6.1 INTRODUCTION

Jay describes himself as an intense person and as he speaks of his role as hospice volunteer I can see this same intensity applied to this aspect of his life as well. As he talks, his sense of responsibility and serious attitude towards his counselling role shines through. He devotes many of his ‘leisure’ hours to this activity of counselling the bereaved and dying. He comes across as open, honest and very authentic as he shares about his life and hospice experience. Jay’s personal style is that of being ‘up-front’ - he deals with situations by confronting them directly and candidly. Upholding ethics is also very important to him. These traits, evident in him, I value and admire. I get a sense that this is a person I can trust.

6.2 DESCRIPTION OF THE VOLUNTEER ROLE

6.2.1 Jay’s Motives – The Journey Towards Becoming a Volunteer

What initiated Jay’s interest in hospice work was the invitation of another hospice worker. “It started when my father became terminally ill. Hospice became involved then. The nurse who helped my father suggested that I become involved as a counsellor. A few years later my mother became terminally ill and the same nurse came back. She suggested again that I become a counsellor.”

Jay continues to expand on this theme, this time emphasising his parents’ death as a motivating force. “The death of my father was a phenomenal experience. I wanted to give that back to someone, anyone. My dad's death was almost a textbook death, as everything was in place and sorted out. He did lots of forgiving, lots of sharing. He made peace with everybody before he died. He was converted to Christianity during the last week of his life. He wrote me the most incredible letter, well he dictated it to someone, he couldn't write. It was about him being converted.” The impact of this positive death
experience on Jay’s life is evident when he says he would like to have a similar death experience to that of his father and die with his family around him.

When talking of his mother’s death, I get a different sense. Jay describes the stark contrast in his two experiences. “The interesting thing is that my mother’s period of illness was exactly the opposite of my father’s, and she fought it all the way, but my dad rode it like a holiday. My mother was a lot longer younger. She was in her early sixties when she died and she fought the whole thing. She died on the Monday and on the Friday she was still at work. But being at work meant oxygen, which meant me loading the machine and taking her to someone who was… humouring her really, an occupational therapist. Then I realised the extreme differences between my parents, how good it could it be and how bad it could be.”

Jay wanted to share the experiences of his parents’ deaths, which were difficult and pleasant in the extreme and this is what motivated him to become a hospice volunteer.

Jay then continues in a completely different direction with reference to his motivations for becoming a volunteer. “There is another aspect to why I started at hospice. We wanted to start a bereavement support group at our church. Between the pastors and myself we felt that hospice would provide the best training.” An interesting aspect in Jay’s journey was that training for the church bereavement group was a main reason for embarking on the hospice course. However, counselling at hospice has now become the focus of his involvement, not the church bereavement group.

6.2.2 Jay’s Perception of the Volunteer Role
Jay works a full day and counsels during the evenings and on Saturday morning. Supervision for his cases takes place on Tuesday evenings. He started counselling two years ago and due to his intense involvement has had fairly extensive counselling experience. He reports that on occasion he has counselled up to five families in one week. He tries to limit his sessions to an
hour but sometimes they go up to an hour-and-a-half. His cases have mainly dealt with bereavement and he has only recently dealt with a few pre-death cases. Within the bereavement counselling he finds that he also deals with problematic family dynamics. His volunteer role takes the form of counselling people in their homes. When I asked him about being a volunteer counsellor, rather than providing a different kind of service he says, "I was right up front all the time about that. I made it very clear from the start with hospice that if they didn’t accept me as a counsellor I wouldn’t stay. I’m not interested in selling cakes or collecting books or driving people around or entertaining anybody.” He did not chose to be involved in the social groups held for those with serious illnesses and says of this choice – “I am a very intense person, I don’t do well in large groups of people unless I have known them for a long time.” Jay says he has learnt that he can’t be all things to all people and so has chosen a volunteer role where he feels most comfortable. He has had both short-term clients and those who have lasted for up to fourteen months.

For Jay the volunteer role is one of professionalism and always doing his best to the extent that he goes beyond the expectations of hospice. In this way he maintains the credibility of hospice and himself. It was a big realisation for him when he recognised the impact of the work that the hospice and its volunteers were having in the community. In connection with this realisation Jay says, “we have a [Hospice counsellor] label and our ethics and our behaviour and the way we interact socially, and for me where I work, I have to uphold that label or how can I have any credibility as a hospice counsellor if I was behaving contrary to the way someone like that should behave.”

Furthermore on his perception of what it means to be a hospice volunteer Jay says that it is, “Meeting somebody exactly where they are, whatever their emotional position is and as close to that intimate zone as I can; and being a presence there and hearing what it is that they are feeling and not giving advice, or sometimes advice is needed, or rather information is needed, but to be a presence for them to dump on and process their feelings, their anxieties and just being there. But not a distance away, but right at that place as close as they will let me”. Jay says that for this to happen a relationship has to be
established, this can take time depending on the client, but generally happens quite quickly. In the type of work done at hospice people need help and this facilitates the process.

