

Volunteers Are Not All The Same: Heterogeneity in the Voluntary Sector

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Prepared for presentation at the 31st ARNOVA Annual Conference, Montréal, Québec,
November 14-16, 2002.

Introduction

Sorting processes are ubiquitous in human affairs; certain kinds of people are more likely to select certain fields of work than others, or to live in certain kinds of neighbourhoods, to engage in certain types of activities or have affiliations with particular kinds of organizations. One of the broad purposes of social science is to map and understand sorting processes in diverse domains. The field of voluntary action is one where there has been little consideration of key sorting processes and there is not yet a robust answer to the question, are certain kinds of individuals (i.e., those having distinctive combinations of traits) more likely to volunteer for particular types of voluntary organizations than are other kinds of people?

Beyond the descriptive value of understanding how types of individuals are differentially associated with particular types of organizations lies another and perhaps more fundamental issue: is voluntary activity largely of one homogeneous kind or does it comprise a number of inherently different kinds of behaviours and organizations. This has deep analytical and conceptual implications, for if it is found that voluntary activity has a significant level of heterogeneity that is consequential, that fact will constrain the extent and content of generalizations about the voluntary domain. Addressing the heterogeneity question is an imperative step early in the development of any emerging field of knowledge, a step not yet taken in voluntary sector research.

This study undertakes a systematic comparison among four types of volunteering individuals: those who volunteer for health organizations, for culture and recreation organizations, for social and service organizations, and for religious organizations. Two questions directed our inquiry: do volunteers for one kind of organization differ from volunteers for other kinds of organizations, in terms of what traits?*, and what characteristics do volunteers for each type of organization have in common with each other? Answers to these questions will enhance our understanding of the texture of the voluntary sector as a whole, in particular the extent and form of its heterogeneity, and will also provide volunteer

* This report is a more general version adapted from a study of the distinctive traits of health volunteers, undertaken for Health Canada (Reed and Selbee, 2002).

organizations with information about the socio-demographic characteristics associated with volunteers for each organization type, thereby identifying components of the population they currently do not draw volunteers from and enabling them to adapt their recruitment strategies to tap such resources.

This analysis lies on uncharted terrain: there is little reliable knowledge concerning who volunteers for what and why. A review of the literature reveals a number of studies of who volunteers, but they present inconsistent, even contradictory, findings. A systematic picture of who volunteers and why is beginning to emerge but remains far from complete (Reed and Selbee, 2000a, 2000b; Wilson, 2000; Smith, 1994).

This is due in part to the fact that research on who volunteers typically treats all volunteers as a single homogeneous group. As a consequence, it tries to account for a “vast array of disparate activities” with one theoretical perspective (Wilson, 2000: 233; see also Williams and Ortega, 1986:35, and Cnaan and Amroffell, 1994:338). In considerable measure, this is the result of there not being a useful theoretical or practical taxonomy of volunteer activity, which in turn is linked, whether as antecedent or consequence, to both the lack of a compelling theory of volunteer behaviour in general and the absence of empirical probes of the homogeneity/heterogeneity issue.

Some authors have attempted to develop conceptual schemes for classifying the activities and organizations people volunteer for. One of the earliest of these divides organizations into distinct groups according to the function they fulfill for their members. Gordon and Babchuck introduced the distinction between expressive and instrumental organizations in 1959. Expressive organizations enable activities by their members mainly as an end in themselves, while instrumental organizations function as social influence organizations that establish or maintain some condition or change (1959:25). The immediate problem with this classification, as the authors themselves acknowledged, is that the two categories are not mutually exclusive: some organizations fulfill both functions and so constitute a third category, instrumental-expressive organizations (1959:26). This three-fold scheme has appeared recurringly, in the research literature since it first appeared. (See Tomeh,

1973; McPherson and Smith-Lovin, 1986; Palisi and Korn, 1989; and Caputo, 1997, for discussion and application of this classification.)

Over the years since, various related classifications have been proposed. Smith (1997: 273-274) makes a distinction between mutual benefit organizations, where members are the primary beneficiaries of their voluntary activity, and organizations where the beneficiaries lie outside the membership. This is linked to his discussion of association volunteers, who work to maintain an organization, and program volunteers, who work for the external clients of an organization. Janoski and Wilson (1995: 272) distinguish between self-oriented associations (professional and union groups) and community-oriented associations (community volunteers, church groups, etc.). And as their application of this distinction shows, a different theoretical model is required to adequately explain each type of volunteer activity (1995:289-290).

Another axis of differentiation in volunteer activities that is found in research in this area is the difference between volunteering for secular or religious organizations. This distinction typically appears in ad hoc fashion, as when an analysis attempts to understand the role of religious affiliation and religious beliefs in the motivation to volunteer (see Cnaan et. al., 1993; Musick et. al., 2000). The usual approach here is to examine how the individual's religious beliefs and practices, such as religiosity or church attendance, affect the probability of volunteering for religious organizations as compared to secular organizations.

