

Citizens Advice Liverpool (CAL) Research 2023 Findings: The impact of volunteering at Citizens Advice Liverpool (CAL) on health and wellbeing



Images sourced from Citizens Advice Liverpool / Citizens Advice national media.

The impact of volunteering at Citizens Advice Liverpool (CAL) on health and wellbeing

April 2023 Report

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Disclaimer and acknowledgements

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The hyperlinks / website references in this report are correct at the time of writing. Graphics used on the cover are sourced from Citizens Advice websites / social media.

Many thanks to Cosima Doerfel Hill, Equalities Programme Coordinator, for project management, and all the CAL volunteers who took part for their time and valued inputs.

1. INTRODUCTION

Background

- 1.1 As part of the Citizens Advice Liverpool (CAL) Equalities Programme an independent assessment of the impact of volunteering on the health and wellbeing of CAL volunteers was undertaken in 2023, following the same format piloted in 2021. Michael Lloyd Research (MLR) led on both pieces of work.
- 1.2 It is almost four years since CAL secured funding from The National Lottery Community Fund to deliver the Equalities Programme, with 2023 a critical year for data collection and understanding impact. The programmes long-term aim is to improve health and economic wellbeing for ethnic minority communities in Liverpool, and an important aspect of the project is to promote health and wellbeing of volunteers, in particular those of Black, Asian and minority ethnic (BAME)¹ communities.
- 1.3 Volunteers (and those working in CAL who had a volunteering background) were once again encouraged by CAL managers, supervisors and fellow volunteers to get involved in the research in 2023, with two main engagement activities open to those who wanted to have a say:
- one-to-one interviews, via telephone or videocall, taking place from late January and throughout February 2023; and
 - a survey sent to all volunteers, running for six weeks through to 24th February 2023.
- 1.4 CAL are keen to build a timeline of intelligence and evidence on the 'volunteer experience' to help inform the evaluation of the Equalities Programme and future volunteer strategies. The views and perceptions of both existing volunteers and those who have recently left are important, helping generate a rounded understanding of the impact of volunteering on various aspects of health and wellbeing.
- 1.5 This year's report will refer back to the 2021 study and reporting (from this point referred to as '2021 CAL Report'), to identify areas of similarity and difference over time.

The views and perceptions of both existing volunteers and those who have recently left are important, helping generate a rounded understanding of the impact of volunteering on various aspects of health and wellbeing.

¹ There are a significant number of words, phrases and acronyms that appear when talking about ethnicity, and language is continuously evolving. Terms referring to ethnic groups that are in a minority in the population include ethnic minority, minority ethnic or minoritised ethnic. In the UK, they usually cover all ethnic groups except White British. Accepting the weaknesses associated with 'BAME' (Black, Asian and minority ethnic), it is still often used when making comparisons with the White population in the UK. As the Law Society notes, '*unease with the term 'BAME' largely stems from the grouping together of diverse ethnicities, and the implication that it reflects a singular or homogenous ethnic identity. However, it may be appropriate in some contexts still to use such broad categories, for example, when you are making statistical comparisons between White and the Black, Asian and minority ethnic populations*'. That is the context in which we use the term BAME and why we continue to deploy the acronym in this CAL report.

What national research tells us

- 1.6 In the 2021 CAL Report a brief literature review cast light upon studies that had been released in the ‘pandemic years’ (referring to the main period of impact caused by COVID-19, including lockdowns in 2020 and 2021), exploring emerging evidence on the potential health and wellbeing benefits of volunteering.
- 1.7 In late autumn 2020, as the first year of ‘lockdown’ was drawing to a close, an influential publication by Stuart et al (released in October 2020²) identified how and why volunteering might lead to changes in subjective wellbeing for volunteers. The publication provided a comprehensive review of the outcomes that link volunteering to changes in subjective wellbeing, including steps leading to wellbeing. The mechanisms for change and influencing factors informed the design of questions in the 2021 and 2023 CAL online surveys and also the semi-structured proforma questions used in interviews.
- 1.8 By 2021 more research and literature was focusing upon the way the pandemic was affecting those volunteering and comparing their experiences with the general population. For example:

“The advantages of being a volunteer are that it supports a deeper, more sustainable psychological resilience in a time of crisis and that a higher level of volunteering contributes to a more cohesive and resilient local area”

Abrams, et al (2021)

- In June 2021 ‘*Volunteering and wellbeing in the pandemic*’³ was released, highlighting positive and negative experiences of volunteering during the pandemic. ‘*Connecting with others, doing something purposeful, and feeling appreciated are hallmarks of the pandemic volunteer experience for many. It has provided crucial distraction at a challenging time*’.⁴
- ‘*Community, Connection and Cohesion During COVID-19: Beyond Us and Them*’⁵ explored the volunteering experience of many during the pandemic in 2021. As well as personal benefits, volunteering was found to impact on areas and the wider resilience of place: ‘*...the advantages of being a volunteer are that it supports a deeper, more sustainable psychological resilience in a time of crisis and that a higher level of volunteering contributes to a more cohesive and resilient local area*’⁶

- 1.9 For this 2023 reporting it is timely to explore literature and research released since the 2021 CAL Report, including how volunteering ‘post-lockdown’ has different health and wellbeing impacts, since the lockdown restrictions have

² Stuart, J., Kamerāde, D., Connolly, S., Ellis Paine, A., Nichols, G. and Grotz, J. (2020) ‘*The Impacts of Volunteering on the Subjective Wellbeing of Volunteers: A Rapid Evidence Assessment*’, What Works Centre for Wellbeing and Spirit. Here: <https://whatworkswellbeing.org/wp-content/uploads/2020/10/Volunteer-wellbeing-technical-report-Oct2020-a.pdf>

³ Taylor-Collins, E., et al (2021) ‘*Volunteering and wellbeing in the pandemic*’, Wales Centre for Public Policy and Leeds Beckett University, June 2021. Reports include: <https://www.wcpp.org.uk/wp-content/uploads/2021/06/Volunteering-and-wellbeing-in-the-pandemic.-Part-1-Learning-from-practice.pdf>

⁴ Ibid, p5, Taylor-Collins et al (2021) – ‘*Rapid Evidence Review*’: <https://wcva.cymru/wp-content/uploads/2021/06/Volunteering-and-wellbeing-in-the-pandemic.-Part-2-Rapid-evidence-review.pdf>

⁵ Abrams, D., Lalot, F., Broadwood, J., & Davies, K. (2021). ‘*Community, Connection and Cohesion During COVID-19: Beyond Us and Them Report*’. https://www.belongnetwork.co.uk/wp-content/uploads/2021/02/Belong_InterimReport_FINAL-1.pdf

⁶ Ibid, p43, Abrams et al (2021)

been lifted. Smith and Smith (2022)⁷ present findings from a UK-wide survey from 2021, to understand the impact of the pandemic on people’s social relationships, volunteering activity, health and wellbeing. The survey found a stark difference in findings between the 10% least deprived communities versus the 10% most deprived. Those living in the 10% most deprived areas, and who volunteered (n=408), when compared to those who did not volunteer, had statistically significant higher scores on: talking with neighbours; socialising with others; gaining confidence in socialising with others since the start of the pandemic; and had better mental and physical health, and general wellbeing.

- 1.10 ‘*Volunteer wellbeing beyond the pandemic: Insights from the voluntary and community sector*⁸’, released in July 2022, noted how there was a contrast between people getting involved in volunteering during the pandemic and those that had to stop (or step back) from their roles. Some people have been slower to return to volunteering, including some disabled people, missing out on the wellbeing benefits of volunteering. Substantial inequalities in access to volunteering have persisted through the pandemic, with those from lower socio-economic groups less likely to get involved – “*Issues relating to volunteer wellbeing and inclusion are therefore closely intertwined*”.

Our approach & delivery stages

- 1.11 Back in June 2021 MLR was brought in to work with CAL managers to explore several key research questions around the health and wellbeing of volunteers - including:

- ***Does volunteering at CAL improve the health and wellbeing of volunteers?***
- ***In what ways does volunteering improve health and wellbeing?***
- ***What is the impact on health and wellbeing specifically for BAME volunteers?***
- ***What more can CAL do to improve the health and wellbeing of our volunteers?***

- 1.12 The two main consultation fieldwork ‘stages’ to the work are summarised in the graphic that follows, with the methodology replicated in 2023 - to enable consistent, ongoing understanding and answers to be formulated around the research questions as the Equalities Programme develops.