6.3 JAY’S EXPERIENCE OF BEING A VOLUNTEER

6.3.1 Successful Clients—“almost like bungee-jumping”

Counselling evokes “wonderful” feelings in Jay and gives him “enormous satisfaction”. Jay says, “I really have to say that I have had some successful clients and some family situations that I have helped restore normality to”. Jay has helped to restore broken marriages and broken relationships. He is able to assess relationships and see where sometimes “small things have become very big things” and broken the relationships. Jay sees himself as a positive influence in these situations and when he can see the process of counselling working he feels very “humbled”. Jay sees himself as a facilitator in this process and of this aspect of his volunteer role he says, “to be a facilitator in processes like that I have an enormous sense of well being. It’s almost like being bungee jumping and I’ve never been bungee jumping but I sometimes leave clients’ houses thinking wow, this is incredible.”

When Jay describes his work with families he paints the following picture: “this family that I am looking after now, their family dynamics are... crazy. A counsellor is so trusted and I fit into that family environment and I can see myself pulling the family together. I’m saying things that I can see are so useful and so positive, and it’s bringing a family that’s been fragmented for years together. It’s not like that every time, but I’ve been seeing them for two months now and about three or four times I’ve walked away with almost like an adrenaline rush. Thinking, wow, did I do that?” Jay gets particular satisfaction from his success with volunteer counselling in the area of family dynamics. It brings to him “an enormous sense of well being”.

6.3.2 Jay’s Personal Growth

Jay reports tremendous personal growth in the last five years of his life before he came to his role as hospice volunteer. He has learned to overcome a lot of issues from his past. He attributes this growth to multiple sources such as his
church home group and a friend who himself was involved in counselling. Hospice has continued this growth and added to it: “Hospice has really rounded the edges. I kind of believe that everybody needs a hospice course”.

Since being at hospice Jay reports growth specifically in the areas of self-esteem and empathy. Empathy is a trait in him that always seems to have been there, but it has definitely been developed by his hospice volunteer role. He says of his childhood: “I remember when I was about thirteen years old I could relate or recall people tapping into me and my grandmother had had this horrific marriage and I remember her sitting and talking to me and talking and talking and I remember responding”. This illustrates that the ability to listen and empathise was there for Jay from an early age but hospice has developed these traits in him. Jay says that experiencing the IPU in particular has developed this empathy.

Continuing with how he has developed as a person since being at hospice Jay says that he has also learnt to confront issues in his own life and in the lives of others. Jay claims this as a major growth point of late, emanating directly from his volunteer role: “…confronting myself and confronting issues that surround my life, my children’s life, my childhood, my relationship with my late mother. You know I’m confronting all of those things and processing them.”

Aspects of Jay’s personal growth relate back to his perception of the volunteer role as being about ethics. This perception has brought about a new awareness and value system for Jay followed by new behaviours. “It’s brought in a new value system, an improved value system, ethics - higher ethics. You feel like you need to behave in a more responsible manner to your fellow man. It’s built a magnificent awareness in me. Whereas before I might have said ‘so and so’s a real bitch’, now I think ‘hang on a minute I represent hospice and I’m doing counselling’”.

This emerging awareness includes a new way of behaving towards others along with a different way of seeing others. “It’s a combination of things, I
realise that I need to behave in a very responsible and ethical way in my assessment of people. I also realise that almost every person has issues in their lives that either they haven’t worked through or that they are working through and to be less judgmental - that’s really what it is.”

To sum up Jay says, ‘hospice has been the catalyst to put my collective learning into a single package. It has been my watershed. We all need a hospice-type experience.”

6.3.3 The Meaning Behind the Role – Acts of Service
When Jay speaks of the satisfaction he finds in his role he states, “so there is a need that’s being satisfied and I haven’t quite quantified what it is. Acts of service, I suppose that’s what it is.” Jay thinks that if he could “turn the clock back to my twenties,” he probably would not have followed his present career. “This is just the way our life unfolds as we get older. Your experiences bring you to different places and different things; this is just another one of my seasons. And who knows how long I’ll do it. I’d like to think that I will do it until forever, but I certainly enjoy it this minute”. A theme of higher ethics and being “up front” or authentic run throughout Jay’s experience of his hospice volunteer role. The development of ethics and Jay’s personal style of authenticity express themselves through, and culminate in, acts of service as Jay states that he sees hospice as a calling: “I have decided to use hospice as my expression of giving acts of service”.

6.3.4 Confronting Mortality
To date Jay has had limited exposure to pre-death cases and so limited direct exposure to mortality through his volunteer role. In contrast to this he has had a lot of exposure to bereavement cases. In reference to this contrast he states, “pre-death had become quite an elusive thing for me.” He has been wanting, and waiting for, pre-death cases and admits that there may be “a bit of fear maybe in how do I deal with this.” In speaking of his experience in the hospice IPU Jay reiterates this. He feels that there is a way to be in the presence of death, but that he is not exactly sure what that way is. However, the IPU is the hospice experience that Jay attributes to sharpening his
empathy. He found the time that he spent in the IPU to be very humbling and the atmosphere around him to be “sacred space”. Jay demonstrates a personal proactive style of dealing with not knowing how to handle terminal clients: “I decided to tackle it head on and volunteer to work in the unit once a week, so I had to deal with it”. In connection with his feelings regarding facing terminal clients Jay says, “maybe fear is not the word, but I don’t know how to do it and I want to know.” When I ask whether the reluctance he felt had anything to do with facing death itself Jay reports a past personal experience to answer the question: “Maybe it did have a bit of that. It’s a very sacred space that - that dying space. I had a friend who was dying a few years ago and I had nothing to do with hospice at the time. And I was petrified when I came to say goodbye to him. It was the thing I got in my car to say goodbye to him. And he died some days later. And I suppose it was a bit of a hangover from that.” Jay, showing his usual pro-active style, states that with a current terminal case he has been given, he tackled the case immediately, without delay. He has also asked a volunteer with years of experience in the IPU to mentor him. This volunteer is now meeting him every week so that he can help him gain some “hands-on experience” in dealing with terminal cases: “Well I’m just going to walk around with him and see how he does things.”

