The impact of volunteering on successful ageing: a review with implications for programme design

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This article examines the health effects of volunteering for older adults. It first presents a review of the literature on the positive health effects of volunteering, and investigates the mechanisms through which volunteering affects older people's health. The article then describes nine volunteer programmes for older adults that have achieved a reputation for excellence, as documented by research literature, media accounts and awards received. Based on examination of these initiatives, we analyse successful designs for volunteer programmes for older adults to maximise positive health effects. The article concludes with further recommendations for programme success.

The rapid ageing of American society has stimulated great interest in the question of how to ‘age better’. Increasingly, people do not look only at the quantity of life, but have also become concerned with the quality of later life. With this growing interest, an important component of recent research in gerontology has become an emphasis on the positive aspects of ageing, with the result that terms such as ‘robust ageing’, ‘productive ageing’ and ‘successful ageing’ have become commonplace (Rowe, 2005). Among them, the term ‘successful ageing’ has gained especially wide popularity, after its first appearance in the inaugural issue of the journal The Gerontologist (Motta et al, 2005). Common definitions of successful ageing include three aspects: (1) low risk of disease and disease-related disability; (2) maintenance of high physical and mental function; and (3) active engagement with life.

The first and second dimensions of successful ageing have progressed with the development of medical and clinical research. Compared to these, however, the third dimension of successful ageing – active engagement with life – has been largely neglected. Rowe (2006) emphasises the importance for successful ageing of building
the social capital of older people. The imbalance among the three dimensions of successful ageing calls for more attention to various methods of involving older adults in productive activities and to the benefits that they can derive from active engagement.

This article begins by providing a comprehensive review of the literature on the positive health effects of volunteering, and investigates the mechanisms through which volunteering affects older people’s health. It then describes nine volunteer programmes for older adults that have achieved a reputation for excellence. Based on examination of these programmes, we analyse successful designs for volunteering programmes for older adults to maximise positive health effects. We conclude with further recommendations to achieve this purpose.

Volunteering and health effects

Researchers have been interested in the processes or mechanisms by which volunteering affects older people’s physical and psychological health. The Alzheimer’s Association identifies four major components of staying healthy later in life: physical activity, mental stimulation, social connectedness and a healthful diet (Brandon, 2006). A review of the literature suggests that volunteering can influence the health status of older adults through affecting the first three components of a healthy lifestyle.

Physical activities

The first and most straightforward mechanism through which volunteering can have this effect is via physical activities. Volunteering can offer opportunities to be active, for example by lifting and walking, and these activities provide exercise opportunities that older adults may not have, at least not regularly. For example, Crowe et al (2003) found that participation in a greater overall number of leisure activities represented a significant protective factor for all dementias combined as well as for Alzheimer’s disease. Everard et al (2000) reported that maintenance of instrumental, social and high-demand leisure activities improve the physical health of older adults. In a study of the Legacy Corps volunteers comprising the fifty-plus population, Harlow-Rosentraub et al (2006) reported a significant improvement in self-reported health status.

However, the conclusion that physical activities have positive effects on health may apply just as well to other types of activity that involve physical effort. If the impacts of volunteering are solely based on its physical aspects, other activities may well substitute. However, researchers agree that the health effects of volunteering extend beyond the purely physical aspects (Crowe et al, 2003; Everard et al, 2000).

Personal resources

This mechanism suggests that older adults may experience increased self-esteem and self-efficacy through volunteering – resources which continue to provide them with a sense of fulfilling a productive role with ageing. According to role theory, engagement in a productive role such as being a volunteer results in role enhancement (Lum and Lightfoot, 2005), which further increases the sense of meaningfulness and fulfilment. Table 1 enumerates the relevant studies supporting this conclusion.
### Table 1: Intervening process – personal resources

