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As We Help Others, We Cannot Help But Help Ourselves.



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Introduction

The Labour Force Survey revealed that in 2010, 765, 000 individuals in the UK were working in the voluntary sector. Between the years of 2001 and 2010, there was a 40% increase in the voluntary sector's work force, which indicates a huge willingness of the British public to donate their time for unpaid services. Such a large figure raises the question of why people

choose to give up their time for no monetary gain. It is perhaps important to note that during this period, the economic recession had a significant influence on the growth of this particular sector, as many individuals were made redundant and could not find paid employment.

Regardless of this fact, there are also many other motivating factors, six of which Clary and Snyder (1999) outlined in their study. They created the Volunteer Function Inventory and identified six functions that are served when an individual voluntarily gives of their time. These included the person's values and the importance they placed on helping others; the person's desire to understand more about the world or their own strengths; a desire to enhance themselves psychologically or to gain experience that will further their career. Social relationships can be developed and finally, volunteering can be used to reduce undesirable feelings e.g. guilt or anxiety.

Seligman et al. (2000) noted how positive subjective experiences, positive individual traits, and positive institutions can improve the quality of life, even when life's circumstances seem desperate and challenging. If Clary and Snyder's findings are true, then they suggest that the individual volunteering for the sake of someone else can actually stand to benefit greatly from their own kindness and generosity.



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History

The first existing record of the verb “volunteer” dates back to 1755 and was used in the context of those who offered themselves for military service. In this context, it referred to men enlisting in the army of their own accord rather than being conscripted. It was during the Great Awakening that individuals began to notice the plight of others and take steps to reduce their difficulties. In 1844, the first YMCA (Young Men’s Christian Association) was started in London and aimed to help the people living in terrible conditions during the Industrial Revolution (YMCA England; 2013).



In 1865, the Salvation Army was founded by William Booth to care for those living in poverty. Many of the poor in society were homeless, and so Booth opened food stores and shelters to provide for their practical needs. The poor were not always accepted by the rest of society because they were not respectable and were often unwashed, so social programmes were developed to help them integrate more easily. In the early years of the organisation, 27 million cheap meals were served, traced 7000 missing people, provided shelter for 11 million homeless people and found employment for 90, 000 people without jobs (The Salvation Army; 2012).

An Old Cultural Connection

Perhaps one of the oldest and best known examples of charity is the parable of The Good Samaritan which can be read in Luke 10: 25-37 (NIV). In this parable, Jesus tells a story of a Jewish man who had been travelling to Jericho when he was attacked by robbers and badly

beaten. While he lay injured at the side of the road, a priest passed by but ignored him and continued on his journey. After this happened, a Levite came along and also passed by without stopping to help. However, when a Samaritan saw the wounded man, he took pity on him, bandaged his injuries and put him on his own donkey. He took him to an inn and paid for him to stay there until he had recovered. The amazing thing about the Samaritan's actions was that there had been extreme hatred between the Jews and Samaritans for over 1000 years, yet this man had behaved more kindly to his enemy than the priest and the Levite who would have been expected to help the Jew. Jesus told this parable to explain that you should act with love and kindness to everyone, regardless of past grievances or disputes.

Key Theories of Volunteering

A fundamental aspect of human nature is helping other people and this aspect is expressed early in life and receives much approval and support from society (Karafantis D, M., & Levy S, R., 2004). Impulsive helping in emergencies was a focus of early psychological research on prosocial behaviour, however that focus has moved towards sustained and planned helping such as volunteering (Finkelstein M, A., & Brannick, M, T., 2007). Many theories of volunteering have been proposed and the majority can be classified into three main types; social theories, individual characteristic theories and resource theories (Einolf, C., & Chambre, S, M., 2011).