According to Jay, working with Hospice has not had the effect of reminding him of his own mortality. It was an incident outside of the Hospice context that made him confront the reality of his own mortality: “I’ve had one experience where I was almost killed and I fell into a moving machine and I got out of that and I thought that was something else. To have died like that, no goodbyes but just a vicious chewing up by a machine”. Jay seems more concerned with the kind of death this would have been as opposed to death itself.

6.3.5 Negative Experience

Jay does not report many negative experiences or impacts resulting from his volunteer role and the second interview held with Jay seems to indicate that the negative experiences connected with his role lessened over time. Initially Jay felt that it was very time-consuming: “It takes up lots of time. It’s not that I begrudge it, I wanted to do it. I’m happy to do it, but at the end of the day I’m
so tired and now I have to drive out to Westdene.” He resolved this issue with his usual pro-active style: “Now I try to do it [counselling] on a Friday evening or a Saturday afternoon. I initially started doing it on a Friday evening but that messed up the little bit of social life that I have. So I changed it around to the Saturday afternoon but I’m really quite flexible. I do so many different things that it’s about the best window I’ve got now.” By the second interview Jay is more intensely involved than on the first interview but no longer mentions time as a negative aspect of his role. He says he had also disengaged from some of his other activities.

Initially Jay cited being taken for granted as a negative aspect of his volunteer role as clients cancelled appointments inappropriately. “I find they treat me differently, being a volunteer, because they [clients] made me wait and didn’t turn up. Now they haven’t phoned twice, they just leave me hanging. That wouldn’t happen if they were paying. It’s happened twice. Sometimes it’s like 40 kilometres and I sit and wait and wait and wait.” Jay again approaches the situation pro-actively and realises that he has not set appropriate boundaries. Now I tell them to phone me on the Friday to confirm. If they don’t phone, I don’t go.” Jay does not mention this problem on the second interview.

6.3.6 Flexibility in Jay’s Volunteer Role

Hospice volunteers deal with cases of bereavement and terminal illness. Jay however deals with problematic family relationships within his bereavement and pre-death cases. “I find that every family has issues and the bereavement is actually the smallest part of it and you get there and yes, you will deal with bereavement maybe for three or four sessions or even less”. After the bereavement has been dealt with other family issues usually surface during the counselling sessions and those issues become the focus of counselling. “In every place that I have been to the bereavement becomes the lesser part of it.” Jay claims that some of the social workers feel that it is better to have one type of role, i.e. to deal specifically with issues relating to bereavement and dying. Jay finds this difficult to maintain in practice. He deals with this tension by always being up front with the supervisors so that they know exactly what he is doing.
In keeping with his perception of his volunteer role as going beyond hospice expectations, Jay has even reconciled a family while on holiday. He was on holiday in the same area where an estranged son of a dying hospice patient lived. He saw the son during his holiday time and the intervention was successful. Working outside of his region while on holiday would be perceived by some to be outside of his volunteer duties. The hospice supervisors seem to sometimes differ in where they feel the boundaries of the hospice volunteer role lies. Jay says of this difference in the perception of social workers that this seems to be “a personal kind of thing, but hospice is very unconditional.” By “unconditional” Jay means that hospice is also flexible in their approach to their volunteers’ role. In Jay’s specific case he has a lot of resources in terms of experience gained through his own life in the area of problem family dynamics. As a result of this experience he feels equipped for this kind of flexibility in his role, “because of what I have learnt in [his own family] therapy and I always read, I have an absolute thirst for knowledge of relationships, for understanding the opposite sex, [I am] constantly looking for [the reason] why my marriage went wrong and, when I’m in the next one, what tools do I use to make it work.”

6.3.7 Relating to Clients - Boundaries

Jay thinks that the boundaries formed between hospice volunteer and client are quite elastic and he allows these boundaries to move according to the situation in which he finds himself. He does not find these changing boundaries stressful but believes that this actually enhances the counselling relationship. He deals with the boundary issues by addressing them openly: “I keep on saying, this is where we are now and we now have to renegotiate what’s happening. The thing is out in the air all the time so that no one is under any illusions as to what is happening. So I think that there are more specific boundaries when you are paying for it [the counselling] and I think the degreed counsellor controls it better [than hospice volunteers]”. It is not that Jay has no boundaries within his volunteer/client relationship, but the boundaries that do exist are flexible. The kinds of boundaries that he does establish are related to limiting the times his clients can phone him (unless
urgent) and for how many sessions he is going to see them. He also establishes rules for the counselling sessions themselves, such as no disturbances like TV or radio while he is there.