<table>
<thead>
<tr>
<th>Research</th>
<th>Measures</th>
<th>Findings</th>
</tr>
</thead>
<tbody>
<tr>
<td>Barlow and Hainsworth (2001)</td>
<td>• Self-reported health</td>
<td>Volunteering not only increased sense of purpose, but volunteers also reported less pain and reduction in depression.</td>
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<tr>
<td>Stevens-Ratchford (2005)</td>
<td>• Self-worth and self-efficacy</td>
<td>Successful completion of the various developmental tasks is the essence of successful ageing in that it validates self-worth and self-efficacy.</td>
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<tr>
<td>Greenfield et al (2004)</td>
<td>• Role loss</td>
<td>Volunteering predicts increased positive affect and increased sense of purpose in life.</td>
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<tr>
<td></td>
<td>• Multiple roles</td>
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<tr>
<td></td>
<td>• Well-being (hedonic and eudemonic concept of well-being)</td>
<td></td>
</tr>
<tr>
<td>Okomoto (2004)</td>
<td>• Self-rated health</td>
<td>Subjective usefulness affected self-rated health and subsequent mortality of older adults</td>
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<td></td>
<td>• Medical status</td>
<td></td>
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<tr>
<td></td>
<td>• Physical activities</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Symptomatic depression</td>
<td></td>
</tr>
<tr>
<td>Moen and Fields (2002)</td>
<td>• General life-satisfaction</td>
<td>Formal volunteering is positively associated with well-being for older adults, but only for retirees. Neither informal ‘helping out’ nor social club membership is significantly related to any measures of well-being.</td>
</tr>
<tr>
<td></td>
<td>• Self-esteem</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Sense of mastery or self-efficacy</td>
<td></td>
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<tr>
<td></td>
<td>• Depressive symptoms</td>
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<td></td>
<td>• Subjective assessment of energy level</td>
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The personal resources aspect is one of the most frequently mentioned intervening mechanisms in the literature on volunteering by older people (Wilson and Musick, 1999). Role theory posits that engaging in productive roles increases the sense of self-efficacy and purpose in life, which in turn improves health. Yet productive roles alone can provide only a partial explanation of the health effects of volunteering. The literature offers an important complementary mechanism through which volunteering affects health: research suggests that social interactions or resources have positive impacts on the physical and psychological health of older adults (Musick and Wilson, 2003).

**Social resources**

The social resources mechanism suggests that volunteering provides social contacts, thereby promoting the social integration of older adults. As Table 2 illustrates, the literature has demonstrated that volunteers have more social ties than non-volunteers, and that volunteers are more connected with the community.
Table 2: Intervening process – social resources

<table>
<thead>
<tr>
<th>Research</th>
<th>Measure</th>
<th>Finding</th>
</tr>
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<tbody>
<tr>
<td>Rook and Sorkin (2003)</td>
<td>• Emotional health:</td>
<td>There is a significant difference in the number of new social ties in foster-grandparents’ groups compared with the group involved in non-volunteer activity or the group not engaged in any activity.</td>
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<td></td>
<td>- ten-item Rosenberg Self-Esteem Scale</td>
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<tr>
<td></td>
<td>- twenty-item UCLS Loneliness Scale</td>
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<tr>
<td></td>
<td>• Number of social ties</td>
<td></td>
</tr>
<tr>
<td>Brown et al (2003)</td>
<td>• Mortality</td>
<td>Giving instrumental support to friends, relatives and neighbours, and emotional support to spouses significantly reduced mortality when controlling demographic, personality, health, mental health, and marital-relationship variables.</td>
</tr>
<tr>
<td>Musick and Wilson (2003)</td>
<td>• Depression (11 item CES-D)</td>
<td>For the 65+ age group, volunteering had a negative effect on depression. Only formal interaction improves mental health, not informal interaction.</td>
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<tr>
<td></td>
<td>• Social resources (meeting and informal interaction)</td>
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<td></td>
<td>• Psychological resources (an index of self-esteem)</td>
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Older people tend to have fewer social contacts, and this reduced interaction can have negative impacts on their health. Members of the baby boomer generation (those who were born between 1946 and 1964), especially, have less social capital and civic engagement than their parents did a few decades ago (Sander and Putnam, 2006). For older adults, volunteering can be an important mechanism for meeting new people and thus extending connections. Although older people may have opportunities to interact through other ways than volunteering, volunteering generally provides a broader and more diverse network of interactions than other types of social activities. Volunteers make social ties with other volunteers, the clients they serve and the staff of host organisations.