Social Theories



Firstly, within social theories external events and environmental factors can have a significant influence on volunteering. The impact of an external event on an individual can influence their participation in volunteering activities for example studies of AIDS volunteers revealed that individuals infected with HIV and family and friends of those who were affected were the earliest volunteers as AIDS had a great impact on their lives (Omoto and Snyder, 2002). Regional factors such as neighbourhoods also have an effect on volunteering as Portney and Berry (1997) revealed that in racially homogenous neighbourhoods more people take part in volunteering activities than in racially heterogeneous neighbourhoods. Volunteering is a social activity and this connection between volunteering and social psychological factors has been approached by the "Social Integration Theory". This theory states that an individual's social contacts and social roles can provide purpose and meaning to their life and also protection from social isolation during difficult time periods (www2.illinois.gov). Research has shown that people involved in many social activities and therefore have many social contacts are more likely to volunteer than those who do not.

Individuals with many social contacts have more opportunity to be asked to volunteer for example by friends who currently volunteer (Wymer WW. 1999). In addition people may also volunteer as it is highly valued by others and may be encouraged to participate due to its value. Volunteering is both a cause and effect of social integration as it also promotes the development of new social relationships (Clary et al., 1998). Volunteering creates a social role that can fill the gap left by loss of other social roles such as retirement from full-time employment and therefore the role identity theory is proposed by Finkelstein M, A, and Brannick, M, T., (2007) as an important factor for the initiation and maintenance of volunteering activities. The role identity theory proposes that the more an individual is associated with a volunteer role by others the more likely they are to continue to volunteer in order to behave consistently with their perceived identity. It is argued that volunteering is not just an activity that an individual takes part in but it is part of who they are.

Individual Characteristics Theories

Another focus of research is the individual differences which distinguish those in the population that volunteer and relate to volunteering behaviour. There are multiple personality traits which predict volunteering and include resilience, extraversion and low levels of neuroticism (Carlo G, Okun MA, Knight GP, et al. 2005). Individual characteristics include traits which are stable across different situations and therefore are important to consider as they can predispose people to volunteer. In addition to personality traits individual characteristics also include motives and values, for example general measure of altruistic values and religious values are both predictors of volunteering (Einolf, 2011). However not all values that predict volunteering are altruistic and many are linked with the psychological or social rewards that arise from volunteering such as learning, personal growth and to aide development in a career. Similar to the role identity theory there appears to be a circular relationship between personal values, motives and volunteering, as volunteering activities can strengthen these prosocial characteristics. Past volunteering experience is one of the strongest predictors of future volunteering as the personality traits and values which initiated participation in volunteering activities are strengthened and therefore encourage future volunteering (Musick and Wilson, 2008).

Resource Theories

Finally, the third category of theories of volunteering is the resource theory which proposes that people who have more resources in terms of time and skills are more likely to volunteer. It is proposed that volunteering is more appealing to those who are resource-rich than those who are resource poor (Musick and Wilson, 2008). However, not all empirical evidence supports this theory for example a clearly significant positive relationship between amount of free time and volunteering does not appear to exist. Research has shown that people in employment or with children are more likely to take part in volunteering activities than people that are unemployed, even though jobs and taking care of children requires high amounts of free time (Sundeen et al., 2007). However, among the population of people who actively volunteer, the number of hours working in paid employment correlates with the numbers of hours volunteered and therefore people who work part-time tend to dedicate more hours to volunteering (Musick and Wilson, 2008).

Physical Health

From the theories discussed it seems that volunteering might have some positive effects, in this section will look at the research looking into the effects of volunteering on physical health and mortality. In a cross cultural study examining data from 139 countries Kumar et al. (2012) found that volunteering was linked with higher self reported levels of physical health, and that these links were consistent across countries and unrelated to personal or national wealth. Although self-report measures were used, this large study strongly suggests that there is a connection of some sort between volunteering and measures of physical health. Piliavin (2007) again found positive effects of volunteering linked to physical health; they further conclude that both the diversity of participation and the consistency of volunteering over time have a significant effect. This suggests that the type of work done and continuing to take part are key factors in the relationship between health and voluntary work. More specific elements have also been examined, for example Okun (2011) found that increased positive outcomes were reported in those with chronic illness who undertook voluntary work, suggesting that resilience and physical health can be impacted by volunteering.