There is another approach to the issue of heterogeneity in volunteer activities that begins without an explicit theoretical classification of activities or organizations, but instead simply uses the types of groupings of organizations that are typically found in survey data and looks for differences between volunteers for the various types of organizations. In such cases, the argument is made that various types of organizations reflect important if not well-defined dimensions of differentiation between volunteers in terms of their personal characteristics, values and motivations. In one of the few studies that were specifically designed to address the question of multidimensionality in volunteer activities, Williams and Ortega (1986) followed this strategy. Others have looked at the factors associated with joining a specific type (or subset of types) of organization (Cnaan et. al., 1993, Rotolo, 2000) or have compared those who join

a particular type of organization with all other types of organizations (Berger, 1991).

Inter alia, these attempts to differentiate the types of activities and organizations in which volunteers take part have theoretical value and merit further refinement. One significant difficulty in trying to apply any of these classifications is that the level of detail about what volunteers actually do for various organizations is generally insufficient to make a clear and accurate assignment to different categories of these classifications. The attempt is worth the effort nonetheless if it increases our knowledge about differences among types of volunteers and how these are connected to differences among types of organizations. To this end, our research here examines the traits of volunteers in several types of organizations that can be differentiated along two dimensions, one that follows the distinction between religious and secular organizations, and another axis of classification that is similar to the expressive-instrumental and the mutual benefit/program volunteer distinctions. However, our classification also draws the distinction, implicitly, between whether the service or product provided is an amenity or fills a basic human need, rather than between members versus clients as beneficiaries of the activity. For example, organizations in the fields of culture, arts and recreation typically provide amenities. These may enhance the overall quality of life for a few or many individuals in a society, but it can be argued that given a set of normative and political standards, they are not essential and they are substitutable; in theory, other activities or products could fill the same role in society. If a symphony orchestra or snowmobile club or peewee soccer league ceases to exist, no one would be fundamentally disadvantaged; there are other activities, many not dependent on volunteer inputs, which could provide the same general type of benefit. The fulfillment of human needs, however, is generally not substitutable. Food, clothing, shelter, health care and education are needs that cannot be met by other than these specific services. This said, however, we acknowledge that there is a wide gray line between the “pure” types of amenity- and need-oriented organizations and that making the distinction in operational circumstances is quite imperfect, much in the same fashion as Weberian “ideal types” are not easily operationalized.

The distinction between amenities and need is evidently not the same as the distinction between mutual benefit and program volunteering. In particular, program volunteering that

serves a clientele is not identical to fulfilling needs. It may simply be providing an amenity. Many recreation organizations with paid organizational staff depend on volunteers in the delivery of their service. In contrast, some mutual-benefit organizations expend much effort providing for specific needs in their communities. Self-help health groups and low-income housing cooperatives would fall in this category.

The distinctions between amenity and need, and between secular and religious activities, are but two of numerous possible dimensions of differentiation in volunteer activities. These may not be discrete categories in clear binary sets; each may represent one defining pole of a continuum along which volunteer activities can be located. The distinction between activities providing for amenities and those providing for needs is almost certainly a matter of degree, not absolute difference. Assigning organization types to either pole of any of these dimensions rests on a belief that the large proportion of activities in question are of that particular type. The extent to which these dimensions are consistent with observable differences in the traits, values, and motives of volunteers will lend credence to the claim that they are consequential in some way.

Research on Heterogeneity in the Voluntary Sector

We noted earlier the prevalent but implicit presumption in the field that volunteers are a homogeneous group; this is related to there being little reliable knowledge of how people who volunteer for various organizational types differ, whether from each other or from non-volunteering individuals.

Where organization type is part of the analysis, often the focus of research is on the dynamics of joining voluntary associations rather than on actually doing volunteer work for such organizations. But since members of an organization are often the pool from which volunteers are drawn, research on differential joining can provide useful clues to the factors that might differentiate those who volunteer for different types of organizations.

Overall, the evidence is not comprehensive in terms of the possible correlates that have

actually been examined and the results are equivocal at best. Gender provides a prime example. Early research typically found evidence that women have a higher probability of volunteering for expressive organizations, while men have a higher incidence of volunteering for instrumental organizations (Babchuk and Booth, 1969). Yet more recent evidence does not support this contention. Williams and Ortega found no difference between men and women in joining recreation (expressive) and civic/political (instrumental) associations (1986:39, Table 1). Palisi and Korn found that women do indeed join expressive organizations more than men, but do not find support for the corollary — women are as likely to join instrumental organizations as are men (1987:187, Table 2). As McPherson and Smith-Lovin point out, as women enter the labour force and traditional gender roles become less distinct, the dichotomy may become less significant (1986:62).