Jay finds the relationship he forms with clients in the pre-death environment to be quite significant: “I’m finding that the relationships do become friendship kind of relationships. With this old lady that I see, she said I want you to make a promise. She said, when I die you will be there. So I said I can’t really make that promise. I said what about your family. She said I want you to be there”. This illustrates the significance of the relationship that Jay has noticed forming in the pre-death environment.

6.3.8 Jay’s Past Experiences and How They Relate To His Volunteer Role

Jay’s past experiences have influenced his current hospice work and the direction that it has taken. “Originally I thought I had to share with people the experience of my parents deaths which were pleasant and difficult in the extreme and that’s what I thought I was going to do and yes that has happened.” The hospice philosophy of palliative care and acceptance of death would fit well with Jay’s idea of a “text book death” and provide a context where he could “give this back to someone”. I wondered how it would be for Jay if he could not “give back” the type of death that his dad experienced, if a client had the need to “fight it all the way”. Jay addresses my wondering. He reports that his grieving is complete and his words paint a picture of acceptance of death, of others and of his own situation. Jay has worked through his personal bereavement experiences.

“I celebrate my parents’ lives and deaths all of the time. I know what living meant to them, their loves and fears, successes and failures and salute them for their personal victories and also forgive them for those parenting mistakes - some big others just tiny. So hospice hasn’t at this time featured in any way in this regard. My dad’s death was ‘a textbook death’, complete and filled with love and dignity; this I share with who ever wants to listen. My Mom’s death wasn’t the same as my Dad’s, but that’s okay because she was in a very
different place emotionally when she died. We all have to make choices -
good information and counsel allows for good results, hopefully! This
message I offer to those who want to receive my experiences. I won’t, don’t
force it upon any person. If they take it I accompany them along the journey,
it’s unconditional. Either way, my dad’s or my mom’s, I offer friendship love
and attempts at understanding, if allowed to that is”.

Jay has not been reminded of his parents’ deaths in witnessing the deaths of
his client’s, although his experience in this regard has been limited. Jay did
however experience some reluctance in dealing with pre-death cases, which
he thought might be related to issues relating to the death of a friend. He
used pro-active measures to overcome this successfully. Of his parents’
death however he says, “My grieving has been complete. I do from time to
time feel pain when recalling good stuff. I know that they tried in most
regards.”

Jay then explains how personal family struggles that he had both as a child
and as an adult also influenced his hospice role. Jay has been in troubled
families most of his life and as a result has been in counselling most of his life.
In this way Jay has found another way of giving back: “I have been able to use
those skills [attained in counselling] to pass onto other people.” Jay reports
that the bereavement cases he has dealt with have also involved a lot of
family work, but this departure from the traditional hospice role does not stress
him due to the resources gained through his life experience. “It works well for
me and its because I have been in troubled families all my life”. Jay did not
initially expect counselling in the area of family relationships to be part of his
hospice experience, however, it has constituted a source of satisfaction in
Jay’s volunteer role.

6.3.9 Effect of Jay’s Volunteer Role on Relationships Outside of Hospice
Jay says of his hospice role that it has affected relationships outside of
hospice both positively and negatively. “I recently ended a relationship I had
with a lady and it was a year old relationship and she became very threatened by the work I do. She couldn’t cope with the intensity of what happens and I think it was more about her issues than it was about mine, but then I had the fortune or the misfortune to have her as a lady friend, and she struggled with it and continually felt that she was an outsider in my life and how do you include your girlfriend in the cases that you get?” Jay states that he used one of the social workers to talk through this issue with him. The way that he dealt with it was to talk about his work in very vague terms in order to try to make her feel a part of it. Jay also reports positive effects on relationships from his hospice work: “it’s improved my relationships considerably because there’re new skills, listening skills and skills to confront.”

Jay also finds that his role as hospice volunteer elicits respect from the circle of people with whom he mixes. “When they hear that that’s the type of work I’m involved in they generally have a lot of admiration. Initially I had responses like ‘what the hell do you want to do that for’, but that doesn’t seem to happen any more. The other response is more common.”

6.4 A WAY OF COPING

6.4.1 External Support – Friends and Hospice

Jay reports that most of his emotional support comes from his tight network of friends. “We dump on each other all the time. I have a couple of relationships like that, male and female relationships. I had supper with one of them last night and we spoke and spoke. It was the most intense couple of hours. We probably spent five hours, we penetrated each other’s souls.” Jay has developed friendships with hospice volunteers and uses his supervisors and supervision effectively. One of Jay’s close friends is a volunteer and he uses a fellow volunteer in a mentor role.

6.4.2 Jay’s Personal Resources

Apart from gaining support from external resources Jay also uses his own resources to deal with his hospice volunteer role. I observe a theme running throughout his interviews - Jay has a personal style of being pro-active in coping with difficult issues relating to his hospice work. In his relationship
problem he tried to include his girlfriend by talking to her in vague terms about his hospice work so that she did not feel excluded from this aspect of his life. In dealing with issues relating to client boundaries he says, “I deal with this by being up front with my supervisors.” He is also up front with the clients themselves. In dealing with clients who are abusing his role and taking him for granted, he sets more rigid boundaries. Initially Jay found himself over-committed, as he was involved with two different organisations. He felt that he was burning himself out and so dealt with his over-commitment by choosing one area of service, which was Hospice. In so doing he stayed committed to where he felt called. He has brought all his extra-mural activities into the area where he lives. Previously, he travelled quite far for them. He uses this personal pro-active, up front style of coping effectively in his volunteer role.