Physical Health in the Elderly

The national Assets and Health Dynamics Among the Oldest survey taken in the United States has given us a valuable insight into how volunteering may effect the physical health of the elderly. Looking at adults over the age of 70 Lum and Lightfoot (2005) found that by the year 2000 those that had volunteered for two hours a week or more during 1993 had lower levels of mortality and less decline in self reported measures of functioning and physical health than those who had not volunteered. Using data from the same source Luoh and Herzog (2002) found that those who had volunteered for two or more hours a week were one third as likely to die and two thirds less likely to report bad health than those who had not volunteered. In a longitudinal study looking at adults over 60, Morrow-Howell (2003) found a positive correlation between better health outcomes and volunteering. Even when controlling for social integration, race and gender those that had taken part in volunteer work showed higher levels of physical health and functioning.

Physical Health from Middle Age

The studies shown above are suggestive of benefits to the elderly from volunteering, however these may be explained by the increased social interaction that volunteering brings. By looking at the effects of volunteering in younger people on their physical health we may

By looking at the effects of volunteering in younger people on their physical health, we may be able to answer the question of causality in the area. Moen et al (1992), undertook a longitudinal study in which female participants were interviewed in 1956 and again in 1986, it was found that the women who had volunteered intermittently between getting married and reaching 55 scored higher in measures of independence ability (using stairs unaided, doing work around the house, visiting friends etc) than those who had not undertaken volunteer work. It was also found that those who had volunteered were more likely to occupy multiple roles in later life, again an indication that their physical health and ability to function without assistance was high. Looking at a longitudinal study with over 6,000 cohorts Pillemer (2010) found that physical activity and health were significantly associated with volunteering from mid-life in environmental organisations. These studies suggest that volunteering does have an impact on physical health, not just in the elderly but throughout adulthood.

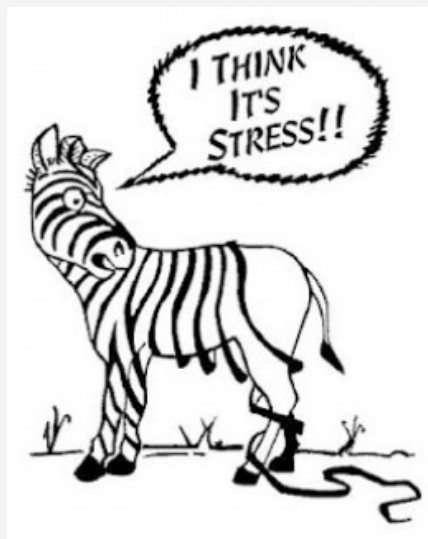
Mortality Rates

Further research in this area has looked at mortality rates in large cohorts in relation to participation in volunteer work. Looking at mortality rates using data from the Longitudinal Study of Aging Sabin et al. (1993) found that when looking at people 70 years or older, if they had volunteered in 1984 in the first phase of the study they were less likely to have died by the second phase in 1988 than those who had not volunteered. In a study by Rogers in 1996 looking at data from the National Health Interview Survey in 1983 and 1991, it was found that of those still alive in 1991 21.5% had volunteered, whereas this figure was only 12% in those who had died in that time period. Again these results suggest that volunteering is related to mortality rates. With increased levels of health care and reduced mortality across the world our population is ageing, the studies discussed here provide strong evidence that partaking in voluntary work may have a relationship with good physical health and reduced mortality. This suggests that programmes encouraging older people to volunteer would have social and health benefits, which could in turn reduce the impact on health services by the elderly.

