



Sustainable safety volunteerism in the Strand, Western Cape: Volunteer identity, motivation and socio-organisational experiences

Samed Bulbulia,[✉] Ashley van Niekerk

Abstract

There is a growing recognition of the relevance and even centrality of volunteerism to adequate collective responses to poverty, housing and the promotion of human rights and, more recently, safety. Volunteerism by members of poor global South communities within their own communities has, however, remained relatively neglected and undescribed. This study explored the motivations, benefits and socio-organisational experiences that a group of volunteers reported as a result of their participation in a safety-promotion project in two under-resourced communities in the Strand, in the Western Cape, South Africa. The focus of this safety-promotion project was to enhance women's safety and health and to reduce risks of injury and violence through the implementation of safety-promotion strategies that target the prevention of priority injuries, particularly violence, traffic injury and burns. The study used a qualitative approach and is based on the completion of questionnaires and focus group discussions with volunteers and project staff. Data analysis involved the thematic analysis of the written responses by 28 volunteers and 4 project staff to a questionnaire comprising open-ended and focused questions that explored their experiences of volunteerism. The study also involved the analysis of the transcriptions of two focus group discussions subsequently held with these volunteers to clarify, further develop and verify emerging themes. The volunteers identified both self-oriented and socially altruistic motivations and benefits. These volunteers highlighted a hope and desire to advance social change and promote safety within their communities. Volunteer experiences reflected their enthusiasm to enhance both the human and social capital of their communities simultaneously. This study highlighted the development of a volunteer identity as a necessary component for the implementation of a sustainable, volunteer-based safety-promotion project.

Keywords: Volunteerism, safety, identity, motivation, experiences

SCOPE, RATIONALE AND AIMS

There is increasing evidence and a growing recognition of the relevance and even centrality of volunteerism to the adequate provision of health care and welfare within the developed global North (Jenkins 2010). The contribution of volunteerism within the global South has not been substantially engaged with, although more recently, there has been an increased focus on South – South volunteerism by international agencies such as the United Nations and the Voluntary Service Overseas, both of which have implemented substantial volunteer programmes. These programmes, however, have tended to utilise volunteers from different communities – and, often, a different country – rather than volunteers from the host community (Adebanwi 2005; Aguilung Dalisay 2005; Jenkins 2010).

Despite the broadening international interest, volunteerism by members of poor global South communities within their own communities has remained relatively hidden (Jenkins 2009a). However, there is some recognition that volunteerism varies across cultural groups and contexts, and that there is a rich history of volunteerism throughout the global South, beyond the phenomenon of international volunteering. Much of this volunteerism appears to be directed at

[✉] Correspondence to: Samed Bulbulia, Medical Research Council and University of South Africa, Safety and Peace, Promotion Research Unit, samed.bulbulia@mrc.ac.za.

the social and economic priorities prevalent among communities in the South, including issues of poverty, housing, human rights and health, and – to a lesser extent – injury prevention and safety (Jenkins 2009b).

In South Africa, a priority social and health concern is that of injury prevention and safety (Seedat, Van Niekerk, Jewkes, Suffla & Ratele 2009). It is estimated that approximately 50 000 people (Mayosi, Lawn, Van Niekerk, Bradshaw, Karim & Coovadia 2012) die annually, and up to 3.5 million seek health care, as a result of intentional or unintentional injuries (Peden & Butchart 1999). When combined, these injuries comprise the second leading cause of all disability-adjusted life years after HIV/AIDS (Norman, Matzopoulos, Groenewald & Bradshaw 2007). Injury is disproportionately concentrated in low-income settings (World Health Organization 2002). In South Africa, these settings are typically characterised by inadequate infrastructure and resources, high levels of unemployment and poverty, overcrowding, and poor health and safety service delivery (Seedat et al 2009).

Community-based prevention responses, guided by local evidence on injury magnitude, risk and resiliency factors and local partnerships, are recognised as comprising part of the constellation of essential responses required for injury prevention and safety (Butchart, Kruger & Lekoba 2000). In under-resourced settings, the participation of community residents, often as volunteers, is considered an important requirement for collective injury- prevention responses (Swart, Seedat & Sader 2004). In South Africa, the actual and potential contribution of volunteers, however, tends to be under-recognised, poorly understood and inappropriately utilised (Swart, Seedat & Sader 2004).

This is despite the impact of community and, in particular, women's activism, which has been notable for the extent to which the latter's collective action has resulted in the promotion of gender equality in the global South (Jenkins 2009b) and, specifically, in South Africa (Hassim 2004). The latter contributions have influenced the country's Constitution and the design of related state institutions and policy-making procedures (Hassim 2004). Numerous women's organisations have contributed to national campaigns, such as the 16 Days of Activism Against Women and Child Abuse (Mosavel, Ahmed & Simon 2011), and to community service delivery, including dealing with violence against women by, for example, conducting citizen's arrests in the perceived absence of efficacy in the justice system (Hassim 2004).