⁷ Smith, K and Smith, A (2022) ‘*Volunteering for a healthier Britain*’ https://www.royalvoluntaryservice.org.uk/media/wg4ewlpl/volunteering_for_a_healthier_britain_report.pdf

⁸ Stuart, J and Crawford, A (2022) ‘*Volunteer wellbeing beyond the pandemic: Insights from the voluntary and community sector*’ <https://www.birmingham.ac.uk/documents/college-les/gees/centre-urban-wellbeing/volunteer-wellbeing-5.7.22.pdf>

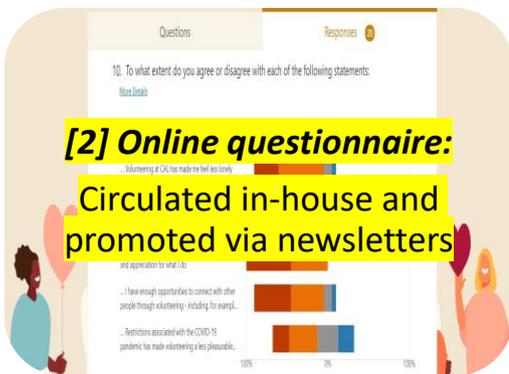
The two main consultation fieldwork ‘stages’ to the work and methodology developed in 2021 have been replicated in 2023

Figure 1: Two consistent fieldwork stages, deployed in 2021 and 2023



[1] Volunteer interviews:
One-to-one video and telephone calls

- MLR created a semi-structured proforma for use in telephone / video one-to-one interviews, with CAL introducing the work to volunteers and relevant paid staff who have a volunteering background.
- MLR undertook 20-30 min telephone or MS Teams interviews.
- MLR typed up confidential, summary note 'transcripts'.



[2] Online questionnaire:
Circulated in-house and promoted via newsletters

- MLR designed MS Forms questionnaire.
- CAL managers and staff emailed link to volunteers.
- Promotion within CAL fully introduced the work to volunteers, prior to reminder emails, and final 'chasing' for contributions.

Survey Methodology Notes:

1.13 In reviewing the 2021 questionnaire and making only slight amendments to the online survey in 2023, key considerations were:

- **Incorporating the same 'standardised' health and wellbeing questions** – once again reviewing those found in the Wellbeing Measures Bank⁹, and matching those from 2021 to enable comparison where possible with other survey results and ensure this in-depth CAL survey on health and wellbeing would be comparable to the 'baselining' questionnaire of 2021. Sources of question, as shown in the graphic that follows, were:
 - 'ONS4'¹⁰ – sourced from the Office for National Statistics (ONS), four measures capture three types of well-being: evaluative, eudemonic¹¹ and affective experience¹². These measures ask people to evaluate how satisfied they are with their life overall, asking whether they feel they have meaning and purpose in their life, and asks about their emotions during a particular period.

Incorporating the same 'standardised' health and wellbeing questions – the ONS4 and Shorter Warwick-Edinburgh Mental Wellbeing Scale (SWEMWBS) measures

⁹ <https://measure.whatworkswellbeing.org/measures-bank/>

¹⁰ Tinkler, L., & Hicks, S. (2011). Measuring subjective well-being. Office for National Statistics

¹¹ For more on types of wellbeing, see:

https://www.research.manchester.ac.uk/portal/files/31961964/FULL_TEXT.PDF

¹² For more on affective experience, see: <https://www.sciencedirect.com/topics/psychology/affective-well-being>

- Shorter Warwick-Edinburgh Mental Wellbeing Scale (SWEMWBS) - comprising 7 items from WEMWBS.

Figure 2: Wellbeing questions and topics covered in the CAL 2023 and 2021 survey

<i>Domain</i>	<i>Topic</i>	<i>QUESTION / STATEMENT</i>	<i>Source</i>
Personal/ Subjective wellbeing	Life satisfaction	Overall, how satisfied are you with your life?	ONS4*
	Worthwhile	Overall, to what extent do you feel that the things you do in your life are worthwhile?	ONS4*
	Happiness	Overall, how happy did you feel yesterday?	ONS4*
	Anxiety	Overall, how anxious did you feel yesterday?	ONS4*
Mental & Emotional Wellbeing	Optimism	I've been feeling optimistic about the future	SWEMWBS**
	Worth	I've been feeling useful	SWEMWBS**
	Peace of mind	I've been feeling relaxed	SWEMWBS**
	Resilience	I've been dealing with problems well	SWEMWBS**
	Competence	I've been thinking clearly	SWEMWBS**
	Autonomy	I have been feeling close to other people	SWEMWBS**
	Relationships	I've been able to make my own mind up about things	SWEMWBS**

*ONS4 = Office for National Statistics four measures of personal / subjective wellbeing.

** SWEMWBS = Shorter Warwick-Edinburgh Mental Wellbeing Scale

The survey was designed so it would take approximately 5 to 10 minutes – keeping the questionnaire to less than 20 questions was seen as critical

- **Length of questionnaire and time:** survey length and time needed to complete it was reviewed, with the 2021 MS Forms format recording an average time spent to complete the 2021 survey (13 minutes). With respondents being promised on the cover letter that the survey would take approximately 5 to 10 minutes, keeping the questionnaire to less than 20 questions was seen as critical to encourage as many people as possible to complete it.
- **Including a majority of closed scoring questions** (particularly near the start) meant that people would rapidly advance through the form.
- **Leaving some questions on personal characteristics of the respondents to the end** - to ensure those preferring not to input that

information wouldn't be put off completing the questionnaire by facing those questions early in the process.

- **Exploring proven mechanisms of change** - in addition to the standardised 'scoring' questions, several statements were included in question 10, that explored proven mechanisms of change in volunteer wellbeing – including questions around connectedness, appreciation and social connections.
- **Adding questions to enhance the survey** – including asking how strongly people felt that CAL 'was a place where they feel they belong' (as research suggests that when people feel a sense of belonging at work, they're not only happier and more social, but also more productive) and asking whether they feel they are able to 'bring their whole self to work' (encouraging people to show up fully and authentically, being open and honest about things that could be perceived as 'flaws').

Interview Methodology Notes:

One-to-one interviews were once again conducted, to explore in more depth perspectives and outcomes around wellbeing and health.

- 1.14 To explore in more depth perspectives and outcomes around subjective wellbeing impacts, one-to-one interviews were once again conducted in the 2023 research. Interview considerations included:
 - **Questions designed to explore issues sensitively** – topics such as loneliness or mental health sometimes making people feel awkward and socially stigmatised, with experience best drawn out in one-to-one interview settings.
 - **Anonymity** – the confidential nature of the chats was stressed, with recordings/transcripts not circulated beyond the MLR office.
 - **Developing a 'pool' of interviewees** – the last question to interviewees was to ask if they would consider requests for further information as part of future research. This was asked to help build a pool of volunteers happy to engage with the end-of-programme evaluation.
- 1.15 Both the survey and interview proformas are included on the project microsite set up for this research project – see the last page of this report for more information.
- 1.16 The final step in the project was to work alongside project managers to develop the final report, with MLR circulating a draft for comment, prior to final amendments, and circulation of final report to managers.

2. FINDINGS

2.1 The following project findings, bringing together both survey results from completed MS Forms questionnaires and feedback from interviewees, are sub-divided under five main headings, as follows:

1. **Characteristics of those taking part.**
2. **Motivation, support and appreciation.**
3. **Health and wellbeing.**
4. **Perceived barriers and improvement ideas.**
5. **Satisfaction, belonging, authenticity and future intentions.**

I. Characteristics of those taking part

2.2 The online questionnaire link was sent to the entire volunteer cohort, and the confidential nature of it meant there was no way to influence who might complete it and therefore what cross section of roles participated. However the sample of interviewees participating was more 'purposive' in nature, as it was in 2021: whilst the request to take part went to all volunteers, a selection of volunteers were also approached directly so as to input a particular stance or viewpoint - for example, someone recently left or someone with a distinctive 'volunteer journey'. All conversations were confidential and all reporting anonymised so that names and identifying comments are not used in reports.

The online questionnaire link was sent to the entire volunteer cohort, whilst the request to take part in interviews was more purposefully selective - with staff approached directly by managers, to ensure a range of volunteer journeys is captured.

2.3 The range of 'volunteer journeys' covered by this exercise includes:

- Trainees (with very little track record of volunteering) through to those who had been volunteering over five years, having volunteered in CAL prior to the pandemic.
- Three interviewees were employees at CAL, who looked back at their volunteering, and one volunteer was a Trustee.
- BAME volunteers (and staff with volunteering experience) were encouraged to take part, to help explore whether there were any particular differences in the volunteering impact on health and wellbeing.
- Several interviewees had experience of seeking asylum in this country.

Demographics

2.4 Following the release of the 2021 CAL report there has been a large intake of volunteers. The snapshot from the CAL staff database back in September 2021 revealed 38 volunteers registered with CAL - a similar snapshot in March 2023 reveals that the number of volunteers has risen to 83 (for comparison, this is still lower than 'pre-pandemic' levels). In 2021 just under a third (32%) self-identified as BAME and that ethnicity split hasn't changed much: of the present cohort of 83 volunteers, 30% [n=25] self-classify as being from an ethnic minority.