Each of the three intermediary processes described above offers a plausible scenario by which volunteering can positively affect health. They also tend to be interrelated: that is, each dimension of health effects is positively related to the others. Volunteering provides significant opportunities for older people to engage in physical activities, experience productive roles and increase social contacts. We turn now from the hypothesised health effects of volunteering for older adults and the mechanisms that can bring these effects about, to the design of volunteer programmes for this population that can contribute to successful ageing.
Effective volunteer programme design

Although some features of volunteer programmes may be as important for younger volunteers as for older ones, older people have different physical and psychological needs and motivations for volunteering than younger generations (Adler, 2002). As a result, some special considerations are important when designing a successful volunteer programme for older adults. However, relatively few studies provide specific guidelines for volunteer programmes for older adults, and many fail to differentiate between age groups, instead treating volunteers as a homogeneous group (Petriwskyj and Warburton, 2007). In this section of the article, we discuss three types of effective volunteer programme targeted at (or available to) the older adult population.

The following nine volunteer programmes that engage older adults have been recognised as successful by researchers, government and communities, as well as by the media. We organise these programmes into three distinctive types – intergenerational volunteer programmes, service exchange programmes and ‘experienced’ volunteer engagement programmes (i.e. those that tap the skills, experiences or backgrounds of older volunteers) – and examine them below.

Intergenerational programmes

A number of successful volunteer programmes that mainly engage older people are intergenerational. Research has demonstrated that one of the most popular types of volunteer opportunity among older people involves activities with young people and/or children (Peter D. Hart Research Associates, 2002). We discuss here three intergenerational volunteer programmes that have grown rapidly and gained widespread recognition nationally and internationally: Experience Corps, Across Ages and RE-SEED (Retirees Enhancing Science Education through Experiments and Demonstrations).

Experience Corps

Experience Corps was the invention of John Gardner, former US secretary of health, education and welfare, and founder of the citizens’ advocacy group Common Cause. Experience Corps addresses social problems, beginning with illiteracy, with the help of Americans over fifty-five years of age, who serve as tutors or mentors to children in urban schools and after-school programmes. Experience Corps is the largest AmeriCorps programme focused on engaging older adults. According to its mission statement, Experience Corps aims to (1) channel the talent and energy of growing numbers of older adults into public and community service, (2) provide significant benefits for the older Americans who participate and (3) achieve tangible outcomes in the community. Experience Corps has achieved great success, which has been widely publicised and appreciated. In Better together: restoring the American community, Putnam and Feldstein (2003) describe the success of the Philadelphia Experience Corps, not only in increasing students’ performance and older volunteers’ sense of purpose but also in encouraging citizenship in the next generation (Experience Corps, 2005).
Across Ages
Across Ages is an intergenerational mentoring programme that matches mentors aged 55 and over with young people aged 11–14 years to improve the adolescents’ social competence and their ability to resist alcohol, tobacco and other drugs (Center for Intergenerational Learning, 2006). The programme’s impact has been documented by Aseltine et al (2000), who found that Across Ages youth participants had lower levels of problem behaviour and alcohol use and significantly higher levels of self-control, cooperation, attachment to school and family, school attendance and positive attitudes toward the elderly and helping, compared to a control group who did not participate in the programme. Michelson et al (2002) reported positive impacts of the programme in improving educational and cognitive achievement, and social and emotional well-being. In 2002, Across Ages was designated by the US Substance Abuse and Mental Health Services Administration (SAMHSA) as a ‘model programme’ and by the United Nations North American Region as an ‘exemplary model’ (SAMHSA, n.d.).

RE-SEED
RE-SEED prepares retired or working engineers, scientists and other individuals with science backgrounds to assist teachers in the physical sciences in upper elementary and middle schools. The programme seeks to remedy the lack of teachers with science degrees or background in state schools. The Points of Light Foundation has recognised RE-SEED as one of four model programmes providing rewarding volunteer opportunities for people over the age of fifty. RE-SEED is one of only two US science education programmes chosen by the Royal Swedish Academy of Science and the Royal Swedish Academy of Engineering for implementation in Sweden. Articles about RE-SEED have appeared in Business Week magazine and in other outlets (RE-SEED, 2007).

Service exchange programmes
Service exchange programmes are based on the concept of the ‘time dollar’, which involves ‘banking’ the hours volunteered and receiving credit (time dollars) for them in return. For example, in a time dollar programme, if a volunteer gives twenty hours to the community, she or he can draw on the community for twenty hours of service in return. Time dollar programmes are based on the assumption that all people have something to give to others (Cahn and Rowe, 1992). Engaging older volunteers in a service exchange programme means a change in perspective from a model of viewing older adults as a subject of need or charity to a model of reciprocity and contribution to the community.