This study aims to contribute to the South African knowledge of volunteering and, in particular, the motivations, benefits, volunteer identity and socio-organisational experiences that a group of volunteers reported as a result of their participation in a women-led safety- and health-promotion programme in the Strand, in the Western Cape.

VOLUNTEERISM: DEFINITION, CONTEXTS AND ANTECEDENTS

Definition

Volunteerism is typically defined as a set of "dynamic, long-term, planned, pro-social behaviors, within an organisational setting, undertaken for no financial gain, without compulsion, including political activism and where time and effort are given for the betterment of the self and the community in general" (Penner 2002:448).

Contexts and antecedents of volunteerism

volunteering is considered multi-dimensional, occurring in many different contexts, offering various individual benefits and involving persons with varying motivations. These contexts and motivations affect volunteering in diverse ways that cannot easily be incorporated into any single model (Matsuba, Hart & Atkins 2007). This study briefly reviews the empirical literature that describes the role of individual motivation, the benefits of volunteerism and the organisational and community contexts that may support longevity in volunteerism. The study draws on identity theory and the concepts of self and volunteer role identity, on the basis of which it is possible to frame the contributions of these factors to sustainable volunteerism.

Motivation

A wide variety of motivations, fulfilling different personal needs, coexist in volunteerism (Zimek 2006). Situational factors (such as the high incidence of domestic violence in a community) may influence both the initial and ongoing engagement in volunteerism (Chacon, Menard, Sans & Vecina 1998; Omoto & Snyder 1995). The initial motivation to volunteer and the total length of service are often derived from self-oriented motivations (Clary, Snyder, Ridge, Copeland, Stukas, Haugen & Miene 1998; Omoto & Snyder 1995). Studies have highlighted the following motivations: a desire to gain knowledge; personal development; the development of skills to enhance their value in the labour market; gain status and recognition; deliver services in the hope of eventual remuneration; gain work experience; and boost self-esteem (Hardill & Baines 2007; Klaasen 2002; Omoto, Snyder & Morrino 2000; Thomas, Newell, Baral & Byanjakar 2007). Volunteers are, however, also often driven by altruism, including a desire to show community concern, social respect, religious and moral duty.

The importance and role of extrinsic incentives to motivation, such as micro-credit, have also been reported, although more regular payments, such as via wages, have been regarded not only as financially unfeasible, but as a potential threat to the social respect offered to volunteers, and thereby their motivation (Glenton, Scheel, Pradhan, Lewin, Hodgins & Shrestha 2010). Motivations and considerations of the costs and benefits of volunteerism may vary with age, gender, marital status and context (Davis, Hall & Meyer 2001; Fuertes & Jimenez 2000). A clearer understanding of what motivates people to volunteer, especially in under-resourced settings, will help in the development of more effective strategies for involving volunteers in the provision of community safety services.

Benefits

Volunteerism potentially offers a number of benefits to individuals and communities, for example the opportunity to acquire skills or knowledge on a variety of subjects; a sense of belonging and affiliation; organisational and management experience; individual career development; communication and interpersonal skills; recognition and appreciation; improved self-esteem; and becoming multi-skilled in a relatively short period of time. Benefits to communities include community cohesiveness and an increase in social and human capital, particularly among socially marginalised or excluded individuals or groups (Crook, Wei, Willems & Egdorf 2006; Dingle, Sokolowski, Saxon-Harrod, Smith & Leigh 2001; Oesterle, Johnson & Mortimer 2004; Omoto & Snyder 1995; Serow 1990; Uggen & Janikula 1999; United Nations Economic and Social Council 2001; Youniss, McLellan & Yates 1997; Zakour 1994).

The concept of self, volunteer role identity and identity theory

The psychological literature embeds definitions of self and identity within psychoanalytic, phenomenological, clinical, experimental social and cognitive psychology perspectives (Swart & Franchi 2003). The sense of self incorporates a multiplicity of attributes, experiences, emotions, motivations and behaviours that one may identify as specific to oneself, and which may equally be influenced by the political, historical, cultural and social contexts within which individuals negotiate their personal and social identities. Identity may be considered dynamic within a given context; alternatively, it may be regarded as a composite of self-relevant traits, characteristics or features, some of which are considered stable, while others are subject to fluctuation (Swart & Franchi 2003).

The concept of volunteer role identity revolves around the extent to which a person identifies with and internalises the role of being a volunteer, or simply, the extent to which this role and the relationships associated with it become part of a person's self or identity (Penner 2002). Grube and Piliavin (2000) report that research on volunteerism using role identity theory has explored how commitment to pro-social identities develops and leads to pro-social actions. A particular role identity is shaped by the expectations of others who interact with the person in the context of that role, and the self-attributions that result from the person's consistently engaging in behaviours associated with that role (Grube & Piliavin

2000). Carpenter and Knowles Myers (2010) suggest that pro-social behaviour is determined by a combination of altruism, image concerns and extrinsic motivations. However, Penner (2002) posits that a person's experience during the initial volunteerism, together with a high and consistent volunteer activity, will likely shape and produce a strong volunteer role identity over time, which results in sustained volunteerism.