2.5 As with the 2021 CAL study, interviewees and survey respondents were asked their age, gender and ethnicity.

- 2.6 When asked to self-identify their ethnicity, of those taking part in the project survey and interviews:
- 70% of those completing questionnaires in 2023 self-identified as 'white' (n = 16), 26% as BAME (n = 6), and 1 preferred not to say. Broad ethnic breakdown of respondents was similar in 2021: with 70% self-identifying as 'white' (n = 14), 20% BAME (n = 4), and 10% preferring not to say (n = 2).
 - A far higher number of those taking part in 2023 interviews classified themselves as from a minority ethnic group when compared to the survey, and indeed when compared to the interviewees in 2021: Eleven interviewees identified as BAME or not 'white British' in 2023, compared to seven interviewees (just under half) in 2021.
- 2.7 When asked 'what age band you put yourself in':
- Interviewees in 2023 were primarily in the 30 to 59 age band (47%), a third were sixty or over, and the remaining 20% were under 30 years of age. Back in 2021 those aged between 30 and 59 years of age were also the largest age cohort of interviewees (40%).
 - As with the interviewee age breakdown, the largest number of 2023 survey respondents were aged 30 to 59 (52%). In both 2023 and 2021 a relatively small number of surveys were completed by those under 30 years of age: 17% in 2023 (n=4) and 15% (n = 3).
- 2.8 When asked about gender:
- Six men took part in interviews in 2023, equating to 40% of interviewees (a very similar proportion split compared to 2021, when five men took part).
 - 70% (N = 16) of 2023 survey respondents, and 9 of the 15 interviewees, are female. That's a very similar breakdown to 2021.

Three questions sought feedback on participants characteristics – asking people to specify an age, gender and ethnicity.

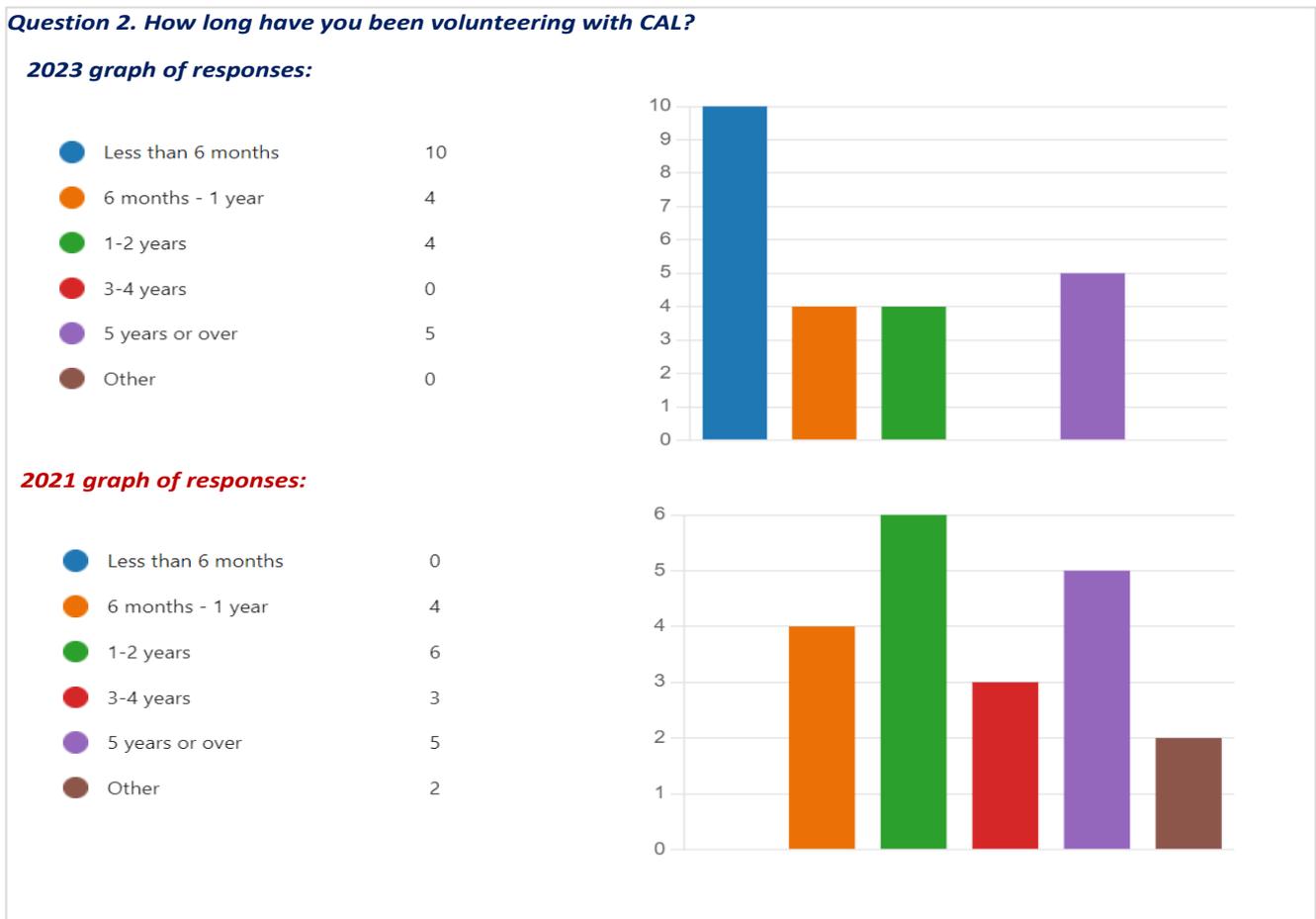
Role and length of service

- 2.9 Questions one to three on the survey questionnaire asked respondents to indicate what their main volunteer role is, how long they have been volunteering at CAL and how many hours per week they volunteer. As noted in the 2021 reporting, the frequency and amount of volunteering undertaken affects wellbeing outcomes around involvement.
- 2.10 In answer to these first three survey questions:
- The large majority of survey respondents in 2023 classified themselves as advisers or telephone advisers (87%, n=20). This tallied with 2021, when 75% classified themselves in a similar way.
 - A major difference in findings from the 2021 survey emerges when looking at length of time volunteering at CAL.
 - As can be seen in the graphic that follows, almost half of the respondents in 2023 had been volunteering for less than six months (n=10), whereas in 2021 none of the survey respondents were new to CAL. When this was flagged to CAL the explanation was clear: *"There was practically no recruitment from the start of the pandemic until summer 2022. There may have been some student placements, but they are short (term) and there would have been few of them. There was only one cohort of around 6 volunteers which started in*

November 2020 - they had all applied before the first lockdown and by summer 2021 one of them had secured paid employment with us and some of the others had already moved on”.

- Conversely, in 2023 only five respondents had been volunteering for three or more years (22%, or just over one in five) – in contrast to the 2021 survey in which half of respondents had volunteered at CAL for three years or more (up to nine years in one case). This meant that questions seeking views on the ‘pandemic years’, stretching back to early 2020, were not relevant to a large number of respondents in 2023, as many were only recent starters.

Figure 3: Survey responses to Question 2 – length of time volunteering



- Whilst most of the survey respondents in 2023 and 2021 work for between five and 10 hours a week (57% and 55% respectively), the biggest difference between respondent’s working hours is that a sizeable number in 2023 work for less than five hours (31%, almost one in three respondents), compared to only two who worked less than five hours per week in 2021.

2.11 The next section of this report summarises what motivates CAL volunteers, and what they think of training, CAL support and appreciation.

II. Motivation, support and appreciation

- 2.12 To help build rapport in the interviews and gradually introduce more detailed and potentially sensitive questions around health and wellbeing in the survey, a series of introductory questions were posed at the start of both exercises to put the participant at ease. All are linked to wellbeing, either as mechanisms or enablers.

Motivation

- 2.13 As documented in further detail in the 2021 CAL Report, several research studies have identified how volunteering can bring volunteers a sense of ‘mattering’ and a feeling they are giving something useful back. For example, ‘*The impact of volunteering on the health and well-being of the volunteer*’ study released in 2017¹³ highlighted how giving back and contributing to the community was a key element for volunteers in their increased sense of wellbeing through volunteering.

When it came to motivation for volunteering, there was a clear distinction between those wanting to give something back, those keen to fill their time, and those wanting to add experience ‘to their CV’.