Age is another factor associated with volunteering for some types of organizations and less or not at all for others. In particular, participation in church, fraternal/service club and civic/political organizations increases with age, while participation in recreational or job-related organizations, does not (Williams and Ortega, 1986:38). Others find that in general, participation increases with age for expressive organizations but is not associated with participation in instrumental organizations (Palisi and Korn, 1989:187). Having children living at home increases participation in child- and youth-related volunteer groups but not in church or job-related groups (Rotolo, 2000:1148). In broader terms, Janoski and Wilson found that human capital factors (education, income, parental SES) predicted participation in job-related organizations while family socialization factors (volunteering by respondent's parents respondent's youth activities) predicted participation in community-oriented organizations (1995:289). Taken together, these findings do not produce clear evidence for the utility of the expressive-instrumental dichotomy, but it may be the inadequacy of the broad organizational groups for operationalizing this distinction that is the cause.

The evidence for the secular-religious distinction is not much more consistent. Factors such as being married and having children in the household have been shown to increase participation in religious organizations (Rotolo, 2000:1148). And not unexpectedly, factors associated with religious commitment have a positive effect on volunteering for religious but

not for secular organizations. Religiosity increases participation in church-related but not in secular human service organizations (Cnaan, et al., 1993:47). However, religious commitment can also have a negative effect on some types of volunteering. High levels of church attendance can actually displace participation in secular organizations by maximizing participation in religious or mixed religious-secular organizations (Musick *et. al.*, 2000:1559).

To date, then, research on the importance of the context in which individuals volunteer is far from conclusive. It does suggest nonetheless that our understanding of who volunteers and why would be improved by a consideration of the types of organizations in which individuals of what kinds participate.

Data and Analysis Strategy

Our analysis uses data from the Statistics Canada 2000 National Survey of Giving, Volunteering and Participating (NSGVP). The data file consisted of completed cases from 14,724 respondents, containing 44 variables that are listed in the Appendix. The dependent variable throughout is formal volunteering defined as unpaid work performed for a formal nonprofit organization. In the 2000 NSGVP, 26.7% of respondents reported having done formal volunteering during the preceding twelve months.

The first task was to determine the procedure for identifying individuals who volunteered for each of the four types of organizations selected for examination: health, culture and recreation, social services, and religion. We used the two-digit level of the International Classification of Non-Profit Organizations (ICNPO) developed at Johns Hopkins University. This classification scheme assigns nonprofit organizations to twelve broad groups on the basis of each organization's principal activity or field of work (Salamon and Anheier, 1996). Assignment of volunteers' organizations in the National Survey of Giving, Volunteering, and Participating to this classification was made by a panel of experts associated with the survey at Statistics Canada.

All organizations cited by NSGVP respondents were distributed among the 12

categories shown in Table 1. Some organization types which contained too few cases to be statistically usable, such as environment, were eliminated from the analysis. Several other classes of organization were eliminated (e.g., business and professional associations and unions) because the nature of their principal activity or purpose was difficult to compare with the major ones.

Table 1: Distribution Across ICNPO Categories of Organizations Volunteered For¹

ICNPO Category	Number of Organization Reported	Percent of Organizations Reported
Culture and recreation	1420	23.2
Education and Research	800	13.1
Health	768	12.5
Social Services	1200	19.6
Environment	170	2.8
Development and Housing	303	5.0
Law, Advocacy, and Politics	198	3.2
Philanthropic Intermediaries and Volunteer Promotion	136	2.2
International	52	0.9
Religion	872	14.2
Business and Professional Associations, and Unions	139	2.3
Not Elsewhere Classified	66	1.1
Total Organizations Volunteered For	6124	100

1. Because each respondent could report affiliation with up to three organizations, any or all of which could fall in the same ICNPO category, this table displays the distribution of organizations reported on, not the distribution of respondents across the organizations they volunteered for. The total number of volunteers in the sample is 3,633, while the total number of organizations they reported volunteering for is 6,124.

By elimination, we ended up with the four categories of health, culture and recreation, social services, and religion. A partial list of the types or organizations in each group is given in Table 2. For the first three major categories, the types of organizations they encompass are straightforward. Health organizations include those associated with hospitals

Table 2: Examples of Organizations, in Four Categories of the ICNPO Classification, Used in this Analysis.

ICNPO Major Group			
Health	Culture and Recreation	Social Services	Religion
Arthritis Society	Minor sports	Big Brothers/Sisters	Church
Cancer Society	Kinsmen club	Scouts/Guides	Mosque
Heart Foundation	Knights of Columbus	Meals on Wheels	Temple
Kidney Foundation	Lions club	Red Cross	
St John's Ambulance	Optimists	Salvation Army	

and rehabilitation, nursing homes, mental health and crisis intervention, and other services such as public health and emergency services. Culture and recreation organizations include those that foster and support culture and the arts, sports, and recreation and social clubs. Social service organizations are those involved with child, youth and family services, services for the unemployed, the handicapped and the elderly, emergency and relief services, and income and literacy assistance. The fourth category, religion, covers associations and auxiliaries of religious congregations that promote religious beliefs and administer religious services. This category does not include religion-based organizations whose primary function is to address needs in other fields, such as social services. Thus the Salvation Army and Saint Vincent de Paul Society, for example, are assigned to the social service major group rather than the religion category because their social service activities are dominant and are performed at arm's length from the religious functions or affiliations of those organizations.