Finkelstein (2009) adopted a conceptual perspective that integrates two theories of long-term helping, namely functional analysis and identity theory. Functional analysis holds that people continue volunteering to the extent that their experiences fulfil relevant motives, while role identity theory speaks to the strength and attributes of volunteer identity that have been shown to correlate with their donations of time and money. Other-oriented empathy and helpfulness were correlated with time spent volunteering and length of service in a variety of organisations.

Organisational and community contexts and longevity in volunteerism

The theoretical and empirical literature suggests that the following may be significantly associated with the volunteer experience and time spent as a volunteer: (1) an individual member's perceptions and feelings about the way he or she is treated by the organisation and (2) the organisation's reputation and approach to conducting its activities (Davis, Hall & Meyer 2001; Grube & Piliavin 2000; Lee & Chang 2007; Omoto & Snyder 1995; Penner 2002; Penner & Finkelstein 1998). Organisational factors related to the approach to screening, induction, training, supervision and recognition (symbolic rewards) have been highlighted, mainly through the provision of career-enhancement opportunities, respect shown to volunteers and opportunities for engagement with meaningful work (Cnaan & Cascio 1999; Crook et al 2006; McSweeney & Alexander 1996; Omoto & Snyder 1995; Texas Commission on Volunteerism and Community Service 1998).

Furthermore, recognition and support from the host community provides an integral backdrop for individuals and organisations to undertake volunteer activities that may promote social change and contribute to societal cooperation and civic participation (Lee & Chang 2007; Omoto, Snyder & Morrino 2000). Volunteerism also thrives within environments with high social and human capital, as well as healthy social networks characterised by strong social norms (Lipford & Yandle 2009; Matsuba, Hart & Atkins 2007; Putnam 2007; Rupasingha, Goetze & Freshwater 2006). People are also more likely to donate their time if they are able to identify with prospective recipient activities, including the discernable benefits the recipient receives (Lipford & Yandle 2009).

Jenkins (2009a) claims that a salient feature of volunteerism and its longevity and sustainability in Latin America is that it has been dominated by women's strong affiliation and commitment to the voluntary provision of welfare in poor communities whose health needs have seldom been met adequately. However, whether the participation of women within this context of health service provision can be considered 'truly' voluntary requires scrutiny. The impact of poverty, inequality and deprivation on the dynamics of volunteerism remain poorly understood.

THE STRAND VOLUNTEER SAFETY-PROMOTION PROJECT

The study is located in Broadlands Park and Nomzamo, which are adjacent low-income communities in the Strand in the Western Cape, South Africa. The local leadership identified the increasing incidence of injury and violence in their respective neighbourhoods and highlighted the absence of safety-promotion programmes, as well as the professional expertise and assistance of other organisations to implement these. The local leadership, in consultation with a university research agency active in the area, initiated a safety-promotion intervention and research project in these communities. The safety-promotion project utilised local volunteers to implement safety interventions. The volunteers received the training and skills required to address various safety- and health-promotion issues. The focus of the project was on enhancing the capacity of women to promote safety and health through the provision of leadership and safety-promotion training, the facilitation of

environmental modification campaigns, the implementation of community safety monitoring structures, and advocacy and lobbying for safety issues and other social and health concerns. Training included safety strategies, conflict resolution and management, basic first aid and HIV/AIDS management.

Community profiles

Broadlands Park is a community that comprises low-cost government housing. At the time of the study, in 2005, it had been in existence for 7 years, with the community previously having been located in nearby informal settlements and back-yard shacks. Broadlands Park is approximately 50 km to the east of Cape Town, with approximately 10 000 residents, and is a predominantly coloured¹ and Afrikaans-speaking community. The community at the time had minimal infrastructure and was concerned about unemployment, drug and alcohol abuse and other psychosocial challenges.

Nomzamo, which in Xhosa means to "rise up" or "awaken", is an informal settlement adjacent to Broadlands Park. At the time of the study, it was gradually being transformed into a low-cost government housing neighbourhood. It is predominantly a Xhosa-speaking community with about 20 000 inhabitants and had been in existence for about 9 years at the time of the study. The community had some infrastructure, a clinic, two primary schools and one secondary school, a community hall, some tarred roads with lighting, water and sanitation, and a recently built small business centre. In 1998, a high prevalence of both intentional and unintentional injuries had been reported (Van Niekerk et al 2000).

METHODOLOGY

This study utilised a qualitative approach. Data was collected via a questionnaire and focus group discussions (FGD), with the written responses to the questionnaires and FGD transcriptions thematically analysed.