- 2.14 The interviewees were asked what their motivations to volunteer at CAL were and whether this had changed during the pandemic years. As with the 2021 findings, there was a clear distinction between:
- those wanting to give something back (for example, in several cases, seizing the opportunity to contribute to the local community in which they’ve settled from another country);
 - those keen to fill their time (usually the retired);
 - and those keen to add experience, to make them more employable (often graduates or students).
- 2.15 That mix of personal and altruistic drivers can be seen in each of these distinct quotes:
- *“When I retired I wanted to keep my brain active, and give something back (having had a good career and being comfortably off); and use my skills”.*
 - *“I wanted to help somehow – in the country that helped me. And people in my community advised me to go to CAL”*
 - *“I don’t really have much experience advising people – so when I saw the opportunity advertised through Uni, I took that opportunity to fill a gap in my skillset”.*

Support

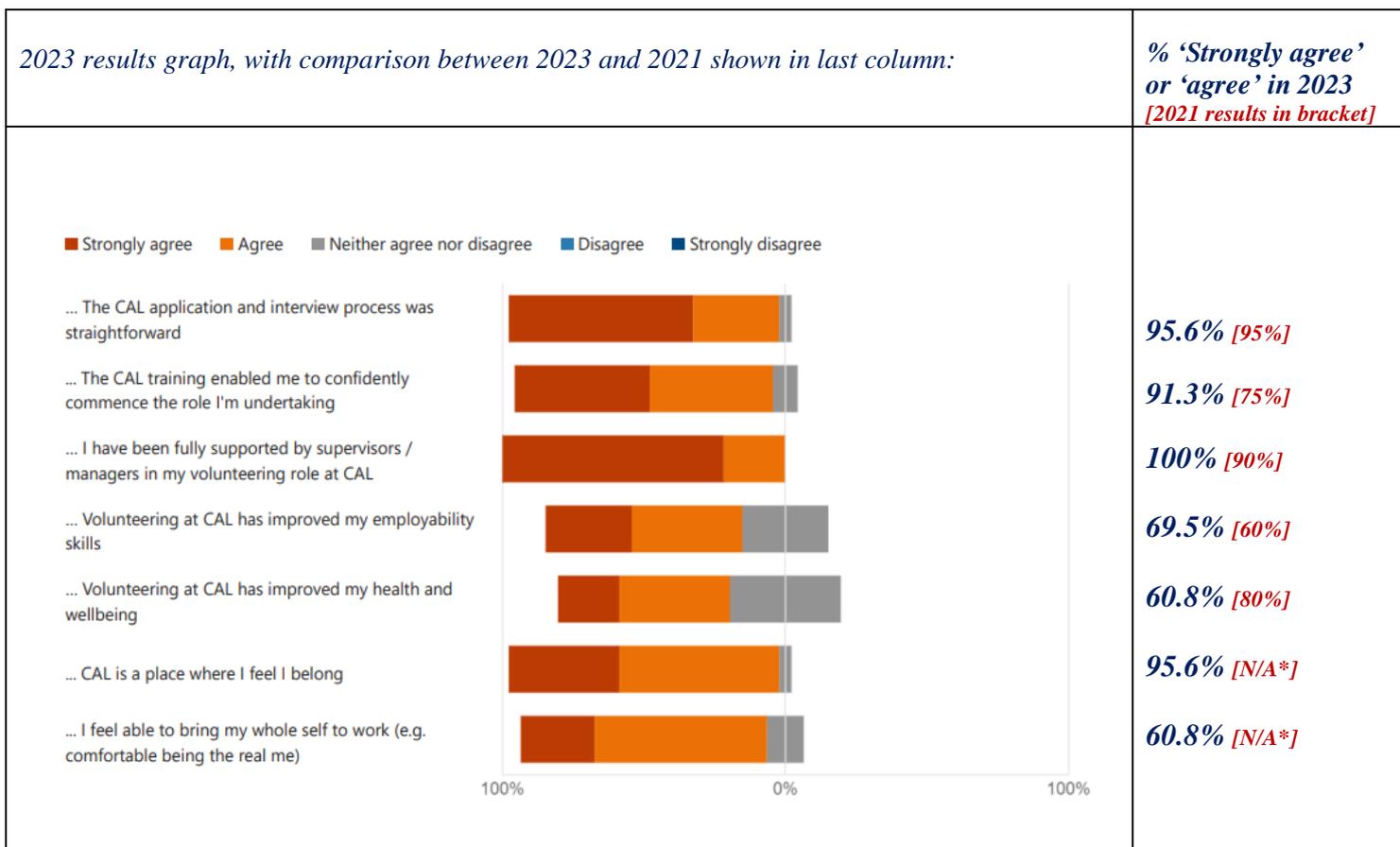
- 2.16 Question 4 of the survey asked respondents to judge how much they agree or disagree with a series of statements, including:
- whether training enabled them to confidently commence the role they were undertaking?
 - whether they have been fully supported by supervisors / managers in their volunteering role?
- 2.17 As can be seen in the graphic that follows, in answer to those questions:

¹³ Volunteer Ireland (2017) The impact of volunteering on the health and well-being of the volunteer, Volunteer Ireland – here: <https://www.volunteer.ie/wp-content/uploads/2022/04/Volunteer-Ireland-Report-FINAL.pdf>

- 91% (n=21) of respondents in 2023 agreed or strongly agreed that training enabled them to confidently commence the role they were undertaking, compared to 75% (n=15) in 2021.
- The overwhelmingly positive response towards the support provided by supervisors and managers in 2021 was repeated in 2023. In 2021 90% (n=18) of respondents agreed or strongly agreed that they have been fully supported by supervisors / managers in their volunteering role at CAL, with the other two respondents neither agreeing or disagreeing. This year all 23 respondents agreed or strongly agreed that they have been fully supported. This positivity towards the support received is reiterated in interviews.

Figure 4: Survey responses to the following Question 4 statements:

- ... The CAL application and interview process was straightforward.
- ... The CAL training enabled me to confidently commence the role I'm undertaking.
- ... I have been fully supported by supervisors / managers in my volunteering role at CAL.
- ... Volunteering at CAL has improved my employability skills.
- ... Volunteering at CAL has improved my health and wellbeing.
- ... CAL is a place where I feel I belong*
- ... I feel able to bring my whole self to work (e.g. comfortable being the real me)*



*N/A = statement added in 2023; not asked in 2021.

Appreciation

56% of respondents ‘strongly agree’ and 44% ‘agree’ with the statement ‘CAL supervisors / managers give me enough thanks and appreciation for what I do’ - the only question where every volunteer respondent agreed or strongly agreed. This was the case in 2021 also.

- 2.18 Our 2021 literature review outlined a range of studies revealing that appreciation is linked to the subjective wellbeing of volunteers and is a key mechanism in influencing wellbeing – with unappreciated volunteers not gaining the wellbeing benefits experienced by appreciated volunteers. For example, McMunn et al’s (2009)¹⁴ longitudinal analysis found that volunteers who felt appreciated for their volunteering reported significantly better quality of life and life satisfaction compared to those who did not feel appreciated.
- 2.19 One of the statements in the 2023 survey (question 10) and interview question 5 asked participants whether they got enough thanks and appreciation for what they do.
- 2.20 The statement around appreciation, asked as part of question 10 in the survey (see previous Figure), was the only question where every volunteer agreed or strongly agreed in both 2023 and 2021. The statement ‘CAL supervisors / managers give me enough thanks and appreciation for what I do’ provoked 56% of respondents to strongly agree and 44% to agree in 2023 (55% and 45% respectively in 2021).
- 2.21 The interviewees explained how that appreciation is transmitted at CAL - example quotes include:
- *“Having worked in a variety of different organisations I’d say CAL are very strong in terms of recognition...from Monthly news to all staff, that gives thankyou’s, to the Open day invitation this week for a get together in August. The supervisor and manager in the office are very supportive”.*
 - *“I think the staff and volunteers here are amazing. Very helpful, welcoming and supportive”.*
 - *“I feel a lot of support – when I’m here at least once someone asks how I’m doing each time I’m in. I received Christmas cards with thank you messages, which was really nice”.*
 - *“Yes, I think in my first week I got a thank you”.*
- 2.22 Naturally there are areas for improvement – and Section IV of this report details a few suggested.

¹⁴ McMunn, A., Nazroo, J. Wahrendorf, M and Breeze, E., Zaninotto, P. (2009) Participation in socially-productive activities, reciprocity and wellbeing in later life: baseline results in England, Ageing and Society, 29 (5), - Abstract here:

<https://www.cambridge.org/core/journals/ageing-and-society/article/abs/participation-in-sociallyproductive-activities-reciprocity-and-wellbeing-in-later-life-baseline-results-in-england/C0553E73DE7D8C65E9EA30B69DC54285>

III. Health and wellbeing

Subjective / personal wellbeing – ‘ONS4’ Wellbeing Measures

2.23 The 2021 report lists a range of research studies that have applied ‘ONS4’ to track impact, and the four ONS measures were once again included in the CAL 2023 survey to provide consistent metrics on wellbeing. Comparative results for 2023 are presented in the graphic that follows.

Figure 5: Average ONS4 scores – all respondents 2023 [2021 in brackets]

ONS 4 question	Overall, how satisfied are you with your life nowadays?	Overall, to what extent do you feel that the things you do in your life are worthwhile?	Overall, how happy did you feel yesterday?	Overall, how anxious did you feel yesterday?
Average score 2023	6.5 [2021 = 7.2]	7.3 [2021 = 7.65]	6.5 [2021 = 6.9]	4.4 [2021 = 4.55]
Judgement of score, using thresholds:	MEDIUM/HIGH [2021 = HIGH]	HIGH [2021 = HIGH]	MEDIUM/HIGH [2021 = MEDIUM/HIGH]	MEDIUM [2021 = MEDIUM]

Applying approximate ONS4 score ‘thresholds’, the associated level of volunteer wellbeing is ‘high’ for worthwhile, ‘medium to high’ for life satisfaction and happiness, and ‘medium’ for the anxiety measure.