Psychological Benefits to Volunteering

Volunteering and Stress Reduction

As discussed, the social integration theory proposes that the social networks gained through volunteering create numerous positive health benefits. These social networks work to buffer the negative impact of stress in everyday life, significantly benefiting the volunteer's mental health. House (1988) showed that an increase in the number of social ties a person has is directly related to an increase in positive mental health. Luks (1991) conducted a large-scale study using over 3000 volunteers of all ages. He found that over 90% of volunteers that responded reported that regular volunteering produced emotions that lowered their stress levels. However, it is possible that volunteering in certain environments would have a detrimental effect to the volunteer's stress levels. Madalon (1984) noted that within hospice care, 43% of volunteers dropped out between 4-11 months after starting. Volunteering within a hospice is highly stressful, with volunteers often witnessing death and large amounts of suffering. It is likely that a high number of these drop-outs could be attributed to the stress experienced.



Volunteering and Self-Perception

Often volunteering changes the volunteer's self-perception of themselves. Herzog (1998) found that in adults over the age of 65, a positive change in mental health occurs when volunteering and this is mediated by the personal sense of accomplishment that they felt through their volunteer activities. In addition, Greenfield and Marks (2004) found that volunteering especially helped older adults who had recently lost a major role identity, for example, those who had retired and lost their role identity as a wage-earner. Volunteering seems to provide these individuals with an alternative sense of purpose. Clark (2003) found that 81% of respondents to the survey felt that volunteering had a positive effect on their mental well-being, a main reason cited for this was that 'volunteering gives me a sense of purpose and achievement'.

Volunteering and Life Satisfaction

Harlow and Cantor (1996) found that older adults who volunteered within the community had higher life satisfaction than those older adults who continued to work for a salary. Bower and Greene (1995) assigned 32 elderly adults, all living in long-term care, to three activity groups. The first group, altruistic activity, emphasized helping others. The second group, non-altruistic activity, emphasized regular structured activity. Finally, the third group, conversation with no activity, emphasized socialization. Each of the activities had positive effects on the subjective life-satisfaction of the individuals. Caldwell (2001) noted that 'Participation in a volunteer activity has the potential to provide what each of these three groups offered collectively. It is reasonable to suggest, from this study that volunteering would have a significant impact upon an individual's overall satisfaction with life' Although, most research has been done on the mental well-being of older adults, Van Willigen (2000) found that generally, those who volunteer report higher life satisfaction than do non-volunteers.

Volunteering and Depression

Wilson and Musick (1999) analysed the American's changing lives data set and found a significant relationship between levels of volunteering and lower levels of depression for individuals over the age of 65. This was found even when other forms of social interaction were controlled for. However, no significant effect was found for individuals under the age of 65. This study was statistically rigorous yet relied on secondary sources for analysis. It has been suggested that by volunteering, individuals believe they can make a difference and therefore feel a higher sense of control over their lives and the environment. A sense of control greatly alleviates the likelihood of the onset of depression (Ross, 1989).

How does volunteering affect existing mental health conditions?

Wilson and Musick (1999) suggested that mental health can be improved through using spare time productively. As a result, it is expected that those who have existing mental health conditions could benefit from becoming a volunteer. Woodside and Luis (1997) conducted

interviews with four individuals suffering from schizophrenia and found that they all reported higher levels of self-esteem after having tried supported volunteering. This is a positive conclusion, yet it is drawn from an extremely small sample. Arnstein et al (2002) followed seven individuals who had experienced treatment for chronic pain and subsequently volunteered to help others in chronic pain. All of the individuals were found to have experienced depression at some point, volunteering for 6 months led to a significant decrease in the depressive symptoms. Again, researchers used a small sample, but the measures used were robust, with interviews being used to explain the quantitative findings. As discussed, volunteers highlighted that having a sense of purpose was of great value to them in their fight against depression. The majority of research focuses on volunteering with depression or schizophrenia. The literature vastly ignores other psychological conditions, such as learning disabilities.

Effects of Age

Volunteering has been shown to have positive benefits, not only for those who are being helped directly by the volunteer but there are also physical and psychological benefits for the volunteers themselves. However, not all volunteers seem to share the same benefits.

Research shows that the effects of volunteering may be influenced by age with older volunteers gaining more positive benefits from volunteering than their younger counterparts.