Instruments

the questionnaire was developed on the basis of the relevant literature and discussions with safety volunteers and stakeholders involved in these communities. Questionnaires were self-administered as volunteers were not always available to be interviewed in person; it was felt that this arrangement was more convenient for them, since they could complete the questionnaire at a time and place of their choosing. This particular format is also protective of anonymity. The questionnaire consisted of a combination of open-ended and focused questions and focused on the reasons for volunteering, experiences of volunteering within a disadvantaged context, lessons learnt from volunteering, impact of volunteerism on the volunteer's life, and factors affecting the sustainability of volunteerism, including the contribution of the university agency. Questionnaires were hand-delivered to the 35 volunteers active at that time in the two communities, and they were collected two weeks later. A similar questionnaire, with a specific focus on the agency or institutional contribution to volunteerism, was sent to the 5 project staff to elicit their comments. In total, 28 volunteers responded, 20 from Nomzamo and 8 from Broadlands Park, as well as 4 project staff. The predominance of Nomzamo respondents reflects the size of the volunteer groups in the two communities, which also reflects the relative sizes of the two communities. All the questionnaires were answered in English, the primary or secondary language of most participants.

The FGDs were held with each of the two safety teams a month after the questionnaires were returned. Invitations

1 In South Africa, the terms "African", "coloured" (referring to mixed heritage) and "white" refer to various population groups. The use of these terms is, however, contentious and does not imply acceptance of the racist assumptions on which these labels are based. It is recognised that these categories are a social construction that has served particular political purposes. It is not implied that such categories have any anthropological or scientific basis. The terms are, however, used to reflect the differential manner in which the earlier South African policies of racial segregation, or apartheid, had impacted on the lives of various groups of South Africans, and still do.

were sent to the volunteers who were active in the safety-promotion project. Not all the volunteers could participate in the FGDs on the recommended dates because of either personal or other circumstances. Some of the participants who responded to the invitation and engaged in the FGD from the Broadlands Park community also had previous experience in community development. Participants who engaged in the FGDs were selected on the basis of their availability. The groups comprised 15 participants from Nomzamo and 8 from Broadlands Park, and they provided a complementary forum for verifying and elaborating on volunteers' insights into the issues identified via the questionnaire, as well as for exploring and gathering additional views on volunteerism.

Participants

the volunteers who responded comprised 26 females and 2 males, with an average age of 33 and 23 years respectively. Most of the volunteers were unemployed, bilingual or multilingual and had a minimum of 8 years of formal education. The majority of volunteers had not had volunteer experience outside of the safety-promotion project and had participated in the project for at least a year. Four of the 5 university project staff responded – 2 males and 2 females. They had an average age of 29 years and between 2 and 15 years' research or intervention experience.

Data collection procedures

the volunteers and the university agency's staff members were briefed on the purpose and significance of the study prior to the administration of the questionnaires. Consent was obtained from volunteers and staff members, and anonymity and confidentiality of these responses were discussed. The participants were invited to be frank and detailed in their responses and were requested to respond in the language of their choice; it was thus hoped that these responses would contribute to the further development of the volunteer safety-promotion project. Volunteers and staff members were given two weeks to complete the questionnaires. The questionnaires were collected from the volunteers, and staff members returned their responses via electronic mail. Process notes and observations were also documented by the authors during the supervision of the programme; these were used, where appropriate, to verify information and responses from the volunteers.

The purpose of the FGDs was explained to the participants, including the privacy and anonymity of transcriptions of their responses. The discussions were conducted in English, in an informal environment, and were audio-recorded, after permission was granted. The discussions, which lasted approximately 60 minutes, ended once the facilitator felt satisfied with the responses. Additional observations and notes and tracking of participant interaction were also documented to complement the audio-recording.

Data analysis

the interpretive approach to data collection and analysis, as described by Terre Blanche and Durrheim (1999), provided analytical guidelines for reviewing the responses of volunteers and staff members. The data included the written responses to the questionnaires and the verbatim transcripts of the two FGDs. The process of analysis comprised five steps. Step 1 involved collating the written responses received from volunteers and staff members and transcribing the FGDs. Step 2 involved repeated readings of the responses and transcripts to develop familiarity with the content and delineate emergent themes. Step 3 consisted of aggregating similar responses and inserting these under appropriately formulated themes. In step 4, further analysis of the aggregated responses under the themes led to a refinement of the themes and/or moving some responses to more appropriate themes. In step 5, each theme was interpreted in relation to the context in which the volunteer safety-promotion programme operated. These themes are presented and discussed in the following section of this paper.

The author and co-author verified the appropriateness and applicability of the themes used in the analysis. Discrepancies were discussed and then consensus was achieved between the authors on existing and emerging themes.

RESEARCH FINDINGS AND ANALYSIS

A thematic analysis of the relevant findings, emerging first from the questionnaire and then elaborated upon in the focus group discussions, is presented to provide an overall understanding of the experiences and the psychosocial and contextual challenges of volunteers engaged in implementing a safety- and health-promotion project in a low-income setting.

Understandings of volunteerism and motivations

volunteers and staff articulated a similar core understanding of volunteerism, namely working without remuneration; this concurs with the understandings generally reported in the literature (Penner 2000; Thoits & Hewitt 2001; Wilson & Musick 1997). Both volunteers and staff indicated that volunteerism was highly relevant in under-resourced settings, with one staff member reporting that “[volunteer] organisations can provide assistance and augment existing social services in under resourced communities”.