- 2.24 Applying approximate ‘thresholds’ from the What Works Centre for Wellbeing¹⁵ to judge ONS4 scores awarded by volunteers means that:
- the average volunteer wellbeing scores in 2023 are ‘high’ for worthwhile, ‘medium to high’ for life satisfaction and happiness, and ‘medium’ for the anxiety measure.
 - In 2021 the average scores were ‘high’ for life satisfaction and worthwhile measures, ‘medium to high’ for happiness, and ‘medium’ for anxiety.

Mental & Emotional Wellbeing – SWEMWBS measures

2.25 Question 9 on the 2023 survey once again uses the seven SWEMWBS (Shorter Warwick-Edinburgh Mental Wellbeing Scale) statements on mental and emotional wellbeing, asking the respondent to score on a scale of one to five, where one is ‘none of the time’ and five is ‘all of the time’.

2.26 2023 scoring against each of the seven measures follows in the next graphic, with comparative scoring for 2021 in brackets. The results show:

- Highest percentage scoring around *competence* (83% stating they have been thinking clearly either ‘all of the time’ or ‘often’), *relationships* (78% able

¹⁵ See thresholds on the Analysing and Interpreting Results page here: <https://measure.whatworkswellbeing.org/analysing-and-interpreting-your-results/>
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Volunteer answers to the mental & emotional wellbeing questions (SWEMWBS measures) reveal **most positive wellbeing around relationships, competence, resilience and autonomy.**

to make their minds up all of the time or often) and *autonomy* (feeling close to other people).

- An increase from 2021 to 2023 in people stating that ‘all of the time’ or ‘often’ they were:
 - feeling optimistic about the future (44%, up from 25% in 2021)
 - feeling relaxed (26%, up very slightly from 25% in 2021)
 - thinking clearly (83%, up from 75% in 2021)
 - feeling close to other people (61%, up from 50% in 2021)
- A slight fall in people stating that ‘all of the time’ or ‘often’ they were:
 - Feeling useful (48%, down from 60% in 2021)
 - Dealing with problems (57%, a slight fall on 60% in 2021)
 - Able to make their own mind up about problems (78% from 85%).

Figure 6: SWEMWBS – % of respondents scoring at either end of the spectrum

SWEMWBS ‘7’ statements:	Topic	% answered ‘All of the time’ or ‘Often’ in 2023 [2021 result in brackets]	% answered ‘None of time’ or ‘Rarely’ in 2023 [2021 result in brackets]
1. I’ve been feeling optimistic about the future	Optimism	44% [25%]	9% [10%]
2. I’ve been feeling useful	Worth	48% [60%]	4% [15%]
3. I’ve been feeling relaxed	Peace of mind	26% [25%]	22% [20%]
4. I’ve been dealing with problems well	Resilience	57% [60%]	4% [10%]
5. I’ve been thinking clearly	Competence	83% [75%]	4% [5%]
6. I’ve been feeling close to other people	Autonomy	61% [50%]	4% [15%]
7. I’ve been able to make my own mind up about things	Relationships	78% [85%]	4% [0%]

Physical health

- 2.27 The 2021 CAL Report explained how volunteering can improve physical health (through, for example, healthy behaviours such as exercise and helping people cope with personal illness), whilst conversely a persons demanding roles can have adverse impacts on physical health, such as causing fatigue and stress.
- 2.28 Question 10 of the questionnaire asked respondents how strongly they agree or disagree that volunteering has a positive impact on their physical health. In 2021 half either strongly agreed or agreed that volunteering had physical health benefits. In 2023 a similar result was recorded, with 56% either strongly agreeing or agreeing that there were physical health benefits.
- 2.29 Question 4 of the interview asked how volunteering affected their physical health. However there were very few in the 2023 interviews who were able to explain the impact on their physical health. This was primarily due to the nature of the volunteering work they did, with advisers not working in a physical role and the indirect benefits of travelling into work for example (where people worked in a CAL office) often negated by people driving to work.
- 2.30 A handful of people who were interviewed in 2023 did see a physical health impact – and those interviewees noted:
- *“I suppose the role does help – I have to walk a mile to the office, which gets me out and about, and is decent exercise”.*
 - *“Some roles in drop-ins may need people moving about during day, so for others it may need more journeying around, and affects their physical health and situation in that way”.*
 - *“Cycling to the Toxteth office in the past helped me exercise, but there were no real direct health benefits”.*
 - *Yes, it’s a positive benefit for me – I like to walk, and it means I don’t have to jump two buses”.*

Research into volunteering reveals that volunteers can benefit from enhanced mental health (including the alleviation of depression, and reduced anxiety) but for some it also can have adverse effects (‘burnout’, emotionally challenging roles causing stress).

Mental health, isolation and loneliness.

- 2.31 Research into volunteering reveals that volunteers can benefit from enhanced mental health (including the alleviation of depression, and reduced anxiety) but for some it also can have adverse effects (‘burnout’, emotionally challenging roles causing stress). Volunteering can be important for those who are retired, are marginalised in society (such as asylum seekers) and those who have low wellbeing and mental health. Two questions on the interview proforma asked whether volunteering had any effect on mental health, and whether volunteering had affected how lonely or isolated they feel.
- 2.32 As in 2021, most volunteers were able to explain positive effects on mental health. This includes:
- Seeing the benefit of your work and the rewards of helping people – for example: *“Sometimes you feel really good, and feel you’ve achieved*

something – its wonderful when you hear of successes. With form filling you never really get much feedback on how successful a person’s been, but you get a feel for whether they’re going to be ok”. Likewise: “... the job itself brings a lot of positive emotions and feelings – especially when I can help someone”.

- For those who are newly settled in the country a lot of satisfaction comes from helping the community in which they’re part of now: *“I’m able to help more people now than where I used to live – and I feel its giving back to all those who helped me settle in the UK”.* One interviewee explained how *“It feels like I can really contribute, can help people and the country I’m in. It’s really really positive”.*
- The benefits of being part of a group and being in a close network helps people’s mental health: *“It really does have a positive effect. I have a mix of work at home and office, and being in the office in a group situation of friendly people, helps mentally – I love being part of that”.* Those who experienced volunteering during the lockdown noted the adverse affects that brought: *“lockdown made it all more stressful – in that before you could talk face to face more with colleagues and clients”.*

2.33 Negative effects on mental health are also flagged by interviewees, notably when volunteers are in roles they are not comfortable in, feel down after dealing with complex cases, or they feel they don’t have the skills / knowledge to help. Example interview quotes follow, that reveal the stress and strains of roles on mental health:

- *“people can have such horrible lifestyles and circumstances that I can feel depressed after talking to them”*
- *“there is the pressure of time – when you have competing priorities. That’s a negative”.*
- *“the role can be challenging, especially when helping people where English isn’t their first language. Language Line is great, but can only do so much”.*
- *“I do feel stressed and tired at times”.*

2.34 Question 10 on the survey asked whether volunteering at CAL has made people feel less lonely and/or less isolated – and in 2021 volunteers overwhelmingly pointed to the positive effects of volunteering: 85% (n=17) either strongly agreed or agreed volunteering has made them feel less lonely and/or isolated. In 2023 a similar result emerged – this time 82.6% [n=19] strongly agreed or agreed.

82.6% (n=19) of survey respondents either strongly agreed or agreed that volunteering has made them feel less lonely and/or isolated.

2.35 Asked to explain how volunteering impacted on loneliness or isolation, several interviewees noted how CAL enables them to connect with others and develop social networks, particularly when they’re able to work in the offices – with similar issues flagged as in 2021. For example:

- *“I stopped volunteering for a while and I felt lost. Going in gave me a purpose. Volunteering did help fill a gap. It was almost like going back to work again, and the social aspect really helps”.*
- *“Personally I’ve not felt lonely or isolated – I’ve always joined groups. But I can see how it can help those who do feel lonely and isolated, as it’s an*

environment that's welcoming and really helps peoples' wellbeing – being part of the team”.

- *“yes, I have felt lonely at times – and getting to the office it's nice to be with other people. Lockdown didn't help me”.*
- *“At one time or another I have felt isolated, and alone – and I feel I have friends in the buzzing office, even when it's all trainees and students. I feel part of a team”.*
- *“I think some felt isolated due to the remote working in lockdown – but then again others benefited, so it's a hard one to call”.*
- *“I need people around me – and before pandemic I only had communication with the school, and then all changed in lockdown, so I was reliant on calls”.*

IV. Perceived barriers and improvement ideas

Barriers to volunteering

2.36 As the brief literature review at the start of this report highlights, it is widely acknowledged that some groups miss out on the benefits of volunteering due to barriers they face and inequalities in access to opportunities. Ill health, childcare and disability are cited as just a few examples of particular barriers. Question 11 on the 2023 and 2021 questionnaires asked people to identify any barriers to volunteering they had experienced or witnessed. This was explored in more detail in interviews.