Older volunteers (65+) were more likely than the younger group to see a reduction in depression and an increase in life satisfaction (Musick & Wilson, 2003). Furthermore, older adults who volunteer do so for more hours than their younger counterparts and also report higher levels of well-being (Morrow-Howell, 2003). However, volunteering can have a positive effect on young people too. A study by Moore and Allen (1996) showed that volunteer service programmes can help reduce rates of course failures, school suspensions and dropouts from school, as well as improved self-concept and attitudes towards society.

These studies (Musick & Wilson, 2003; Wilson & Musick, 1999) also discussed the reasons for older people gaining more from volunteering and pointed towards why people choose to volunteer. For older people volunteering may take on more importance because their other roles have become diminished. Furthermore, older people are more likely to work voluntarily for religious reasons and it has been shown that volunteering for religious as opposed to secular reasons provides more benefits. It may be that intrinsic rewards are more effective at relieving depression as reasons for volunteering reported by younger individuals tend to be extrinsic and relate to a desire to gain experience or skills which will enhance a CV and look good to potential employers.

Implications for the Volunteer's Career

It is believed by many that volunteering can act as a stepping stone into employment. It is also believed that volunteering may also help those already employed to get ahead by making new business contacts that will benefit their career. However, there is little evidence that supports this idea (Musick & Wilson, 2003).

The number of volunteering opportunities a person is involved in is correlated to the number of social contacts they have (Wuthnow, 1998) and with number and quality of social contacts hypothesised to relate to an individual's ability to gain information about possible jobs (Granovetter, 1973) we can see how volunteering can lead to improvements in a person's career opportunities.

Advice from employers for improving CV's and employability is often to gain experience through volunteering (e.g. [this article in the guardian](#)). This advice is often unsupported by

empirical evidence. However, a recent study and report by the Institute for Employment Studies shows that volunteering can have a positive effect on skills, attributes and experience that will lead to greater job opportunities (EIS, 2011). Although not a physical or mental benefit for the volunteer, this shows that the benefits of volunteering are wide ranging and can also have a positive effect on the career opportunities of the volunteer.



How to Get Involved

So all this talk about doing good, how about getting involved! Here are a few ideas to get you started, but there are loads of organisations who could use a helping hand!

- <http://www.volunteerscotland.org.uk/>
- <http://www.autism.org.uk/get-involved/volunteer.aspx>
- <http://www.src.gla.ac.uk/volunteer/>
- http://scotland.shelter.org.uk/get_involved
- <http://www.volunteerglasgow.org/>

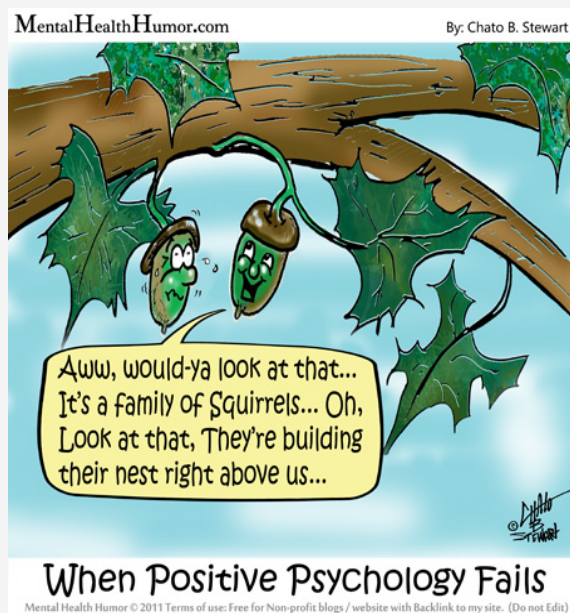
Problems with the Research

A large portion of research highlighted above uses case studies. As a result, we cannot generalise these findings to larger populations. In addition, they lack rigorous statistics to draw conclusions from. The use of self-reported data is greatly criticised. It is suggested that only those who are happy in a volunteer setting would respond to a questionnaire regarding volunteering. In addition, if volunteering did not have a positive effect on an individual, the individual is likely to quit and therefore not be included in the sample.