Hour Dollars Service Exchange Program
Hour Dollars Service Exchange Program, based in St Paul, Minnesota, was founded on the concept that every person has something to contribute and can, in turn, benefit through involvement (Hour Dollars, 2007). The Hour Dollars members provide services, such as accounting, arts and crafts, housekeeping and nursing, to other members. Although its membership is not limited to older people, the programme does attract older adults. In exchange for their service, members receive hour dollars credit that is tradable within the network (Hour Dollar, 2007).
CareShare Exchange, Inc.
The CareShare Exchange was first conceived by the National Council of Jewish Women. Based in Atlanta, Georgia, CareShare provides adults aged sixty and older with non-medical help and support. It aims to promote independent living, a sense of purpose and community involvement for older persons. CareShare’s volunteers provide services such as transport and light housekeeping, participation in recreational activities and visiting other programme members. The recipients of these services are also volunteers who give back through their own volunteering (Senior Citizen Services, n.d.).

Neighborhood Service Exchange
Not exclusively for older adults (but attractive to them), Neighborhood Service Exchange (NSE) aims to engage people of all ages and abilities, with the mission of connecting people and enriching lives through sharing services in the community (Community Volunteer Service and Senior Centers, n.d.). Its two hundred-plus volunteers provide various services, including administrative support, childcare, computer services, home services, personal care, teaching and tutoring.

‘Experienced’ volunteer engagement programmes
Rather than perceiving older people solely as consumers of social services, some programmes regard them as an untapped resource. Many older volunteers possess profound knowledge and experience that can be utilised for a variety of worthy causes and organisations. Some volunteer programmes for older adults try to match the skills of volunteers with appropriate opportunities and activities, and this trend has become more common. The three programmes described below successfully utilise the skill sets that older volunteers possess. They focus on the broader leadership role of older volunteers in helping organisations and communities in the United States and abroad.

SCORE (Service Corps of Retired Executives)
Overseen by the US Small Business Administration, SCORE is a 501(c)(3) non-profit organisation composed of retired people who volunteer to provide business counselling to aspiring and established entrepreneurs. SCORE volunteers possess significant experience and knowledge in various business skill areas and have owned small businesses or worked for large corporations (SCORE, 2006). In 2005, 10,500 SCORE volunteers helped small business through 389 offices nationwide. In addition to providing in-person counselling to business people, SCORE offers workshops and seminars on a variety of business topics and has recently expanded its services to include online counselling services. It received the 2003 USA Freedom Corps Award for excellent volunteer service and the 2004 American Society of Association Executives Summit Award in recognition of the organisation’s positive impact on society (SCORE, 2006).

Executive Service Corps
The Executive Service Corps Affiliate Network (ESCAN) is a nationwide network of thirty-four non-profit consulting groups composed of volunteer consultants. Each executive service corps (ESC) affiliate matches retired professional volunteers who have held senior positions in business, government and non-profit organisations with
Charities that need business advice (ESC Affiliate Network, 2005). ESC volunteers offer advice across a wide range of areas, including accounting, budgeting and finance, strategic planning, marketing, public relations, personnel administration, board development, fundraising and facilities management. ESC affiliates in twenty-seven states provide a variety of services to social and human services organisations, educational institutions, arts and cultural organisations and government agencies (ESC Affiliate Network, 2005).

**Peace Corps Encore!**

Peace Corps Encore! (known as ‘Encore!’) focuses on developing, managing and measuring social impact projects around the world. The mission of Encore! (2007) is ‘to meet major social challenges around the world by utilizing the skills, experience and commitment of former Peace Corps volunteers and staff members’. As its name implies, Encore! recruits former Peace Corps volunteers and staff members who are in their fifties and sixties and have become experts in many fields. Encore! sends its volunteers on short-term assignments in developing nations that take advantage of the particular expertise they have to offer. Encore! volunteers provide: training programmes for teachers and healthcare personnel, business development programmes, AIDS/HIV education programmes, legal aid services for refugees, organisational development programmes for non-governmental organisations and various community development programmes (Encore!, 2007). Although Encore! launched its first project only recently (in 2005), the organisation has already received widespread publicity, and more than six hundred volunteers had registered by 2006 (UPS Foundation, 2006).