2.37 In 2021 volunteers flagged that:

- **Remote working** was a major issue and barrier highlighted by many volunteers. The requirement to move to remote working during lockdown created challenges, and not being able or willing to continue their role remotely was the main reason for volunteers leaving or not re-joining the service in 2020/21. A couple of volunteers stressed the positives of working away from the office, however the majority of interviewees highlighted negative aspects of remote working.
- In addition, BAME volunteers identified two main potential barriers and challenges
 - **Language** - for example: *“accents are so different,..so even those who speak English struggle. Especially when they speak fast!”.*
 - **Fearing a lack of appropriate skills and knowledge** - for example: *“The lack of knowledge about UK life and laws can make some people think that they need to have that knowledge to volunteer”.*

2.38 In 2023 barriers identified by interviewees include:

- **Training:** the length, structure and complexity of training is seen as the main barrier to those who want to join. Though many accept its necessary, improvements could be made:
 - *“...the thorough training that is required may be a barrier to recruitment of volunteers”.*
 - *“some people may find the lengthy training off putting”.*

“At one time or another I have felt isolated, and alone – and I feel I have friends in the buzzing office, I feel part of a team”.

Interviewee

- *“There’s a lot of training that’s primarily based on reading...and a huge volume of information presented as non inter-active text to plough through”.*
- *“it takes time to go through training. But need all that, as need to know how to do it!”*
- **Language:** whilst this is flagged as a potential barrier for people in 2023, the efforts of CAL are also noted. *“If someone doesn’t have English as first language it’d be hard for them. But they take this barrier thing very seriously – they try really hard to make sure they don’t get in the way for people”.*
- BAME volunteers identified a few specific barriers and challenges:
 - **More face-to-face** interaction with clients: One noted that the *“inability to meet clients face to face is an issue for me”*. Whilst another volunteer explained *“the lack of face to face advising might be seen as a put off for some, as its easier to understand people when face them”*.
 - **Awareness:** with a couple of the BAME interviewees picking up that *“not enough people are aware of the citizens advice in my community”*, and also *“people may not know that they’re are able to volunteer and may not realise the benefits of volunteering”*.

2.39 By far the most common response from interviewees, when asked about barriers, was to stress how few barriers existed in CAL – and highlight the increased flexibility adopted by CAL and the way they approached any challenges identified by volunteers. CAL are widely praised for their flexibility in working around volunteer needs, and not letting barriers get in the way: *“They fit their working arrangements around the individual... I would say that’s a very strong tick in terms of the organization”*. This is reiterated by a recent trainee: *“I’ve not seen any barriers, in fact I’ve seen barriers removed, as CAL are very open and supportive for those with issues - around, for example, childcare or disabilities”*.

By far the most common response from interviewees, when asked about barriers, was to stress how few barriers existed in CAL – and highlight the increased flexibility adopted by CAL and the way they approached any challenges identified by volunteers.

Improvement ideas

- 2.40 The last question in the interviews asked the volunteer to think about their whole ‘volunteer journey’ (from the early days starting out through to where they are now) posing the question: *‘If you could change one thing, that would make your volunteering experience at CAL better, what would it be?’*
- 2.41 Volunteer suggestions for improvement include:
- **More flexible working – as it’s proving popular**
 - An improvement idea raised by individuals in 2021 included the need for more flexible working hours: *“We sign up to certain specified time shifts... and if I have to pick up kids or the like, it could be inflexible. Easier if could do 2 hours in the morning, and other times, so more flexible”*.
 - It was significant that flexibility was a key improvement noted in 2023 interviews. As mentioned in the previous section of this report, fitting working arrangement around the lives of the individual is applauded and encouraged: *“They’re so flexible. Supervisors adjust processes to particular volunteers. So if training goes faster they get you*

engaged to taking calls quicker, and its always flexible, so it depends on how I feel and my confidence”.

- **Training**

- In 2021 an improvement suggested in the report was for more investment in interactive and face-to-face training, where possible. A pervading theme in many conversations at the time was that people were keen to re-balance their working lives after lockdown, with more face-to-face contact, and if remote training is to be the primary format then it needs to be more interactive.
- In 2023 training was an area picked upon again by volunteers as needing more work. One BAME interviewee noted how *“the only potential downside is the style of training. A lot of it is reading based which can be difficult to get through. But it is okay when you take it at your own pace”*. Other improvement suggestions include: *“Being able to do practice with other trainees. It is a big step from reading about dealing with clients to actually speaking with them. It’s good that we get to observe advisers, but I think that having the chance to practice the opening section of the calls, the permissions and personal details section, would have helped me a lot”*. The continuing need for better interactive training is highlighted by a couple of interviewees – including *“maybe more group training presentations on Zoom”*.

In 2023 training was an area picked upon again by volunteers as needing more work. One BAME interviewee noted how *“the only potential downside is the style of training. A lot of it is reading based which can be difficult to get through”*.

V. Satisfaction, belonging, authenticity and future intentions

Satisfaction

- 2.42 Question 13 on the survey asked respondents to indicate how satisfied they are with their overall experience of volunteering with CAL – using a scale, from one (‘very dissatisfied’) to five (‘very satisfied’). The average score for the 20 respondents in 2021 was 4.3; in 2023 this has increased to 4.48.
- 2.43 That high level of satisfaction with volunteering at CAL is recounted in answers given to Question 16, where survey respondents are asked for any additional comments. Positive comments include:
- *“I find CAL to be an amazingly professional and effective service and am very proud to be a part of it”*.
 - *“It’s been a really worthwhile experience, as you do feel that you can make a positive difference to people’s lives and it has given me a far greater appreciation of the variety of difficulties our clients encounter”*.
 - *“I have had a great experience so far. The staff at CAL have been really helpful and friendly. I feel comfortable asking for help if I need it and supervisors are always supportive of me and other trainee volunteers”*.

Belonging and authenticity

- 2.44 Social belonging is related to identity, trust, participation, solidarity, and values within groups, teams, networks, and institutions. Like inclusion, belonging at work has positive effects on wellbeing. Oyanedel and

Paez,(2021)¹⁶ explain how people tend to feel belonging when they are trusted and respected, when they feel safe to express their opinions, and when their contributions are valued. They assert that wellbeing, inclusion, and belonging are inseparable.

- 2.45 In tandem with the increased focus on belonging, many workplaces are encouraging employees to bring their “whole (authentic) self” to work. The term “whole self” is somewhat vague, and people interpret it in various ways. However, many people agree that it means being open about identities (such as religion and sexuality) at work, feeling empowered to express values and opinions, being personable with colleagues, and caring about their wellbeing. That link to wellbeing led to volunteers being asked about belonging.
- 2.46 Statements around belonging and authenticity were added to question 10 in the survey (see Figure 4) for the first time in 2023, and therefore no comparison is available for 2021. The results reveal that:
- 96% of respondents reacted positively to the question on belonging – 39.1% of respondents strongly agree and 56.5% agree that ‘CAL is a place where I feel I belong’.
 - 87% of respondents provided a similar positive answer when asked how strongly they agreed or disagreed that they were able to bring their whole self to work - 26.1% of respondents strongly agree and 60.9% agree.

Seven respondents planned to volunteer more in the next couple of years, and all seven are extremely likely to recommend volunteering at CAL to a friend or colleague (‘Promoters’)

Future intentions

- 2.47 Near the end of the questionnaire respondents are asked to indicate their future intentions to volunteering, looking ahead to the next one or two years - whether they planned to stop volunteering, do the same amount, volunteer less or volunteer more.
- 2.48 **Those volunteering less or stopping:** In 2023 four volunteers planned to stop volunteering or do less, exactly the same number as in 2021. All four noted that they had been fully supported by supervisors / managers, and interestingly those who planned to stop volunteering had a few notable similarities: two had wanted more face-to-face contact with clients; all four had been volunteering at CAL for less than a year, and all agreed or strongly agreed that volunteering had improved their employability skills.
- 2.49 **Those planning to volunteer more:** In 2021 almost a third of survey respondents (six volunteers) planned to volunteer more in the next couple of years. In 2023 seven volunteers plan to do more – and as in 2021 they score highly when asked how satisfied they are with their experience of volunteering with CAL, and all were extremely likely to recommend volunteering at CAL to a friend or colleague (question 15 on the survey) – all being classed as ‘promoters’ using the Net Promoter Score (NPS).

¹⁶ Oyanedel, J. C., & Paez, D. (2021, August 30). Editorial: Social Belongingness and Well-Being: International Perspectives. *Frontiers in Psychology*, 12.

<https://www.frontiersin.org/articles/10.3389/fpsyg.2021.735507/full>

Net Promoter Score (NPS)

2.50 The Net Promoter Score (NPS) is a metric designed originally for measuring customer loyalty but can be applied to understand more about workforce loyalty and engagement. The NPS is generated from the score assigned to the question, “How likely is it that you would recommend (insert company or product/service) to a friend or colleague?” and was asked in both the 2021 and 2023 survey. The respondent is asked to select a rating on a zero to 10 scale, with zero being ‘not at all likely’ to recommend volunteering at CAL to a friend and 10 being ‘extremely likely’.