The method of assigning organizations to the ICNPO categories leaves some ambiguity as to the activities undertaken by, and therefore the essential nature of, the organizations in each group. Without a complete list of all the organizations assigned to each major group, and in the absence of detail about specific activities undertaken by a respondent's organization, there is less than full certainty as to what the ICNPO groups actually represent in terms of the behaviour of volunteers. In order to minimize that uncertainty while still retaining enough cases to achieve reasonably generalizable results, we restricted our comparison to the above-

mentioned four largest categories of organization. The one large category we excluded from the analysis was that of education and research (13.1%) because it contains considerable and possibly excessive heterogeneity: not only teaching and research, but also volunteer activity under the label ‘schools and school boards’.

The remaining ICNPO categories excluded from the analysis are much smaller proportions of the total set of organizations volunteered for in our sample and were excluded solely because of their small and statistically unusable counts. These include development and housing (5%), law, advocacy and politics (3%), environment (3%), business or professional associations and unions (2%), philanthropic promotion (2%), international organizations (1%), and not classified (1%).

We focused our analysis on the four selected organization types in order to distinguish as clearly as possible between at least three main types of activity — amenity, need and religion. In practice, the distinction is not made so easily, since each volunteer can be involved in multiple organizations (and could report on up to three in the survey). In order to maintain the purity of the four types, we excluded any respondent who had volunteered for more than one of the four organization types, which amounted to 10% of all volunteers. As a result, there is no overlap in the data among the four groups; if a respondent volunteered for one type, then they were not associated with any of the three other types. However, we did allow volunteers in each of the main groups to also be volunteers for any of the other eight excluded groups. This decision reduced the purity of the distinction made between the four main categories but by only a negligible amount. This was confirmed in a sensitivity test, comparing the trait profile of the pure and mixed versions; they were identical. The size of each of the resulting groups is presented in Table 3.

Table 3: Distribution of Respondents Across Organization Types

	Count	Percent of Sample	Percent of Volunteers in the sample	Percent of volunteers in the analysis
Non-Volunteers	10791	73.3		
Volunteers for :				
Health organizations	386	2.6	9.8	15.8
Culture and Recreation organizations	854	5.8	21.7	35.0
Social Service organizations	684	4.6	17.4	28.0
Religious organizations	518	3.5	13.2	21.2
Sub-Total	2442	16.5	62.1	100
A combination of the above, or other organizations ¹	1491	10.1	37.9	
Total	14724	100	100	

1. These cases are excluded from the analysis because they (1) were people who volunteered for a health organization and one or more of culture-recreation, social service, or religion organizations, or (2) were people who did not volunteer for any of these four organization types.

Analysis Strategy

Our analysis was undertaken in four successive steps. Using health volunteers as an arbitrary “anchoring” group to begin the analysis, we first compared health volunteers with all non-volunteers in the sample; in the second stage, health volunteers were compared with volunteers in all three of the non-health groups combined; third, the health volunteer group was compared with each of the culture and recreation, social service, and religious volunteer groups individually. Comparisons were made in pair-wise form for every one of 37 variables in stage 1 and 44 variables in stages 2 and 3. For every comparison, the level of statistical significance of Cramer’s V was used as the basis for determining whether the groups being compared were different; the conventional significance level of 5 percent was used as the threshold for identifying a variable as differentiating the two groups. The fourth step produced, via logistic regressions, profiles of distinctive traits of health volunteers relative to volunteers in the other three categories.* This provided a direct test of whether or not health volunteers are unique in some way. The advantage of the logistic analysis is that the independent variables identified by the procedure as significant are those that are important in distinguishing between the two

* The extreme ratio of health volunteers (N=383) to non-volunteers (N=10,791) prevented performing a reliable logistic analysis for this pairing. The bivariate analysis results suggest that the pattern of differences we found in another study comparing all active volunteers to non-volunteers is relevant for health volunteers as a subgroup (Reed and Selbee, 2000).

groups of volunteers in question. They are a direct measure of how health volunteers differ from (or are the same as) the other types of volunteers.

Analysis Results

A. Health Volunteers Compared with Non-volunteers

Across 37 variables, health volunteers were significantly different on 30 variables. The principal differences can be summarized as follows: health volunteers are more likely than non-volunteers to be, in general descending order of distinctiveness

- a charitable donor, and in the core group (high magnitude) of charitable givers who account for two-thirds of total giving
 - in the core group for civic participation
 - engaged in direct personal helping of others
 - individuals who give money directly to others
 - residents of the Atlantic, Ontario, and Prairie regions
 - in the middle age range (35-64)
 - in households with children aged 6-17 years
 - female
 - from the upper range of annual household income (above \$100K)
 - from higher categories of education and occupational status
 - Protestant
 - more religious and more frequent church attenders
 - of British or Other ethnic background
 - in better (self-reported) health
 - more active voters
 - more satisfied with, and feeling in control of, their lives
 - more involved during their youth in sports, school, and religious groups, and in volunteering
-

In sum, health volunteers are about as different as, and different in much the same ways from, non-volunteers, as volunteers as a whole are different from non-volunteers. Expressed another way, health volunteers are very typical in their differentness from non-volunteers.