How have these nine volunteer programmes engaging older adults managed to achieve a reputation for success and win various national and international awards? To answer this question, we identified and analysed the common factors that seem to contribute to their success, based on the research findings on older volunteers. The next section of the article discusses these success factors.

**Success factors**

The nine volunteer programmes described above vary in many respects, yet they have some common characteristics as well. They are more likely to:

- Provide volunteer opportunities that attract the older population
- Use measurable programme outcomes
- Provide formal orientation and training
- Require a time commitment
- Provide adequate support and recognition for volunteers
- Have diverse funding sources

We discuss these factors in turn.

**Types of activity**

In order to recruit older volunteers, programmes must provide activities that can attract them. According to a 2002 Civic Ventures survey of older adults, the most frequent response to a question about the type of volunteer activity older adults most
enjoyed is ‘working with youth’, selected by 35 per cent of respondents (Hart et al, 2002). A similar percentage of older adults also preferred volunteering with a religious organisation (33 per cent); the next most frequent response was volunteering to help other seniors (25 per cent) (Peter D. Hart Research Associates, 2002).

The volunteer programmes described above involve older adults in activities that are consistent with some of their most popular volunteering pursuits. Experience Corps, Across Ages and RE-SEED are intergenerational volunteer programmes that work with children and youth. The three service exchange programmes – Hour Dollars Service Exchange, Care Share Exchange and Neighborhood Service Exchange – provide services to older people in the community. The experienced volunteer engagement programmes – SCORE, ESC and Encore! – match the skills and preferences of individual volunteers to suitable volunteer opportunities.

**Clearly defined goals and outcome measures**
The nine successful volunteer programmes have clearly defined goals and measurable outcomes. The three intergenerational programmes have relatively clear outcome measures: the effectiveness of Experience Corps can be measured by student performance; Across Ages can assess drug abuse rates; and RE-SEED can use science test scores. For service exchange programmes, the service hours exchanged are a good indicator of effectiveness. The performance of businesses that received counselling from SCORE or ESC volunteers serves as indicators of the success of these programmes. Every project of Encore! has measurable goals as well as an assessment by independent evaluators (Encore! 2007).

**Formal orientation and training**
Successful programmes require formal orientation and training for their volunteers. Owing to the extensive involvement with children, the intergenerational programmes require particularly rigorous training. Experience Corps members and Across Ages members go through state- or agency-approved screening and training that includes eight to ten hours of pre-service training and monthly in-service meetings. RE-SEED provides forty to fifty hours of training for volunteers. Volunteers in the Hour Dollars programme must attend an extensive orientation (Hour Dollars, 2007). Volunteers in the experienced volunteer engagement programmes have normally accumulated considerable knowledge and experience in the activities they perform. Although the service exchange programmes do not require such demanding training as the other volunteer programmes, they still require some amount of formal orientation and training.

**Time commitment**
Most of these volunteer programmes require a dedicated and often substantial time commitment from volunteers. Each of the Experience Corps members devotes a significant number of hours to tutoring and mentoring each week. Across Ages requires the mentoring relationship to continue for at least one year. Service exchange programmes keep track of donated time so that recipients feel a sense of responsibility to give something back. Encore! requires most of its volunteers to serve in foreign countries for a specified period. SCORE and ESC do not have specific time
commitments, but the volunteers are expected to complete their assignments. SCORE requires a certain time commitment from volunteers for them to maintain active status (Brudney, 1990). These requirements support Fischer and Schaffer (1993), who found that organisations which require time commitments from their volunteers are less likely to have recruitment problems.

Support and recognition for volunteers
Support and recognition for volunteers are crucial to retention. The nine programmes have grasped the lesson that recognising volunteers plays a vital role in motivation (Ellis, 1999; McCurley and Lynch, 1989). For example, most Experience Corps programmes hold monthly team meetings that provide additional training and a chance for feedback. This support gives volunteers an opportunity to reflect on and learn from their experiences, and to receive help from peers and programme staff (Adler, 2002). Most of the programmes regularly post recognition of their volunteers on their website.