6.5 IMPACT OF THE HOSPICE CULTURE.
6.5.1 Jay’s Concept of Death and the Hospice Influence
Jay is not afraid of death. “For me it’s like writing matric. I know I will cope with it but am I going to get a ‘C’ or a ‘D’? It’s not a squeaky clean emotion for me but generally I’m not scared of it; generally I’m a bit uncertain but it’s not a monster. I read somewhere that death is the greatest adventure yet to be taken.” Jay has strong religious convictions and a belief in the afterlife. “When you listen to this fellow on TV[John Edward, who claims to contact those who have died] that kind of puts other things into perspective for me. He is communicating so openly with the dead and… it does give me a feeling that it kind of confirms that something is there and you are not just going to fall into a black hole, it carries on beyond”. Jay shows an ability to face both the negative and positive aspects of his view of death. Working at hospice has not really altered his views on death as his understanding of it began with his father’s death nine years ago.

6.5.2 Jay’s Compatibility With The Hospice Philosophy On Death
Jay’s ideas generally fit well with the hospice philosophy on death in that he sees it as a natural part of life: “Death for me is an element in the cycle of life; it’s simply a stepping stone, an end of a season and the step to the next. It’s
not falling into a big black hole or space.” He also believes that it is something to be faced and not denied. On speaking of how he copes with death he says, “to go out and meet it and to process it on our terms not on its. To engage at any time, with any person on the subject. Discuss and share others’ experiences and feelings on the subject.”

6.5.3 Supervision - Accessibility vs Inaccessibility

Jay uses his supervisors effectively for his volunteer role. “I tap into my supervisors all the time. I phone them up and say ‘can I come and see you?’” Jay feels that his supervisors are doing what they need to do but sometimes due to a lack of communication between them and where the messages are left he can not access his supervisors often enough. He dealt with this in his up front manner and one supervisor responded by supplying him with her personal phone numbers. Jay also feels that information is not circulated very well to the volunteers: “By accident I’ll find out that there’s a training course, maybe emails should be sent out”. Lack of communication within the hospice organisation detracts from the effective support that they offer, as due to communication problems their resources are not always accessible.

The hospice supervisors sometimes seem to differ in where they feel the boundaries of the hospice volunteer role lies. The hospice supervisors are also flexible in their perception of their volunteers’ roles, and this in turn affects the way in which the volunteers see their roles. For Jay it means that he also deals with problematic family relationships within his death and bereavement cases.

6.5.4 A Sea of Changing Faces

Initially Jay gained a lot from supervision as a junior member. He was with mature caregivers that were experienced in their roles and they supplied him with emotional tools that he could apply elsewhere and in his counselling situation.
Jay has now been at hospice for some time and has regularly attended supervision. He has noticed that the turnover rate or the fallout rate for volunteers is very high: “The one thing that has become evident is that there is a big turnaround of faces and maybe people fall away into different slots in the week, I don’t know, but the faces continuously change.” Jay finds this difficult as he looks to supervision for guidance and nurturance and finds it difficult to explore his feelings when there is always a ‘sea of new faces’. “You see for me it’s all about relationships. What do we go to supervision for? To get nurtured a bit, to get guidance on how to look after things and you get there and there’s a whole sea of new faces and I can’t just lunge out and say oh I’m feeling this, that and the other. And then you don’t feel that you can be yourself basically with that turnover of people and you can’t use it for that emotional support. I need to feel safe. That is probably my largest criticism [of supervision]”. He compensates for this problem by frequently using a social worker familiar to him. The other significant aspect for Jay in his volunteer role is that there are so few men doing volunteer work. “I’m quite shy by nature and I’m learning not to be shy but I’m often the only bloke sitting there and I think, well I don’t really know. That’s part of being a volunteer, people come and go as they need and do what they want really.”

6.5.5 Influence of Hospice Training - "A light switched on"
For Jay hospice training contributed to his growth in self-awareness. “Oh, it’s wonderful - those self-awareness exercises that we did in the training, they were incredible”. For Jay the self-awareness exercises gave him personal insight into where his marriage failed: “I understood why my marriage failed in the exercise on loss and gain - your greatest loss versus your greatest achievement. That day it switched on a light and I finally understood why my marriage failed...”