The motivations for volunteerism reported in this study included those directed at individual needs and providing distinct individual benefits, such as “to understand and gain knowledge”, “to improve my life”, “to relieve stress”, and “to enjoy working with people”. Other motivations included those with social or altruistic benefits, such as “to fight crime” and to “help and [for] love for the community”. Both volunteers from Nomzamo and Broadlands Park and project staff emphasised the social or altruistic reasons for volunteerism, which highlighted time and effort spent in pursuing dynamic pro-social actions and behaviours that promoted the betterment of the self and the community in general (Penner 2002; Thoits & Hewitt 2001; Wilson & Musick 1997).

Volunteer expectations and reflections within the community context

the volunteers articulated their expectations of volunteerism, which overlapped with the identified individual and altruistic motivations for volunteering. There were numerous expectations, including “to increase and improve our knowledge and skills”, “to empower ourselves and the community”, “to be acknowledged and recognised”, “to become a trainer”, and “the possibility of getting employment”. The volunteers reflected on their experiences in the Strand project and indicated that the experience had “allowed us to make a difference in our own lives and the community”, “by participating in workshops and developing communication skills” and by “preventing and protecting [the] community from HIV/AIDS, accidents and child abuse”, thus allowing them to “work with people from different cultures”, be “self-sufficient” and “to be united [as a group], tolerant and understanding”.

These reflections, across both groups, resonate with those reported in other studies. This indicates that people – especially those engaged in consistent volunteer activity – may experience their personal identity while embracing the role of a volunteer. This, in turn, often results in a further increase in other-oriented motivations and a decrease in self-oriented ones. This greater integration of a volunteer role identity is considered the most potent direct cause of sustained volunteerism (Grube & Piliavin 2000; Penner 2000).

Volunteers are an important resource for engaging with the community (Newell, Baral & Byanjkar 2007). In this and other studies, the recognition and support from the community provides an integral backdrop for individuals and organisations to undertake volunteer activities to promote social change and contribute to societal cooperation and civic participation (Jenkins 2009a; 2010; Lee & Chang 2007; Lipford & Yandle 2009; Omoto, Snyder & Morrinio 2000; Putnam 2007; Rupasingha et al 2006; Ziemek 2006).

Organisational management

organisational variables influence volunteer behaviour and are considered significant in the maintenance of volunteerism (Davis, Hall & Meyer 2001; Grube & Piliavin 2000; Omoto & Snyder 1995; Penner & Finkelstein 1998). Both an individual member's perceptions and feelings about the way he or she is treated by the organisation and the organisation's reputation, ethos, commitment and prestige are significantly associated with length of tenure as a volunteer.

In this study, the following important organisation variables were identified by the volunteers: "a screening process", a need for "clear rules of volunteering", and "signing of a contract and commitment to that contract". Staff highlighted that "both the organisation and volunteer teams need to be aware of each other's expectations". The volunteers in this project had taken the initiative and formulated a code of conduct to create an ethos of supportiveness, accountability and self-appraisal of their safety- and health-promotion activities. All organisational formalities (weekly meetings, planning and decisions) were conducted in a respectable and democratic manner. These volunteer organisational processes concur with Penner (2000), who states that "if volunteers are satisfied with their work, committed to the organisation, experience a positive affect while on the job, and believe they are partially treated, they invariably should display a higher level of volunteer activity" (p 459). Chacon and colleagues (1998) also report that integration in the organisation and feelings of satisfaction are both highly correlated with volunteers' expectations of continuing in the organisation and are taken as a predictor of a volunteer's duration of service.

Challenges

a number of concerns were raised, in varying degrees, by the Nomzamo and Broadlands Park teams. These included a "lack of seriousness and purpose among certain members", "punctuality", "not respecting the code of conduct", "not communicating and agreeing on certain decisions adopted" and "gossiping when someone does good work". Project staff identified "attrition and having financial expectations" and "group dynamics and decay", which could be anticipated in the long term.

These challenges address diverse issues, such as divergent individual personalities and approaches and organisational dynamics, with some volunteers experiencing feelings of a lack of appreciation, acknowledgement and support from community stakeholders. Other challenges raised were the stress of working in a socioeconomically disadvantaged context with a high and persistent incidence of injuries and violence.

These adversities can undermine continued volunteer participation (McSweeney & Alexander 1996) and affect the sustainability of safety-promotion projects. The volunteers' experiences during the implementation of the project generated specific concerns regarding aspects of continuity and sustainability of the current and future safety-promotion initiatives. The following section elaborates on this point.