B. Health Volunteers Compared with the 3 Other Types Combined

Volunteers associated with health organizations differed from those in culture and recreation, social service, and religious organizations on 15 of 46 variables.

Health volunteers had elevated probabilities of

- being residents of Ontario
- living in cities of 100,000 or larger
- having fewer children age 6-12 in the household
- being female (64% vs. 49%)
- Protestant

and lower probabilities of

- being in the volunteering core
- being religious and attending church frequently.

Their average annual hours volunteered (111.3) figure was markedly below the level for the combined group (150.8), as was their average annual charitable giving (\$286 for health volunteers, vs. \$381). A slightly higher proportion of their charitable giving was secular (75%, vs. 65%).

We can conclude, then, that health volunteers are only moderately different from the 3 other types treated as a whole, i.e., from other volunteers in general.

C(i). Health Volunteers Compared with Culture and Recreation Volunteers

- manifest differences on 19 of 46 variables
- were much more likely to be female
- were less likely to have children at home; to be in the labour force; to live in Quebec or the Prairie region; and to be involved in social and civic participation; and
- were more likely to be Protestant and to attend church more often.

While volunteers for health organizations contributed an annual average of 111 hours, the figure for culture and recreation volunteers was 157 hours.

C(ii). Health Volunteers Compared with Social Service Volunteers

- differed on only 8 of 46 variables
- were more likely to be female and to be married
- were a little more likely to be of British ethnic background
- were a little more likely to be older (younger ages were slightly and relatively more prevalent among culture and recreation volunteers)

Health volunteers, then, differed little and on few variables, from their counterparts in social service organizations.

C(iii). Health Volunteers vs. Religious Organization Volunteers

Significant differences existed for 17 of 46 variables. Health volunteers were more likely to live in large cities, to have smaller families, to be Catholic or classify themselves as having 'no religion', to be Canadian-born and of British ethnic background, to be in the middle age range, and less likely to attend church often and to be in the core group for charitable giving and civic participation.

Health volunteers and religious volunteers did not differ in total annual time volunteered but differed very significantly in their giving behaviour; they contributed one-third the annual amount of religious volunteers (\$286 vs. \$796), with a much greater proportion of it going to secular organizations (75% vs. 40%).

D. Identifying the Distinctive Characteristics of Health Volunteers: From Bivariate to Multivariate Analysis

Contributory behaviours such as volunteering and charitable giving are known to be complex, multi-dimensional phenomena that are not always captured fully and effectively by serial incremental bivariate analysis, even when done in many increments. This prompted us to estimate four logistic regression models to provide a more holistic, multivariate portrait of the distinguishing traits of health volunteers in Canada. As in Section C, health volunteers were examined in four comparisons: with culture-recreation, social services, and religious organization volunteers all combined, and then with each of these three types individually. A summary of the results is presented in Table 4 and we comment here on the content of these four models.

Model 1, a comparison of health volunteers with those in all of the other three types, has a very low level of explained variation (R^2): 5 percent. This indicates the combined group of three types contains substantial heterogeneity and overlaps considerably with the health group's traits. This suggests it is analytically inappropriate to group the three types together because of the considerable heterogeneity among them.

Table 4: Summary of Significant Variables in the Logistic Regression Models¹

Model 1	Model 2	Model 3	Model 4
Health vs. Three Groups	Health vs. Culture-Rec	Health vs. Social Service	Health vs. Religion
<ul style="list-style-type: none"> - Hours volunteered annually + % of giving that is secular - Church attendance Religion (vs. No Religion) + Catholic + Resides in CMA Region (vs. Ontario) + Quebec + Prairies + Female - Canvassed as a youth + Student gov't as a youth 	<ul style="list-style-type: none"> - Hours volunteered annually + Church attendance + Resides in CMA Region (vs. Ontario) - Quebec - Prairies + Female - Canvassed as a youth - Years resident - Children 6-12 + # informal helping types + Total charitable giving (\$) - Civic participation - Social Participation 	<ul style="list-style-type: none"> - Hours volunteered annually Region (vs. Ontario) - Quebec - Canvassed as a youth + Student gov't as a youth Age (vs. 15-24) + 55-64 Family income (vs. 100,00+) + 60-100K 	<ul style="list-style-type: none"> + % of giving that is secular - Church attendance Religion (vs. No Religion) + Catholic - Other - Religious group as a youth - Religiosity
<ul style="list-style-type: none"> χ^2 108.9 df 10 pseudo-R^2 5% 	<ul style="list-style-type: none"> 184.7 13 21% 	<ul style="list-style-type: none"> 53.8 6 7% 	<ul style="list-style-type: none"> 356.4 6 46%

1. Only effects significant at the 0.05 alpha level or better are displayed. Variables preceded by a minus sign have a negative effect on the probability of being a Health volunteer, those preceded by a plus sign have a positive effect.