6.6 INTERPRETATION: CONFRONTATION WITH LITERATURE
The major elements of the themes and sub-themes that emerged in Jay’s story will now be summarised and compared to the literature reviewed in chapter two. My observations are also used to interpret the data.
6.6.1 DESCRIPTION OF THE VOLUNTEER ROLE

6.6.1.1 Jay’s Motives – The Journey Towards Becoming a Volunteer

What initiated Jay’s interest in hospice work was the invitation of another hospice worker. This motive was evident amongst volunteers in a study carried out by Scott and Cladwell (1996). Jay’s parents’ death was another motivating force. Personal experiences with the death of a family member are cited by many authors (Scott & Cladwell, 1996; Garfield & Jenkins, 1981; Payne, 2001; Chng & Ramsey, 1984) as a motivating factor for involvement in hospice work. In Jay’s case this motive is a need to share the experience with others in order to “give something back”. Kottler (2000) cites “giving back” as a motive for entering into a helping role. Jay did not need his volunteer role to work through his parents’ death, which is a motive cited by Glass and Hastings (1992) for becoming a hospice volunteer. Another motivational aspect for Jay’s hospice training was a desire to start a bereavement support group at his church for which he needed skills. Both Muller (cited in Unger 1991) and Payne (2001) refer to the building or maintaining of skills as a motivation for volunteering. However, Muller (cited in Unger 1991) relates this motive to improving the family’s human capital gain in which skills are developed to increase future employment opportunities. In Jay’s case the need to build skills relates to an altruistic motivation, also spoken of by Kottler (2000) and Muller (cited in Unger 1991), to start a church support group. Kottler’s (2000) sense of multiple urges driving all helpers was true for Jay.

6.6.1.2 Jay’s Perception of the Volunteer Role

For Jay the volunteer role is one of professionalism, ethics and always doing his best to the extent that he goes beyond what the expectations of hospice are. These are Jay’s own ideas and the way in which they influence his perception of the volunteer role. The volunteers’ own subjective perception of their role was not covered in the literature reviewed in chapter two. Having completed the hospice training myself, I observed the influence of this training in some of Jay’s ideas about his volunteer role and what he perceives it to be. His perception of his role is that of meeting somebody exactly where they are, close to that intimate zone and being a presence there for them to dump on and to then process their feelings and their anxieties. Jay sees part of his role
as giving information, but definitely not giving advice. All of these elements correspond to the role of the volunteer as presented by hospice during training which is based on Rogers’ theory (Barton, 1974).

6.6.2 JAY’S EXPERIENCE OF BEING A VOLUNTEER

6.6.2.1 Successful Clients – ”almost like bungee jumping”

The “adrenaline rush” experienced by Jay after some counselling sessions seem to conform to the ‘helpers high’ described by Luks (1998). Jay’s “enormous sense of well being” and satisfaction would seem to support Luk’s (1998) hypothesis that the ‘helpers high’ does lead to the release of endorphins and that this is the process responsible for Jay’s resulting sense of well being. This sense of well being provides personal satisfaction which, is cited by Scott and Cladwell (1996) as a reason for continuing as a hospice volunteer. In Jay’s case I observed that this satisfaction is particularly linked to helping to facilitate the mending of broken relationships. Jay has been in broken families all of his life and has done a lot of searching for answers relating to this experience. He seems to have found some of these answers and he is now ‘giving them back’ to others. His past experiences seem to be related to his experience of the helper’s high.

6.6.2.2 Jay’s Personal Growth

Payne (2001) cites ‘personal growth’ as a satisfying aspect of volunteering. What constitutes this personal growth is unique for each individual. For Jay this growth consists of development of empathy, self-confidence, the ability to confront himself and others, a new value system resulting in a change in behaviour towards others, and a new awareness of himself and others. From observation it seems that Jay’s self-confidence has probably increased due to his experience of having had “had some successful clients.” The development of a new value system and resulting change in behaviour is specific to Jay’s particular experience of his volunteer role as his perception of the role includes it to be about, amongst other things, ethics and professionalism. Jay reports that his empathy has developed particularly through exposure to the IPU where he has faced mortality. Hospice training affected Jay’s personal growth in that it led to the development of self-
awareness in Jay as to why his marriage failed. This supports Riordan and Saltzer (1992) who claim that the team approach to hospice work can promote an opportunity to develop skills of self-awareness.

### 6.6.2.3 The Meaning Behind the Role – Acts of Service

Jay sees hospice as a calling: “I have decided to use hospice as my expression of giving acts of service”. Meaning for Jay in his volunteer role seems to lie in altruistic motivation, the reward being intrinsic to the act itself (Unger 1991). Jay does recognise that a need within him is being satisfied, but he again identifies the need as ‘acts of service’. “So there is a need that’s being satisfied and I haven’t quite quantified what it is. Acts of service I suppose that’s what it is.”

### 6.6.2.4 Confronting Mortality

Exposure to the IPU specifically has sharpened Jay's empathy, which is cited as personal growth for Jay. Payne (2001) cites personal growth as a source of satisfaction for volunteers. Jay has not had many pre-death cases and reports that he may have felt reluctant to handle them because of having difficulty dealing with the death of a friend in his past experiences. This confirms what Berger (2001) found, that working as a counsellor can induce stress relating to the developmental wounds of the counsellor. For Jay this was coupled with not knowing how to deal with terminal cases. He shows conscious knowledge of his past trauma difficulties and how they might be affecting his experience as a volunteer. According to Berger (2001), as the effect of traumas become conscious for the counsellor they can then be used effectively to enhance the counselling process. Jay, conscious of his difficulties was able to tackle them effectively. Using his personal proactive style of coping he used external resources and approached another volunteer to help train him in pre-death counselling.