Depoy et al (1989) studied the benefits of altruistic therapeutic intervention on a sample of clinically depressed individuals. The standardised assessments showed no significant difference between altruistic and non-altruistic activity, yet observational data showed that those individuals in the altruistic group gained more from their therapy than those in the non-altruistic group. This shows the importance of not using alternative measures.

Does volunteering make people healthier, or are healthier people more likely to volunteer? Many studies do not report on the cause and effect of this relationship. However, Wilson and

Musick (1999) conducted a statistical analysis which was able to show that well-being is a result of volunteering. However, they added that the statistics may not show the whole picture and concluded that it is likely that 'volunteering keeps healthy volunteers healthy'. Alternatively, It is possible that any benefit witnessed from volunteering may simply be a placebo effect due to a highly held belief that volunteering is good for you.



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The Benefits of Volunteering

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Theories of Volunteering

A fundamental aspect of human nature is helping other people and this aspect is expressed early in life and receives much approval and support from society (Karafantis D, M., & Levy S, R., 2004). Impulsive helping in emergencies was a focus of early psychological research on prosocial behaviour, however that focus has moved towards sustained and planned helping such as volunteering (Finkelstein M, A., & Brannick, M, T., 2007). Many theories of volunteering have been proposed and the majority can be classified into three main types; social theories, individual characteristic theories and resource theories (Einolf, C., & Chambre, S, M., 2011).

Firstly, within social theories external events and environmental factors can have a significant influence on volunteering. The impact of an external event on an individual can influence their participation in volunteering activities for example studies of AIDS volunteers revealed that individuals infected with HIV and family and friends of those who were affected were the earliest volunteers as AIDS had a great impact on their lives (Omoto and Snyder, 2002). Regional factors such as neighbourhoods also have an effect on volunteering as Portney and Berry (1997) revealed that in racially homogenous neighbourhoods more people take part in volunteering activities than in racially heterogeneous neighbourhoods.

Volunteering is a social activity and this connection between volunteering and social psychological factors has been approached by the "Social Integration Theory". This theory states that an individual's social contacts and social roles can provide purpose and meaning to their life and also protection from social isolation during difficult time periods (www2.illinois.gov). Research has shown that people involved in many social activities and therefore have many social contacts are more likely to volunteer than those who do not. Individuals with many social contacts have more opportunity to be asked to volunteer for example by friends who currently volunteer (Wymer WW. 1999). In addition people may also volunteer as it is highly valued by others and may be encouraged to participate due to its value. Volunteering is both a cause and effect of social integration as it also promotes the development of new social relationships (Clary et al., 1998). Volunteering creates a social role that can fill the gap left by loss of other social roles such as retirement from full-time employment and therefore the role identity theory is proposed by Finkelstein M, A, and Brannick, M, T., (2007) as an important factor for the initiation and maintenance of volunteering activities. The role identity theory proposes that the more an individual is associated with a volunteer role by others the more likely they are to continue to volunteer in order to behave consistently with their perceived identity. It is argued that volunteering is not just an activity that an individual takes part in but it is part of who they are.

Another focus of research is the individual differences which distinguish those in the population that volunteer and relate to volunteering behaviour. There are multiple personality traits which predict volunteering and include resilience, extraversion and low levels of neuroticism (Carlo G, Okun MA, Knight GP, et al. 2005). Individual characteristics include traits which are stable across different situations and therefore are important to consider as they can predispose people to volunteer. In addition to personality traits individual characteristics also include motives and values, for example general measure of altruistic values and religious values are both predictors of volunteering (Einolf, 2011). However not all values that predict volunteering are altruistic and many are linked with the psychological or social rewards that arise from volunteering such as learning, personal growth and to aide development in a career. Similar to the role identity theory there appears to be a circular relationship between personal values, motives and volunteering, as volunteering activities can strengthen these prosocial characteristics. Past volunteering experience is one of the strongest predictors of future volunteering as the personality traits and values which initiated participation in volunteering activities are strengthened and therefore encourage future volunteering (Musick and Wilson, 2008).