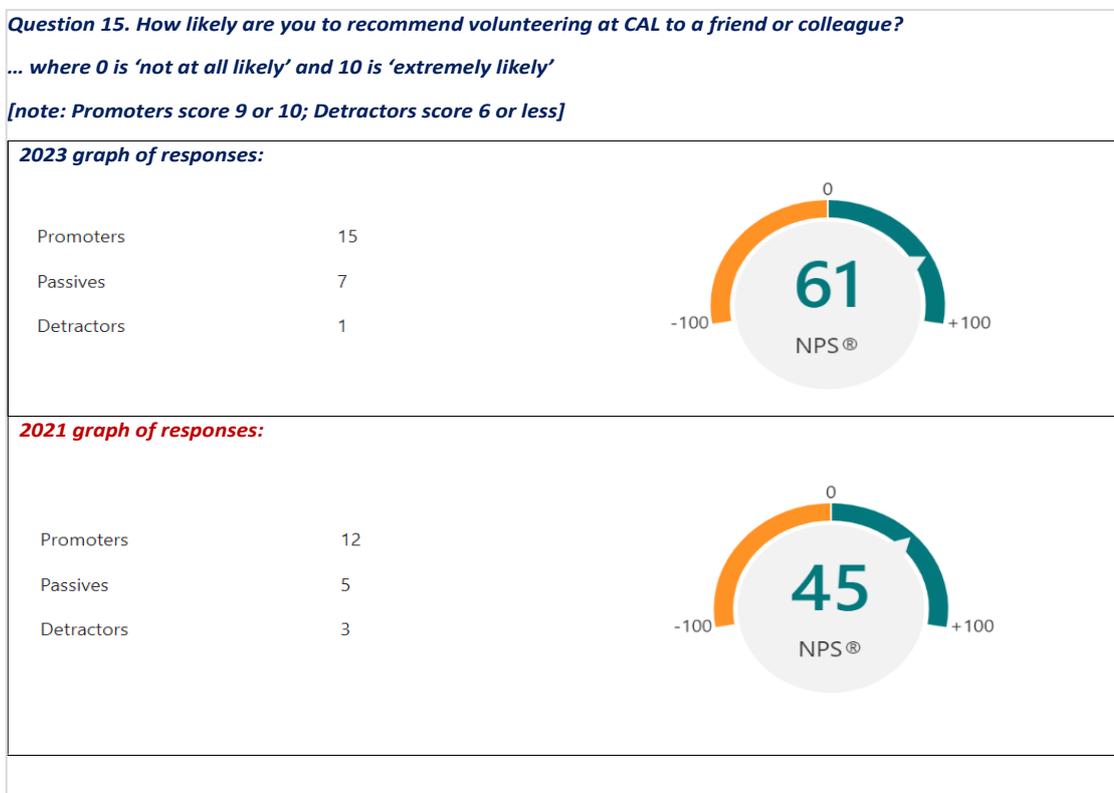
2.51 Respondents are segmented into one of three groups, based on the rating: Promoters (9 or 10 rating), Passives (7 or 8 rating), and Detractors (0 through 6 rating). The NPS is calculated using the following formula: $NPS = \% \text{ of Promoters} - \% \text{ of Detractors}$. The resulting score can range from -100 to a high of +100.

2.52 According to Survey Monkey’s global benchmark data¹⁷, which summarises 150,000 organisation’s NPS, the average score is +32.

2.53 Comparing the CAL surveys:

- In 2021 the NPS for CAL was +45, with 12 promoters identified.
- In 2023 this has improved to +61, as shown in the graphic that follows:

Figure 7: Responses to Question 15 – recommend volunteering to a friend?



¹⁷ <https://www.surveymonkey.co.uk/curiosity/what-is-a-good-net-promoter-score/#:~:text=Here%20%80%99s%20a%20closer%20look%20at%20the%20global%20benchmark,p erformers%29%20have%20an%20NPS%20of%20%2B72%20or%20higher.>

In 2021 the Net Promoter Score (NPS) for CAL was +45, with 12 promoters identified. In 2023 this has improved to +61

3. CONCLUSION & NEXT STEPS

- 3.1 This is the second study to be completed at CAL focussed upon the Equalities Programme’s volunteering health and wellbeing outcomes – and as such provides a useful second ‘data point’ of evidence to help managers monitor change and gauge improvements, based on volunteer feedback. As highlighted in the 2021 report, understanding how volunteering improves health and wellbeing, and learning lessons about what works in volunteer support, is an important step in developing CAL improvement planning activities – to help the organisation build upon good practice and then share notable practice with other organisations.
- 3.2 This section of the report concludes with:
- a summary response to the four research questions posed at the start of the 2021 research, highlighting any notable changes over time between 2021 and 2023.
 - suggestions for further work to enhance CAL understanding on health and wellbeing, and strengthen the foundations for future evaluation and improvement planning exercises.

The scale and format of this type of research means positive effects of volunteering may be overstated, as those with a more negative experience are less likely to be involved.

Revisiting the four key research questions from 2021

- 3.3 There are several caveats, identified in the 2021 CAL reporting, that need to be reiterated about the 2023 findings, for clarity:
- the evidence collected via surveys and interview is from those willing to take part – and further work is needed in future to explore the experiences of those who may have fallen out of volunteering early or who don’t engage with the CAL Volunteering Team.
 - Further limitations regarding the small number of BAME respondents is documented later in this section.
- 3.4 With those caveats in mind, taking each of the research questions in turn – in summary:

(1) Does volunteering at CAL improve the health and wellbeing of volunteers?

- 3.5 In tune with national research and the 2021 CAL reporting, the survey and interview once again presents a mixed picture on the impact and associations between volunteering at CAL and health and wellbeing. There are both positive and negative associations, with positive feedback more common.
- 3.6 Summarising the positive effects of volunteering at CAL, using evidence presented in Section 2 of this report:
- The latest assessment of the ‘ONS4’ measures recorded in the 2023 survey reveals that the average volunteer wellbeing scores in 2023 are ‘high’ for the worthwhile measure, ‘medium to high’ for life satisfaction and happiness, and ‘medium’ for anxiety. Whilst there has been a slight downgrading from the ‘high’ score for life satisfaction in 2021, the results are still encouraging.

- Volunteer answers to the mental & emotional wellbeing questions (SWEMWBS measures) reveal most positive wellbeing recorded around relationships, competence, resilience and autonomy. Assessing change in scores between 2023 and 2021 reveals an increase in people stating that ‘all of the time’ or ‘often’ they were:
 - feeling optimistic about the future (44% of respondents, up from 25% in 2021)
 - feeling relaxed (26% of respondents, up very slightly from 25% in 2021)
 - thinking clearly (83%, up from 75% in 2021)
 - feeling close to other people (61%, up from 50% in 2021)
- As was the case when trying to interpret the 2021 ONS4 and SWEMWBS results, it is hard to ascertain what measurable change in volunteers wellbeing can be attributed to their volunteering in 2023.

3.7 Not all volunteers have positive experiences, and once again volunteers have fed back on the times when stress and negative impacts have impacted on their volunteering: *“When I started at CAL it didn’t turn out as I’d hoped... I was thrust into general advice, into a drop-in centre... but I found it too stressful, not knowing answers (it took a while to look things up) and I was almost to the point of saying I couldn’t do this”.*

Volunteers glean enhanced health and wellbeing benefits through:

- Connecting to a community, particularly for newly settled volunteers
- Seeing the benefit of their volunteering
- Being part of a group in CAL and being in a close network

(2) In what ways does volunteering improve health and wellbeing?

3.8 2023 marks the ten year anniversary of the Carnegie Mellon University study¹⁸ that revealed that volunteers who had volunteered at least 200 hours each year were 40 percent less likely to develop high blood pressure than non-volunteers, and in the last decade the benefits to health (both physical and mental) and wellbeing of volunteering have been widely publicised. National research explored earlier in this report reveals how volunteering can help people feel more socially connected to others and this in turn can drive positive changes in wellbeing – with (for example) social connectedness the strongest first step in the path from volunteering to increased wellbeing. Locally, the ways in which volunteering improves health and wellbeing varies considerably. As documented in Section 2 of this report, individuals glean enhanced health and wellbeing benefits through:

- Seeing the benefit of their volunteering – for example: *“Sometimes you feel really good, and feel you’ve achieved something – its wonderful when you hear of successes”* and *“... the job itself brings a lot of positive emotions and feelings – especially when I can help someone”.*
- Connecting to a community, particularly for newly settled volunteers – for example: *“I’m able to help more people now than where I used to live – and I feel it’s giving back to all those who helped me settle in the UK”,* and *“It feels like I can really contribute, can help people and the country I’m in. It’s really, really positive”.*

¹⁸ Press release:

https://www.cmu.edu/news/stories/archives/2013/june/june13_volunteeringhypertension.html

- Being part of a group in CAL and being in a close network – for example: *“It (volunteering) really does have a positive effect... being in the office in a group situation of friendly people, helps mentally – I love being part of that”.*

(3) What is the impact on health and wellbeing specifically for BAME volunteers?