Model 2, health compared with culture-recreation volunteers, has the largest number of significantly differentiating traits (12) of the three non-health types. In socio-demographic terms, health volunteers are most different from culture and recreation volunteers (relative to social service or religious volunteers). The moderate level of 21 percent of variance explained suggests there are yet more unmeasured dimensions, possibly nonsocio-demographic.

Model 3, health versus social service organization volunteers, contains only 6 significant variables but they do not present a coherent or systematic picture of the differences

and explain only 7% of total variance. This indicates that volunteers in health and social service organizations are not systematically different, at least in their socio-demographic traits. If they differ, it is on other unmeasured factors.

Model 4 contains 5 significant variables and all relate to religion and religiosity. R^2 is a high 46 percent, suggesting that the principal difference between health and religious volunteers arises from the secular/religious aspect of the organizations they work for. For practical purposes, these two types of volunteers are effectively identical on all other characteristics.

Social Dynamics: The How and Why of Being a Volunteer

The sorting processes through which individuals with particular sociodemographic characteristics become linked to particular types of organizations work in part through their effects on the values volunteers hold, the reasons that prompt them to volunteer, and the events through which they actually become a volunteer, such as knowing someone who is already a volunteer. Along with the effects of sociodemographic and life cycle factors, these more immediate aspects of personal experience and events together constitute the social dynamic that underlies involvement in volunteering of one kind or another. In this section we examine how the four organization types compare on the personal experience component of these dynamics. Text commentary is based on figures in Tables 5 and 6. We have reserved analysis of these characteristics of volunteers until now because preliminary statistical analysis revealed that they mask the effects of the sociodemographic variables we have discussed up to this point. The values of volunteers, the specific reasons they volunteer, and the events through which they began as volunteers have stronger direct effects on volunteering than do sociodemographic variables. In many cases, the more diffuse effects of sociodemographic factors are mediated by these intervening variables. This does not mean that sociodemographic traits are less influential, only that part of their effect on volunteering is indirect — it is through their effect on values, reasons and how individuals actually come to be volunteers.

There were three sets of variables in our data that captured aspects of volunteers'

values and reasons; these were how they began volunteering, reasons for being a volunteer and reasons for not volunteering more.

Table 5: How Began Volunteering¹

How began volunteering	Type of Organization			
	Health	Culture-Recreation	Social Services	Religion
	% of respondents who gave each reason ²			
Was asked by the organization	55	42	40	46
Asked by a friend or employer	25	14	23	9
On own initiative	51	36	48	27
Because of my child	8	33	16	8
Member of the organization	9	22	14	46

1. Percentages rounded to nearest whole number.

2. Column percentages do not add to 100% because each respondent could respond for up to three organizations.

The way individuals begin volunteering distinguishes between whether they were asked by someone to be a volunteer or started on their own initiative. As Table 5 shows, health volunteers overall are less likely to begin volunteering because of their children or because they are members of an organization. They show a greater probability of having begun volunteering due to having been asked by either an organization or friends than are the other volunteer types. However, they are substantially more likely to have begun volunteering on their own initiative than are either culture and recreation or religion volunteers.

For the most part, health volunteers give the same reasons for volunteering as do volunteers for culture and recreation, social service, and religious organizations, (Table 6) but there are some intriguing differences. Health volunteers are markedly less likely to give self-oriented reasons for volunteering (‘exploring one’s strengths’ or ‘using one’s skills’) than are the three other types. Along similar lines, they are also less likely to volunteer because their friends do compared with culture and recreation volunteers, and are slightly more likely to volunteer because they have been personally affected than are social service volunteers. And

not surprisingly, they are substantially less likely to volunteer because of religious belief than are religious group volunteers. Again, this further sharpens the secular-religious distinction between health and religion volunteers.

Table 6: Reasons for Being a Volunteer¹

Reason for being a volunteer	Type of Organization			
	Health	Culture-Recreation	Social Services	Religion
	Percent who agree ²			
Personal cause	94	94	95	96
Personally affected	74	70	68 *	72
Friends volunteer	24	35 *	29	27
Job opportunities	21	22	25	15 *
Religious beliefs	15	12	17	73 *
Explore own strengths	50	55	58 *	65 *
Use skills and experience	68	86 *	81 *	81 *
Required by school etc.	9	6 *	9	7

1. * Comparison to Health volunteers is significantly different at alpha= 0.05

2. Percentages rounded to nearest whole number.

Table 7 shows that when asked why they do not volunteer more of their time, health volunteers give the same reasons as do social service and religion volunteers, except that they are more likely to say they have no extra time or that they give money instead of more time, than do social service volunteers. Compared with culture and recreation volunteers, however, health volunteers are more likely to say they have a health problem or that they give money instead of time, and are less likely to say they feel they have already made their contribution, that they fear being sued, or that they simply have no interest in doing more volunteer work. These last three response categories in particular reinforce the conclusion that health volunteers are somewhat more other-oriented, especially in comparison with culture and recreation volunteers.