Finally, the third category of theories of volunteering is the resource theory which proposes that people who have more resources in terms of time and skills are more likely to volunteer. It is proposed that volunteering is more appealing to those who are resource-rich than those who are resource poor (Musick and Wilson, 2008). However, not all empirical evidence supports this theory for example a clearly significant positive relationship between amount of

supports this theory for example a clearly significant positive relationship between amount of free time and volunteering does not appear to exist. Research has shown that people in employment or with children are more likely to take part in volunteering activities than people that are unemployed, even though jobs and taking care of children requires high amounts of free time (Sundeen et al., 2007). However, among the population of people who actively volunteer, the number of hours working in paid employment correlates with the numbers of hours volunteered and therefore people who work part-time tend to dedicate more hours to volunteering (Musick and Wilson, 2008).

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Physical Health – Volunteering

Some sort of introduction... we can see from the previous research discussed that mental health can be positively affected by undertaking in voluntary work, in this section will look at the effects of volunteering on physical health and mortality.

Moen 1992,

Undertook a longitudinal study in which female participants were interviewed in 1956 and again in 1986, it was found that the women who had volunteered intermittently between getting married and reaching 55 scored higher in measures of independence ability (using stairs unaided, doing work around the house, visiting friends etc) than those who had not undertaken volunteer work. It was also found that those who had volunteered were more likely to occupy multiple roles in later life, again an indication that their physical health and ability to function without assistance was high.

Assets and Health Dynamics Among the Oldest Study,

Looking at adults over the age of 70 Lum and Lightfoot found that by the year 2000 those that had volunteered for two hours a week or more during 1993 had lower levels of mortality

that had volunteered for two hours a week or more during 1998 had lower levels of mortality and less decline in self reported measures of functioning and physical health than those who had not volunteered.

Using data from the same source Luoh and Herzog found that those who had volunteered for two or more hours a week were one third as likely to die and two thirds less likely to report bad health than those who had not volunteered.

Morrow-Howell 2003,

In a longitudinal study looking at adults over 60 a positive correlation was found between better health outcomes and volunteering. Even when controlling for social integration, race and gender those that had taken part in volunteer work showed higher levels of physical health and functioning.

Pillemer 2010,

Looking at a longitudinal study with over 6,000 cohorts it was found that physical activity and health were significantly associated with volunteering from mid-life in environmental organisations.

Sabin 1993,

Looking at mortality rates using data from the Longitudinal Study of Aging the researchers found that when looking at people 70 years or older, if they had volunteered in 1984 in the first phase of the study they were less likely to have died by the second phase in 1988 than those who had not volunteered.

Piliavin 2007,

This study again found positive effects of volunteering linked to physical health; they further conclude that both the diversity of participation and the consistency of volunteering over time have a significant effect. This suggests that the type of work done and continuing to take part are key factors in the relationship between health and voluntary work.

Rogers 1996,

Looking at data from the National Health Interview Survey in 1983 and 1991 it was found that of those still alive in 1991 21.5% had volunteered, whereas this figure was only 12% in those who had died in that time period. Again these results suggest that volunteering is related to mortality rates.

Kumar 2012,

In a cross cultural study examining data from 139 countries it was found that volunteering was linked with higher self reported levels of physical health, and that these links were consistent across countries and unrelated to personal or national wealth.

Okun 2011,

In this study increased positive outcomes were found in those with chronic illness who undertook voluntary work, suggesting that resilience and physical health can be impacted by volunteering.

With increased levels of health care and reduced mortality across the world our population is ageing, the studies discussed here provide strong evidence that partaking in voluntary work may have a relationship with good physical health and reduced mortality. This suggests that programmes encouraging older people to volunteer would have social and health benefits, which could in turn reduce the impact on health services by the elderly.



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