Sustainability: Enhancing human, social and intellectual capital

Volunteers expressed enthusiasm, confidence and determination to continue engaging in safety-promotion activities, even though they were unemployed. They claimed that "the program improved our lives", "increased our self esteem" and "created awareness and increased our knowledge". They expressed dismay at the possibility of the project stopping, because "they would be at home doing nothing", or "perhaps selling snacks to make some money and studying part-time". The volunteers were committed to their teams and valued "working together as a team", "to promote safety and health until violence stops", "to continue to meet and share concerns and problems", to "disseminate their skills to the community" and to "communicate and have more workshops". However, one volunteer from the Nomzamo team stated: "I will stop volunteer work as soon as the project stops", while another said: "I will stop once I get a job", thus highlighting an ever-present concern about the limited employment opportunities in these settings.

One contentious issue is the financial remuneration of volunteers. Many initiatives provide only small stipends or non-monetary incentives, such as cycles, free health care or future job opportunities, although others provide salaries, as in the case of many community health worker programmes (Glenton et al 2010). However, two recent guidelines from the World Health Organization (WHO) regard payment as necessary for the long-term sustainability of community health worker programmes (World Health Organization 2007; World Health Organization and Global Health Workforce Alliance 2008). The WHO acknowledges the contribution of short-term or part-time volunteers, but states that trained health workers who are providing essential health services, including community health workers and safety volunteers, should receive adequate wages or other appropriate and commensurate incentives (World Health Organization and Global Health Workforce Alliance 2008). They indicate that there is virtually no evidence that volunteerism can be sustained for long periods and that stipends, travel allowances and other non-financial incentives are not enough to ensure the livelihood of volunteers; moreover, the absence of adequate wages will threaten the effectiveness and long-term sustainability of the affected programmes (World Health Organization and Global Health Workforce Alliance 2008).

This study highlighted the critical importance of clear lines of communication and mutual collaboration between the volunteers and external agencies, such as the university agency that was involved in this project. Issues such as the implementation complexities around safety-intervention research, limited funding and resources, and individual and organisational expectations were identified by both volunteers and staff.

Staff and volunteers indicated that despite the nature of these challenges, discussions on the latter engendered trust and programme efficacy. Volunteers mentioned how important it was "to be acknowledged and recognised", and staff indicated the importance of communicating "recognition of their [volunteers'] efforts and contribution". Previous case studies have revealed that tensions are possible when mutual expectations are not lucid and communicated (Swart et al 2004).

CONCLUSION

In communities where a formalised injury-prevention and safety infrastructure is absent or underdeveloped, and where professional expertise and resources are scarce or absent, employing community members to serve as volunteers may be integral to ensuring the required injury-prevention responses (Swart et al 2003). This study highlights volunteers' experiences in developing a volunteer identity and enhancing their social, human and intellectual capital in collaboration with a university agency's implementation of a safety-promotion project. These reflections concur with studies depicting volunteerism as both a source and a reflection of social capital that is vital in nurturing a community's social networks, participation, advocacy and development efforts, particular within a context of poverty (United Nations Economic and Social Council 2001).

Numerous organisations depend on volunteers as a cost-effective way of implementing and extending their services to vulnerable groups and communities. Aside from the indirect financial investment, volunteers add significant value in that they are often indigenous, accessible, responsive and proactive in terms of their communities' safety and development concerns. Local volunteers have special insights into the community they serve, increase the likelihood that interventions will be relevant, sensitive, appropriate and credible, and thus add quality to the services provided or not available.

In the future, sustainable volunteer-based safety-promotion programmes should focus on capacity building that promotes volunteer financial autonomy and organisational governance and management (e.g. communications, proposal writing and fundraising). Volunteers need to establish clearly defined roles and expectations among themselves and within partner programmes; protocols or codes of conduct could also ensure that these are explicit. Ensuring strategic buy-in from relevant stakeholders from the outset of the safety-promotion programme and encouraging local government and

businesses to provide incentives – such as educational bursaries and support for volunteers and their children, free health care, enrolment in various training and learnership programmes, and creating opportunities for employment and redeployment of skills in communities – may help to strengthen and sustain volunteer community safety-promotion initiatives in under-resourced contexts.

One contentious issue is the financial remuneration of volunteers. Many initiatives provide small stipends or non-monetary incentives (Glenton et al 2010). However, two recent guidelines from the World Health Organization regard payment as necessary for the long-term sustainability of such programmes (World Health Organization 2007; World Health Organization and Global Health Workforce Alliance 2008).

This study sought to further an understanding of safety volunteerism in an under-resourced setting. Further research should seek to reconceptualise debates around health and safety volunteerism as relevant and encompassing much broader and diverse spaces and people in a wide range of global South contexts, as opposed to predominantly Western notions of what it means to volunteer (Sheradden, Stringham, Sow & McBride 2006; Jenkins 2010). This includes a gendered understanding of volunteerism. The strong historical association between women and caring responsibilities in many cultures, as well as the emphasis on their long-term engagement in volunteerism, often goes unrecognised and provides an indication of the disproportionate burden of health and safety care assumed by women in poor communities.

Volunteers evidently have a role to play in communities and can effect change as advocates of safety and health promotion. Safety volunteerism is therefore a socially important concern that demands more thorough interrogation and attention, particularly in the South African context.