Table 7: Reasons for Not Volunteering More¹

Reason for not volunteering more	Type of Organization			
	Health	Culture-Recreation	Social Services	Religion
	Percent who agree ²			
Have already made a contribution	28	34 *	25	28
Have no extra time	76	78	68 *	76
Have health problems	18	14 *	16	21
No one asked	18	16	16	15
Don't know how to connect	8	8	10	10
Cost of volunteering	11	13	14	12
Fear being sued	3	8 *	5	5
No interest	13	19 *	13	16
Give money instead	29	22 *	23 *	30
Unwilling to commit	38	33	32	34
Disaffected with prior experience	7	9	7	8

1. * Comparison to Health volunteers is significantly different at alpha= 0.05

2. Percentages rounded to nearest whole number.

We also examined two other aspects of the social dynamics of volunteering that reflect characteristics of the experience itself: the length of time people had been volunteers, and the kinds of tasks or activities they undertook as volunteers. Health volunteers had been involved in volunteering for an average of 4 years, about the same as social service volunteers (4.1 years). This is less than culture and recreation volunteers (5.4 years) but not by a large margin, and is considerably less than religion volunteers (6.7 years). Shorter length of service for health and social service volunteers may be due in part to a higher turnover rate for these types. And since volunteers of these kinds often deal with people in crisis or with serious illness, the higher rate of turnover may indicate an elevated incidence of volunteer burnout.

The tasks volunteers undertake in any organization — fundraising, serving on a board or committee, organizing activities, teaching/coaching, visiting people, driving, doing maintenance, and counseling are examples — will reflect in part the organization's needs and its structure, particularly the distribution of responsibilities between paid staff and volunteer workers. But, it will also reflect the volunteer's abilities and preferences in some measure as

well. Our data do not contain information about why each volunteer performed the specific tasks or functions they did, however. In the overall distribution of tasks, health volunteers did not differ much from other volunteer types. On only four of the fifteen task types do health volunteers consistently stand out from the other types: they are more likely to be involved in fundraising and hospital/nursing home visits, and less likely to be involved in organizing activities or building maintenance.

In all these proximate aspects of the social dynamics of volunteering, health volunteers are different from other kinds of volunteers in some ways and quite similar in others. Health volunteers appear to be less self-oriented in their volunteering and more willing to help on their own initiative, particularly as compared to culture and recreation volunteers. Many are volunteers for shorter periods of time, and different modestly in the tasks they perform as volunteers.

Concluding Discussion

The series of analyses comprising this study proffer answers to the two guiding questions. We now know that health volunteers in Canada differ primarily and significantly from volunteers for culture and recreation organizations (differences on 19 of 46 traits). Health volunteers are relatively less engaged in varied forms of contributory and community activities, are more frequent church attenders, are more likely to be female and not in the labour force, and volunteer only about two-thirds as much time each year. On the other hand, health volunteers differ hardly at all from social service volunteers (differences on only 8 of 46 variables). They are, in sociodemographic terms, essentially the same kind of people. (Health volunteers are a little more likely, in relative terms, to be married, female, older, and of British extraction.) Given the strong similarities between providing health services and providing social services, this naturally makes sense.

Health volunteers also manifested considerable similarity to volunteers for religious organizations, showing no differences on 29 of 46 variables; many of the 17 variables-of-difference pertained to religious characteristics, permitting us to say that by and large, health

volunteers are the secular version of religious organization volunteers, and vice versa. The principal and very clear faultline runs between culture and recreation volunteers on one side and health, social service, and religious organization volunteers on the other. This faultline is easily understood in terms of the presence of a leisure activity aspect in culture and recreation organizations, and the strong element of ideals and principles associated with the health/social service/religious constellation of volunteering. This is evidently a dimension of differentiation that requires deeper probing.

As for the distinctive traits of health volunteers relative to other volunteer types, our logistic regression models uncovered approximately ten, viz., that health volunteers

- contribute about one-third fewer hours annually
- attend church more than culture and recreation volunteers
- are more likely to be Roman Catholic
- live in greater numbers in metropolitan Ontario
- are female
- were less involved in volunteering in their youth than other types
- are in their later middle years (55-64)
- are in high income categories (\$80K+)
- have fewer young children in the household
- are less involved in general civic activities

In sum, health volunteers do stand out from other types but not in sharp relief; they differ mainly from only one of the three comparison groups, and they do not manifest a high-contrast set of shared characteristics.

The analysis has revealed, further, that the voluntary sector can be considered textured or “grainy” in terms of the distribution of volunteer traits; it is neither seamless, nor extremely “lumpy”. Rather than an undifferentiated population of volunteers or discrete, largely mutually different groupings or types of volunteers, the pattern is one of overlapping sets of similarities separated by blocks of differences of varying size, in a patchwork. For some purposes, those

differences are of small importance while for other purposes, they are of signal importance.