Jay did not acknowledge experiencing the stress of having to confront his own death in his work at hospice, which is contrary to findings described by Glass and Hastings (1992) who found that facing death on a regular basis made hospice volunteers confront their own mortality and this was cited as a source
of stress. Jay gave an account of an incident that happened outside of the hospice that made him confront this reality.

6.6.2.5 Negative Experience

A negative effect on Jay’s life of being a hospice volunteer is that it takes up too much time. Glass and Hastings (1992) noted this as a negative aspect of the role of hospice volunteer. Jay also cites being taken for granted by clients as a negative aspect of his role. This negative consequence could fall under stress emanating from clients (Kottler, 2000; Payne, 2001). The theme of being taken for granted was not found in the literature. This theme is an aspect specific to the volunteer role though, as it occurs due to clients not paying for the volunteer’s service. On the other hand, Uffman (1993) found that hospice volunteers cited being appreciated as a reward. Jay dealt with both of these negative aspects (of taking up too much of his time, and not being appreciated) using his proactive style. He instituted stricter boundaries when relating to clients to prevent them from taking him for granted and he moved his times of counselling to a time that would allow him to still have a social life. He also moved his extra mural activities closer to home.

6.6.2.6 Flexibility in Jay’s Volunteer Role

Some hospice social workers feel that volunteers should only deal with pre-death and bereavement issues. Jay however feels comfortable with flexibility in dealing with issues outside of these two parameters. How the hospice volunteer role is defined, according to the kinds of issues with which the volunteer deals in his cases, is not discussed in the literature reviewed in chapter two. In Jay’s case he deals with family relationships within his bereavement and pre-death cases. The hospice social workers are generally flexible in their approach to the kinds of cases their volunteers deal with and this also contributes to the volunteers stepping outside of bereavement and pre-death issues. Jay feels comfortable with the flexibility to deal with family relationship issues that arise within his cases because he has gained resources through previous life experience and this has further contributed to him stepping outside of bereavement and pre-death issues. The perception of
his volunteer role affects the flexibility in Jay’s volunteer role as he sees his role as going beyond hospice expectations.

6.6.2.7 Relating to Clients - Boundaries
Jay does establish boundaries in relating to clients but he keeps these boundaries elastic and thinks that this enhances the counselling relationship. Kottler (2000) claims that the key to prevention of stress is to establish a balance in the helping relationship so that a suitable distance can be maintained between client and counsellor while still exuding warmth towards them. This is the balance that Jay seems to be finding through the use of “elastic boundaries”. Jay uses such things as contracting a certain number of counselling sessions with each client in order to maintain some boundaries. Dass and Gorman (1990) suggest that instilling the kind of boundary that Jay uses, such as the fifty-minute hour for the session, assists in regulating the helping experience. Jay finds the relationship he forms with clients in the pre-death environment to be quite significant. This substantiates what Kottler (2000) maintains about the helping relationship - it is so significant that it is at the heart of whatever help is offered.

6.6.2.8 Jay’s Past Experiences and How They Relate To His Volunteer Role
Jay’s motives for volunteering relate to his past experiences as he initially went into hospice volunteer counselling to share the experience of his parents’ deaths. Rather than wanting to work through these experiences he wanted to ‘give back’ something positive out of what he had learnt and experienced. Giving back is a motive cited by Kottler (2000) for taking on a helping role. The hospice philosophy of death would fit well with Jay’s idea of the “text book death” that his father experienced and it would provide a context where he could ‘give this back to someone’.

Jay did however experience some reluctance in dealing with pre-death cases, which he thought might be related to issues relating to the death of a friend. Working as a counsellor can induce stress relating to the developmental wounds of the counsellor. In the hospice volunteer role working with
bereaved clients can trigger past bereavement experiences for the volunteer. If this trigger can be modulated it can allow the volunteer to empathise with the client more closely. The symptoms need to become conscious to the counsellor and he needs to be supported effectively. If this happens past trauma can contribute effectively to the counselling (Berger, 2001). Jay was conscious of the effect that his past experience could be having on his hospice volunteer role and was therefore able to use pro-active measures to overcome reluctance successfully.

Jay also explains how personal struggles that he had as a child and as an adult within troubled families have also influenced his hospice role. Awareness of his difficulties and the application of effort through personal counselling and reading to overcome them has allowed Jay another way of giving back, enhancing what he has to offer as a counsellor. “I have been able to use those skills [attained in counselling] to pass onto other people.” Dass and Gorman (1992) claim that as counsellors understand themselves and their own suffering they are easier able to understand suffering in others.

6.6.2.9 Effect of Jay’s Volunteer Role on Relationships Outside of Hospice

The rewards and difficulties of hospice volunteers are cited as intertwined by Uffman (1993). The role of hospice volunteer has had both negative and positive effects on Jay’s relationships outside of hospice. It had a negative effect on a relationship with a girlfriend who felt excluded from this part of his life. It has however also had a positive effect on relationships in that he now has the capacity to confront and has new skills such as listening to use in relationships outside of hospice. His circle of friends respects him for his hospice volunteer role. Effects of the hospice volunteer role on relationships outside of hospice have not been discussed in current literature. However the acquisition of skills acts as a reward for volunteering (Payne, 2001; Unger, 1991). In Jay’s case the skills are used to enhance relationships.