Research shows that recognition activities – such as annual dinners for volunteers, invitations to attend performances or other cultural events, awards for service and write-ups of the activities of individual volunteers in newsletters or in local publications – can all provide psychological rewards for volunteers (Ellis, 1999). Particularly with older adults, whose opportunities for being recognised and appreciated may be significantly fewer than those of the younger generation, it is important to show appreciation both formally and informally.

Diverse funding sources
Finally, these nine volunteer programmes have all been successful in generating the necessary revenues. Rather than depending on a single source, the programmes diversify their funding streams. Sources of funding include private foundations, businesses, government and individual donors, and in some instances a sliding scale of fees for service. Although AmeriCorps is the single most important funding source of Experience Corps, programme resources also come from foundations, the private sector and others (Experience Corps, 2005). Across Ages receives funding from the US Substance Abuse and Mental Health Services Administration (US Department of Health and Human Services) and the State Department of Education (SAMHSA, n.d.). The revenue for RE-SEED comes from the National Science Foundation, the Massachusetts Department of Education and private foundations (RE-SEED, 2007). CareShare Exchange receives financial help from its parent organisation, Senior Citizen Services, which has funding from Coca-Cola, Delta Airlines and other businesses. The Neighborhood Service Exchange receives support from a local energy company, the area United Way and individual donations (Community Volunteer Service and Senior Centers, n.d.). The three experienced volunteer engagement programmes charge small fees for their volunteer placement services and encourage private donations.

The six characteristics common to these programmes offer guidelines for designing a successful volunteer programme for older adults. In the next section, we present additional recommendations for the design of volunteer programmes for this segment of the population.
Further recommendations for volunteer programmes for older adults

In addition to the six factors identified in our analysis of successful volunteer programmes for older adults, we can discern three other factors. First, we feel that the most fundamental task is to hire and prepare trained personnel to work with older volunteers. A 2005 article in the *Chronicle of Philanthropy* indicates that the most frequently mentioned obstacle to civic engagement by older adults is the lack of trained staff members who can manage and work with this population (Berkshire, 2005). Training volunteer managers who possess special knowledge and understanding of the older generation appears to be a critical prerequisite for programme success.

Our second recommendation concerns facilitation – all those activities and mechanisms that help older people to access and use volunteer opportunities and organisations. With the exception of the Neighborhood Service Exchange, which has a team of volunteer drivers who provide transport services, the volunteer programmes examined above do not directly address the need for facilitation. One reason for this oversight may be that most programmes involve relatively healthy older adults. Nevertheless, facilitation, including transport, is one of the key issues confronting older volunteer programmes (see Hoover, 2006; Scott, 2005), especially in rural communities (Fischer and Schaffer, 1993; Narushima, 2005). Fischer and Schaffer (1993) argue that volunteer programmes should provide transport for volunteers and/or reimbursement for travel expenses. They also point out that the costs involved in volunteering are particularly likely to be a barrier for older volunteers on fixed incomes.

Lastly, the success of volunteer programmes for older adults depends on establishing partnership networks (Lee and Brudney, 2007). Collaboration with local non-profit organisations, educational institutions, private businesses, seniors organisations, assisted living facilities, healthcare agencies and other organisations would help these volunteer programmes to acquire more resources and offer more options for older volunteers. Collaboration can be expected to increase the chances of success for volunteer programmes for older people, and in so doing, to enhance the prospects for successful ageing.

Conclusion

Our analysis suggests that, in order to establish and sustain an effective volunteer programme that can engage the older adult population, the following characteristics should be taken into account:

1. Types of volunteering activities preferred by the older population
2. Clearly defined goals and outcome measures
3. Formal orientation and training
4. Dedicated time commitment
5. Support and recognition for volunteers
6. Diversity of funding sources

In addition, these programmes must have leadership trained to manage and work with older volunteers, facilitation strategies and partnership networks. Although meeting
these conditions requires time, effort and funding, the result is likely to be programmes that offer significant health benefits to older participants.

In sum, we can view the older adult population narrowly, as consumers or users of social services. Or we can broaden our perspective to consider and respect them as assets ready to help themselves as well as to give back to society through volunteering, and thereby engage in successful ageing. The growth in the older adult population offers an important opportunity for non-profit organisations to utilise the experience and skills of this population. However, more knowledge is needed to make the most of their potential contribution. Efforts should be made by both researchers and practitioners to develop programmes that can attract and retain this valuable asset.

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