It is clear from the patterns we have identified that there are both strongly deterministic, and a mixture of weakly deterministic or random, social processes producing the clusters of similarities and differences. Religious organization volunteers, for example, are very much the product of powerful forces of family background and early life experiences related to religious practice, but very little of life cycle stage (or of numerous other sociodemographic traits), while the reverse of this holds true for the other three volunteer types. And it is early life cycle stage (under age 35) adults who are more involved as culture and recreation volunteers, and later life cycle stage people who are involved as health volunteers, i.e., when the contingencies of family and career have diminished, and perhaps have been or seen others afflicted by health problems.

All of our generalizations are limited to the four categories of volunteer organization this analysis focussed on but could be broadened if there were a larger volume of data pertaining to more purely-defined categories of volunteer organizations such as those for education, environment, housing, law/advocacy/politics, and international service.

Implications for Further Inquiry

This study has illuminated the social sorting processes of volunteer types. It advances our understanding of the axes or dimensions of similarity and difference that run through the voluntary sector. It has revealed that individuals engaged in volunteering are much more similar than different, showing large differences on very few characteristics; heterogeneity takes the form of small differences on many characteristics. One large faultline, however, lies between volunteers in culture and recreation organizations with an inferred orientation to supporting activity and amenity in the community, and volunteers associated with health and social service organizations as well as those associated with religious organizations. This faultline is sufficiently significant, both statistically and conceptually, that it must be taken into account explicitly in future studies of the social dynamics of contributory behaviour.

As well, this study points to expanded inquiry in several directions. One is the social ethos of different types of volunteers: do health volunteers, for example, embrace a set of strongly energizing and influencing values and beliefs (or even just one or two prime values and beliefs) that differ from those of other volunteer types? Another is the need to understand the nature of the social logic or reasoning volunteers of various kinds use when making decisions — to begin volunteering, to continue volunteering, in selecting an organization, and choosing which tasks to perform in that organization — in order to better understand the social sorting processes that lead particular kinds of individuals to be volunteers of particular kinds. This also bears on the link between formal volunteering and direct, personal helping and caring: many health volunteers do both, and there is value in knowing in extended detail how “health-carers” think about the connection between these two modes of contributory behaviour. Each of these directions of inquiry can be pursued best, and perhaps only, via small-sample but high-detail-content studies.

Appendix: Variables in the Analysis

-- Is a high hours volunteer (volunteer core)	
-- Is a high level giver (giving core)	
-- Participates in multiple organizations (civic core)	
-- Total Annual Hours Volunteered	
-- Number of types of informal helping	
-- Gives to Formal Charities	
-- Total Amount Donated to formal charities (\$)	
-- % of Giving that Goes to Secular Organizations	
-- Gives \$ directly to others (informal giving)	
-- Total \$ donated (formal and informal)	
-- Civic participation (number of types of organization participation)	
-- Social participation (frequency of socializing with friends and relatives)	
-- Resides in a CMA	
-- Region (relative to Ontario)	Atlantic Quebec Prairies B.C.
-- Age (relative 15-24)	25-34 35-44 45-54 55-64 65+
-- Children 0-5	
-- Children 6-12	
-- Children 13-17	
-- Marital Status (relative to Married)	Single Separated/Divorced/Widowed
-- Gender (female=1)	
-- Income (relative to 100K +)	0-20K 20-40K 40-60K 60-100K
-- Education in years of schooling	
-- Occupation (relative to Managers)	Professionals White Collar Blue Collar No Occupation
-- Church Attendance, times per year	
-- Religiosity	
-- Religion (relative to No Religion)	Catholic Protestant Other religion

-- Ethnicity (relative to British Background)

Canadian
French
Other religion

-- Immigrant
-- Years resident in the Community
-- Voted in last elections
-- T.V. Hours per week
-- Attention to News
-- Self-reported Health
-- Satisfaction with Life
-- Sense of Control over life

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-- Youth experience: Team Sports
-- Youth experience: Youth Group
-- Youth experience: Volunteering
-- Youth experience: Had a Role Model
-- Youth experience: Canvassing
-- Youth experience: Was Helped by Others
-- Youth experience: Student Government
-- Youth experience: Religious group
-- Youth experience: Parents were volunteers

Reasons for Volunteering

--	Personal cause
--	Personally affected
--	Friends volunteer
--	Job opportunities
--	Religious beliefs
--	Explore own strengths
--	Use skills and experience
--	Required by school, employer or government

Reasons for not volunteering more

--	Have already made a contribution
--	Have no extra time
--	Have health problems
--	No one asked
--	Don't know how to connect
--	Cost of volunteering
--	Fear being sued
--	No interest
--	Give money instead
--	Unwilling to commit
--	Disaffected with prior experience

Tasks done as a volunteer	
--	Fundraising
--	Board or committee work
--	Educate or Influence
--	Organize activities
--	Executive or office work
--	Teach or coach
--	Counseling or visiting
--	Provide care at a hospital or old age home
--	Assist self-help group
--	Collect or deliver food, clothing, etc.
--	building maintenance
--	Driving
--	Protecting the environment or wildlife
--	Other ways
-- Years since became a volunteer	
How became a volunteer	
--	Organization asked
--	Friend or employer asked
--	Own initiative
--	Because own child was involved
--	Was a member of the organization

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