6.6.3 WAY OF COPING

6.6.3.1 External Support – *Friends and Hospice*
Jay uses a network of personal friends and hospice supervision, supervisors and fellow volunteers as sources of support. Riordan and Saltzer (1992) recommend consistent supervisory support, weekly support group meetings and a staff team approach to work as ways of alleviating stress in the hospice setting.

6.6.3.2 Jay’s Personal Resources
Jay has a personal, up front and pro-active way of dealing with issues arising from his hospice role that allows him to deal with things by confronting them and instituting practical ways of alleviating any tensions. Personal styles of alleviating stress are not covered in the literature reviewed in chapter two of this study. There is evidence of Jay using this pro-active way of dealing with issues in relating to clients, dealing with mortality, dealing with the being unable to access supervisors, and dealing with problems in relationships outside of hospice.

6.6.4 IMPACT OF THE HOSPICE CULTURE.
6.6.4.1 Jay’s Concept of Death and the Hospice Influence
Jay already had established ideas on death before he began work at hospice because his understanding of it began with his father’s death ten years previously. So working at hospice has not really altered his views on death. He believes in life after death. Patchner and Finn, (1987) studied hospice volunteers’ attitudes towards death and found that 83% of them believed in life after death so Jay follows this pattern. Riordan and Saltzer (1992) found that hospice workers found comfort and stress relief in their religious beliefs. I observe that Jay has the ability to face both the negative and positive aspect of death. He admits that it is not a “squeaky clean emotion for him,” but that it is also “not a monster.” Jay is able to face his uncertainties surrounding death which confirms Momeyer (1985) who claims that to be effective in working with the dying the caregiver has to be able to face their own fears regarding death. However, Jay does not indicate high anxiety regarding death, which confirms the findings of Malsach (1982) studying hospice volunteers and Cochrane (1990) studying oncologists who both found that those with lower
anxiety regarding death and dying related better to terminal patients than did those with high anxiety.

6.6.4.2 Jay’s Compatibility with the Hospice Philosophy on Death

Jay’s ideas generally fit well with the hospice philosophy on death in that he see it as a natural part of life. “Death for me is an element in the cycle of life, its simply a stepping stone, an end of a season and the step to the next. It’s not falling into a big black hole or space.” He also believes that it is something to be faced and not denied. On speaking of how he copes with death he says, “to go out and meet it and to process it on our terms not on its. To engage at any time, with any person on the subject, discuss and share others experiences and feelings on the subject”. Scott and Cladwell, (1996) found continuing in hospice volunteer work to be associated with belief in the hospice mission.

6.6.4.3 Supervision - Accessibility vs Inaccessibility

Jay has generally found supervision to be a place where he can learn new skills to deal with cases and a place where he can learn emotional tools that he can use elsewhere. He generally feels that his supervisors are supporting him but due to communication problems within the organisation, messages he leaves for his supervisors do not always reach them. As a result he cannot always access his supervisors at a time when he needs them urgently. Training for volunteers is offered by hospice and Jay finds this a valuable resource. However he does not always know when the training will take place, again due to inefficient communication. This confirms Riordan and Saltzer (1992) who cite communication problems to be reported by hospice workers as a source of stress emanating from working in a team. Jay’s personal resources, being pro-active and up front has impacted on the way he experiences the hospice organisation in that he has altered the problem that he had with the accessibility of his supervisors. Due to his personal proactive style of dealing with things one of the hospice supervisors has given Jay her personal numbers so he now has access to this specific resource in the form of her supervision whenever he needs it. Jay generally uses supervision in
the form of social workers and fellow volunteers as external support, a way of coping with the tensions arising from his role. This supports the suggestions of Riordan and Saltzer (1992) that cite regular supervision and a team approach as a way of alleviating stress in hospice workers.

The hospice social workers are generally flexible in their approach to the kinds of cases their volunteers deal with and this also contributes to the volunteers stepping outside of bereavement and pre-death issues. Jay feels comfortable with the flexibility this affords him to deal with family relationships. These aspects were not documented in the literature reviewed for the current study.

6.6.4.4 Sea of Changing Faces

Working in a team such as the one provided at hospice allows for the flexibility needed to work in an emotionally charged field. The hospice staff support group can provide a place for catharsis, a critical element in facilitating the grieving process necessary when dealing with dying patients. The group can also provide information that promotes knowledge relating to the dying. It can also promote an opportunity to develop new skills of self-awareness (Riordan & Saltzer, 1992). Jay has experienced increases in knowledge, support for cases and self-awareness skills from the hospice group that is in keeping with the above current findings in literature. However for Jay as a volunteer he is subject to “a sea of changing faces” which is a different experience to that of permanent hospice staff. So the hospice supervision group is not a place where he can vent emotions related to his work with dying clients as he does not feel safe enough there due to the constant change in membership of this group.

6.6.4.5 Influence of Hospice Training - A light switched on

During hospice training Jay gained self-knowledge specifically in terms of why his marriage failed. This supports the finding by Riordan and Saltzer (1992) that working within a hospice team can provide a chance for developing new skills of self-awareness.