality.

Most of the studies in our review represent the disciplines of medicine, psychiatry, or psychology. Further research on the field of volunteerism and nonprofit sector studies could be beneficial. Also, religious studies could introduce an interesting viewpoint to this theme, for example, by studying the distinct outcomes and experiences in volunteering in diaconal services or more broadly religious communities. Does the religious context add something distinctive to the encounters between volunteers and recipients as well as to the experience of the recipients? Or can receiving support from volunteers have distinctive benefits for people in their questions of life, death, and meaning?

More research is also needed to understand whether there are differences between groups of people or types of volunteer services in how volunteering benefits the recipients. The differences between the effects of volunteer services and the effects of professional help should be studied further to better understand how they differ. This would advance the definition of the specific role of volunteer services in the entities of service provision in different societal and community contexts, including religious ones – instead of viewing volunteering simply as a substitute, cheaper, or even lower quality alternative to profes-

sional services. This would also advance the understanding of volunteerism as a distinctive phenomenon.

Our review shows that volunteering can be used productively to reduce loneliness. It is especially important to undertake further study into the mechanisms of this effect in different groups of respondents (age, sex, life situation, cultural context) and in different types of volunteering efforts (peer support, befriending, group settings, long-term programs, short-term programs, etc.) in order to develop voluntary services better targeted at battling loneliness: It is a serious problem affecting millions of people. Such endeavors would also benefit diaconal services, which aim to provide holistic well-being for those in vulnerable positions.

Further research on the effects of volunteering on the recipients would also benefit diaconal work and practitioners in all fields of voluntary services. Volunteering motivation is strongly associated with the expected benefits to those who receive the service. Verifying these benefits and effects could serve to motivate volunteers and those interested in volunteering. And understanding the mechanisms driving positive effects could also help practitioners to organize volunteer services that can efficiently meet the needs of the recipients.

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