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REFERENCES

- Adebanwi, W. (2005). Government-led service: The example of the Nigerian Technical Aids Corps. *Voluntary Action*, 7(2), 57–68.
- Aguiling Dalisay, G. (2005). International Volunteer Service: A proposed twin programme in the cycle of national volunteering in the Philippines, *Voluntary Action*, 7(2), 69–86.
- Butchart, A, Kruger, J & Lekoba, R. (2000). Perceptions of injury causes and solutions in a Johannesburg township: Implications for prevention. *Social Science and Medicine*, 50, 331–344.
- Carpenter, J & Knowles Myers, C. (2010). Why volunteer? Evidence on the role of altruism, image and incentives. *Journal of Public Economics*, 94, 911–920.
- Chacon, F, Menard, M, Sans, M & Vecina, ML. (1998). Psychological factors that influence volunteer work: A pilot study. *Psychology in Spain*, 2(1), 108–115.
- Clary, EG, Snyder, M, Ridge, RD, Copeland, J, Stukas, AA, Haugen, J & Miene, P. (1998). Understanding and assessing the motivations of volunteers: A functional approach. *Journal of Personality and Social Psychology*, 74(6), 1516–1530.
- Cnaan, RA & Cascio, TA. (1999). Performance and commitment: Issues in management of volunteers in human service organizations. *Journal of Social Service Research*, 24(3/4), 1–37.

- Crook, J, Wei, R, Willems, D & Egdorf, T. (2006). Experiences and benefits of volunteering in a community AIDS organization. *Journal of the Association of Nurses in Aids Care*, 17(4), 39–45.
- Davis, MH, Hall, JA & Meyer, M. (2001). The first year: Influences on the satisfaction, involvement, and persistence of new community volunteers. *Personality and Social Psychology Bulletin*, 29(2), 248–260.
- Dingle, A, Sokolowski, W, Saxon-Harrold, SKE, Smith, JD & Leigh, R. (eds). (2001). *Measuring volunteering: A practical toolkit*. Retrieved December 21, 2001, from <http://www.independentsector.org/programs/research/toolkit/IYVToolkit.pdf>.
- Finkelstein, MA. (2009). Intrinsic vs extrinsic motivational orientations and the volunteer process. *Personality and Individual Differences*, 46, 653–658.
- Fuertes, FC & Jimenez, ML. (2000). Motivation and burnout in volunteerism. *Psychology in Spain*, 4(1), 75–81.
- Glenton, C, Scheel, IB, Pradhan, S, Lewin, S, Hodgins, S & Shrestha, V. (2010). The female community health volunteer programme in Nepal: Decision makers' perceptions of volunteerism, payment and other incentives. *Social, Science and Medicine*, 70(12), 1920–1927.
- Grube, JA & Piliavin, JA. (2000). Role identity, organizational experiences, and volunteer performance. *Personality and Social Psychology Bulletin*, 26(9), 1108–1119.
- Hassim, S. (2004). Voices, hierarchies and spaces: Reconfiguring the women's movement in democratic South Africa. Political Studies, University of the Witwatersrand. Retrieved June 18, 2012, from <http://ccs.ukzn.ac.za/files/hassim>.
- Jenkins, K. (2009a). Everyday experts and their 'place' in development knowledges. Paper presented at 2009 Annual Conference of the Royal Geographical Society, Institute of British Geographers, Manchester, 26–28 August.
- Jenkins, K. (2009b). We have a lot of goodwill, but we still need to eat ..., valuing women's long term voluntarism in community development in Lima. *Voluntas*, 20(1), 15–34.
- Jenkins, K. (2010). Peruvian community health promoters: Expanding the spaces of health voluntarism. *Health and Place*, 17, 17–23.
- Klaasen, KS. (2002). What motivates lay volunteers in high-burden but resource-limited tuberculosis control programmes? Perceptions from the Northern Cape province, South Africa. *International Journal of Tuberculosis Lung Disease*, 6(2), 104–110.
- Lipford, J & Yandle, B. (2009). The determinants of purposeful voluntarism. *The Journal of Socio-Economics*, 38, 72–79.
- Matsuba, MK, Hart, D & Atkins, R. (2007). Psychological and social-structural influences on commitment to volunteering. *Journal of Research in Personality*, 41, 889–907.
- Mayosi, B, Lawn, J, Van Niekerk, A, Bradshaw, D, Karim, S & Coovadia, H. (2012). Health in South Africa: Changes and challenges since 2009. *Lancet*, 380(9857), 1881–1966.
- McSweeney, P & Alexander, D. (1996). *Managing volunteers effectively*. Aldershot: Ashgate Publishing.
- Newell, TC, Baral, JN & Byanjkar, SC. (2007). The contribution of volunteers to a successful community-oriented tuberculosis treatment centre in an urban setting in Nepal: A qualitative assessment of volunteers' role and motivations. *Journal of Health Organization and Management*, 21(6), 554–572.