3.9 In the 2021 CAL reporting limitations of this type of study were stressed at the outset, prior to considering the evidence around the impact of volunteering specifically on BAME health and wellbeing. These limitations are once more valid in 2023, with the main issues being:

- *Size of population* - the low number of BAME volunteers responding to the survey (four in 2021, and six in 2023) make one-time or limited occurrences seem more common than they actually are, and similarly, relatively common occurrences may not show up at all during the study. The sample size makes it not possible to find significant relationships from the data, as statistical tests require a larger sample size to ensure a representative distribution of the population and to be considered representative of groups of people to whom results will be generalised or transferred.
- *Potential duplication* – when asked most interviewees confirmed that they had also filled in a questionnaire, meaning that care is needed when interpreting both survey and interview findings due to the possibility of duplication in answers.

3.10 With these limitations in mind, there are several observations that can be made from assessing survey findings for the BAME participants. For example:

- it is worth noting that for those BAME volunteers taking part in the 2023 survey, all either strongly agreed or agreed that:
 - The CAL application and interview process was straightforward;
 - The CAL training enabled them to confidently commence the role;
 - CAL supervisors / managers give enough thanks and appreciation for what they do.
 - CAL is a place where they feel they belong
 - They feel able to bring their whole self to work (e.g. comfortable being the real me)
- The main difference between 2023 BAME survey results and responses in 2021 is that two years ago all of the BAME respondents strongly agreed or agreed that volunteering has a positive impact on physical health, whereas three of the six respondents in 2023 neither agree nor disagree.

3.11 When asked in the survey *‘How likely are you to recommend volunteering at CAL to a friend or colleague?’* (using a scale of 0 ‘not at all likely’ to 10 ‘extremely likely’) the BAME average score was 9, which is classed as being a ‘promoter’ of the volunteering experience according to the Net Promoter Score. As recommended in 2021, that enthusiasm for CAL volunteering can be tapped into, particularly when it comes to boosting recruitment of volunteers from ethnic minority communities. For example, being able to target promotional campaigns could be greatly helped by the critical

“The volunteering experience and application process was straightforward and accessible. I have not experienced any barriers.”

BAME interviewee

challenge of a group of BAME ‘champions’ who know what messages would work best for certain audiences.

3.12 Questions asked around employability and employment revealed:

“Yes – I’m looking for paid employment. And I can according to my immigration status and pay taxes and all that. And no, I don’t face barriers – I receive a lot of support from everyone I’ve met.

BAME interviewee

- When faced with the statement ‘*Volunteering at CAL has improved my employability skills*’, all of the BAME respondents either strongly agreed or agreed.
- In parallel, an additional question was added to the interview process in 2023, to explore employment issues where they exist. Of the 15 interviewees spoken to, three responded ‘yes’ when asked if they are looking for employment, and all three self-classified as BAME. When asked if they faced barriers to employment, the only issues identified that didn’t help their search for jobs revolved around their status and legality to apply for jobs, with asylum and international student rules flagged.

3.13 A comparison of the ONS4 measures is presented in the graphic that follows. When applying the ‘What Works’ Centre thresholds, the BAME volunteer wellbeing scores are not very different from the entire cohort results – with the main difference being that BAME respondents had slightly higher levels of happiness and lower levels of anxiety.

Figure 8: Comparison of BAME average scores with all respondent scores (ONS4)

ONS 4 question	Overall, how satisfied are you with your life nowadays?	Overall, to what extent do you feel that the things you do in your life are worthwhile?	Overall, how happy did you feel yesterday?	Overall, how anxious did you feel yesterday?
2023 Average score – all respondents	6.5 MEDIUM/HIGH	7.3 HIGH	6.5 MEDIUM/HIGH	4.4 MEDIUM
2023 Average score – BAME respondents	6.8 MEDIUM/HIGH	7.5 HIGH	7.3 HIGH	3.5 LOW/MEDIUM

3.14 Comparative scoring for the BAME respondents against each of the seven SWEMWBS measures is presented in the graphic that follows, with 2021 scores in box brackets.

Figure 9: Comparison of BAME score distribution with all respondents (SWEMWBS)

SWEMWBS '7' statements:	Topic	% answered 'All of the time' or 'Often' in 2023 [2021 result in brackets]
<ul style="list-style-type: none"> I've been feeling optimistic about the future 	Optimism	All = 44%; BAME 67% [2021: All 25%; BAME 75%]
<ul style="list-style-type: none"> I've been feeling useful 	Worth	All = 48%; BAME 67% [2021: All 60%; BAME 100%]
<ul style="list-style-type: none"> I've been feeling relaxed 	Peace of mind	All = 26%; BAME 17% [2021: All 25%; BAME 50%]
<ul style="list-style-type: none"> I've been dealing with problems well 	Resilience	All = 57%; BAME 50% [2021: All 60%; BAME 75%]
<ul style="list-style-type: none"> I've been thinking clearly 	Competence	All = 83%; BAME 67% [2021: All 75%; BAME 75%]
<ul style="list-style-type: none"> I've been feeling close to other people 	Autonomy	All = 61%; BAME 50% [2021: All 50%; BAME 50%]
<ul style="list-style-type: none"> I've been able to make my own mind up about things 	Relationships	All = 78%; BAME 67% [2021: All 85%; BAME 100%]

3.15 As recommended in 2021, before the Equalities Programme ends it would be worthwhile exploring in more detail how ethnicity intersects with other factors such as gender, socio-economic status and religion in impacting on health and wellbeing.

(4) What more can CAL do to improve the health and wellbeing of our volunteers?

3.16 Whilst it remains impossible to categorically conclude that volunteering at CAL has a causal effect on health and wellbeing metrics and feedback given, as was the case in 2021 there appears a positive association - and the qualitative evidence gathered from interviews (presented in Section 2) once again helps develop understanding. The confidential format of the survey and interviewing, and the 'snapshot' nature of the exercise (it is not a longitudinal, tracking exercise) means that causal effects on individuals cannot be measured in this exercise – though the inferences and judgements can help shape strategy.

3.17 As was the case in 2021, any improvement planning at CAL around volunteering is building on strong foundations: the positive feedback on how CAL support volunteers indicates that supervisors and managers have found

the right balance in receiving feedback and actioning change. For example, this years prevailing theme, flexibility, appears to reflect a drive by CAL to make sure the organisation is not only listening but also putting into practice flexible working processes that cater for individual need and can ‘flex’ around other demands on volunteers time.

3.18 This latest report is being released on the third anniversary of the first national lockdown in response to the COVID-19 pandemic, a timely reminder that health and wellbeing must remain a priority. Providing adequate support around health and wellbeing needs can benefit the individual and the organisation. Regarding the latter, whilst there has been a notable rise in wellbeing becoming a core component of overall business strategy in the UK, recently released data shows there is much more work to do. This week a survey revealed how poor mental health appears to be the main cause of long-term absences from work. The Times Health Commission survey¹⁹ reveals that two-fifths of the 150 organisations polled had experienced a rise in staff taking long-term sick leave due to poor mental health. In addition, two-thirds of employers had seen an increase in the uptake of counselling services since the pandemic.

3.19 Moving forward, the next stage in CAL improvement planning and volunteer recruitment needs to be mindful of the specific needs of volunteers around health and wellbeing. *“Organisations need wellbeing strategies that are equitable and inclusive of diverse employees”*²⁰ So, for example, if CAL are encouraging people to bring their whole selves to work they need to continue to cultivate an environment that’s safe for them to do so. Simple actions to pilot may include:

- Establish and fund volunteer and staff resource groups so people with shared identities can safely discuss solutions for workplace issues they’re facing.
- Normalise non-dominant cultures and the needs of marginalised people. For example, explore with volunteers and staff whether they are comfortable sharing their pronouns when they introduce themselves.
- Increase representation of marginalised people in the workplace and volunteering ‘pool’, so people with those identities feel more comfortable bringing their whole selves to work.

3.20 The improvement ideas put forward by volunteers and summarised in section 2 of this report need careful consideration by CAL managers, and it is important that volunteers remain involved in next steps – helping in engagement exercises and to action change where possible. Many of the improvement ideas revolve once again around simple improvements to training.

The prevailing theme emerging from this years study is flexibility – and that appears to reflect a drive by CAL to make sure the organisation is not only listening but also putting into practice flexible working processes that cater for volunteer need and can ‘flex’ around other demands on a volunteer’s time

¹⁹ March 2023 article – access here <https://www.thetimes.co.uk/article/8a7962d2-c1cf-11ed-8e20-0f5794810aad?shareToken=bb45d69e8920ffe4cbffd3b5a35d4830>

²⁰ Maese, E., & Lloyd, C. (2022, February 21). It’s Time to Synchronize Your DEI and Wellbeing Strategies. Gallup. <https://www.gallup.com/workplace/389957/time-synchronize-dei-wellbeing-strategies.aspx>

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NOTE:

The project microsite has all analysis and templates uploaded to it. Access the microsite [here](#)