- Norman, R, Matzopoulos, R, Groenewald, P & Bradshaw, D. (2007). *The high burden of injuries in South Africa. Bulletin of the World Health Organization*, 85(9), 649–732.
- Oesterle, SO, Johnson, MK & Mortimer, JT. (2004). Volunteerism during the transition into adulthood: A life course perspective. *Social Forces*, 82(3), 1123–1149.
- Omoto, AM & Snyder, M. (1995). Sustained helping without obligation: Motivation, longevity of service, and perceived attitude change among AIDS volunteers. *Journal of Personality and Social Psychology*, 68(4), 671–686.
- Omoto, AM, Snyder, M & Morrino, SC. (2000). Volunteerism and the life course: Investigating age-related agendas for action. *Basic and Applied Social Psychology*, 22(3), 181–197.
- Peden, MM & Butchart, A. (1999). Trauma and injury. In N Crisp & A Ntuli (eds), *South African Health Review 1999* (pp 331–344). Durban: Health Systems Trust.
- Penner, LA. (2000). Promoting pro-social actions: The importance of culture and values. *Journal of Social Philosophy*, 31, 477–487.
- Penner, LA. (2002). Dispositional and organisational influences on sustained volunteerism: *An interactionist perspective. Journal of Social Issues*, 58(3), 447–467.
- Penner, LA & Finkelstein, MA. (1998). Dispositional and structural determinants of volunteerism. *Journal of Personality and Social Psychology*, 74, 525–537.
- Putnam, RD. (2007). E Pluribus Unum: Diversity and community in the twenty-first century. *Scandinavian Political Studies*, 30, 137–174.
- Rupasingha, A, Goetze, SJ & Freshwater, D. (2006). The production of social capital in U.S. countries. *Journal of Socio-Economics*, 35, 83–101.
- Seedat, M, Van Niekerk, A, Jewkes, R, Suffla, S & Ratele, K. (2009). Violence and injuries in South Africa: Prioritising an agenda for prevention. *Lancet*, 374, 68–79.
- Serow, RC. (1990). Volunteering and values: An analysis of students' participation in community service. *Journal of Research and Development in Education*, 23(4), 198–203.
- Sheradden, MS, Stringham, J, Sow, SC & McBride, AM. (2006). The forms and structure of international voluntary service. *Voluntas: International Journal of Voluntary and Non-Profit Organizations*, 17, 163–180.
- Swart, L, Seedat, M & Sader, F. (2004). Community volunteerism in safety promotion: Implications for sustainability in a low-income context. *African Safety Promotion: A Journal of Injury and Violence Prevention*, 2(1), 1–15.
- Swart, TM & Franji, EV. (2003). Identity dynamics and the politics of self-definition. In K Ratele & N Duncan (eds), *Social psychology. Identities and relationships* (pp 148–173). Cape Town: University of Cape Town Press.
- Terre Blanche, M & Durrheim, K. (1999). *Research in practice: Applied methods for social sciences*. Cape Town: University of Cape Town Press.
- Texas Commission on Volunteerism and Community Service (1998). *Volunteer recruitment: Tips in the field*. Retrieved October 10, 2010, from <http://www.txserve.org/mgmt/volrec/>.

- Thoits, PA & Hewitt, LW. (2001). Volunteer work and well being. *Journal of Health and Social Behavior*, 42(2), 115–131.
- Uggen, C & Janikula, J. (1999). Volunteerism and arrest in the transition to adulthood. *Social Forces*, 78(1), 331–362.
- United Nations Economic and Social Council. (2001). Commission of Social Development (39th session). *Enhancing Social Protection and Reducing Vulnerability in a Globalizing World, 13–23 February 2001*. Retrieved October 10, 2010, from http://dynamic.unv.org/infobase/articles/2001/01_02_12USA_csd.pdf.
- Van Niekerk, A, Bulbulia, S & Seedat, M. (2000). An epidemiological investigation of injury in a Western Cape neighbourhood study. *University of South Africa, Institute for Social and Health Sciences Monograph Series*, 1(4), 79–128.
- Wilson, J & Musick, M. (1997). Who cares? Towards an integrated theory of volunteer work. *American Sociological Review*, 62, 694–713.
- World Health Organization (2002). *Injury; A leading cause of the global burden of disease*. Geneva.
- World Health Organization, (2007). Health Systems and Services (HSS). *Treat, train, retain: Task shifting – global recommendations and guidelines*. Retrieved October 10, 2010, from <http://www.wh.int/healthsystems/taskshifting/en>.
- World Health Organization and Global Health Workforce Alliance (2008). Task Force for Scaling Up Education and Training for Health Workers. *Scaling up, saving lives*. Geneva.
- Younnis, J, McLellan, JA & Yates, MY. (1997). What we know about engendering civic identity. *American Behavioral Scientist*, 40(5), 620–631.
- Zakour, MJ. (1994). Measuring career-development volunteerism: Guttman Scale analysis using Red Cross volunteers. *Journal of Social Service Research*, 19(3), 103–120.
- Zimek, S. (2006). Economic analysis of volunteers' motivations: A cross-country study. *The Journal of Socio-Economics*, 35, 532–555.