Volunteer Services Coordinators in the Seventies

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(Editor-generated) Abstract
The author describes the status of the emerging “Coordinator of Volunteers” (volunteer resource management) vocation (profession) in the United States in the decade of the 1970's as related to five job skills areas she perceives as critical to the profession: 1. human relations skills, 2. management skills, 3. professional development skills, 4. volunteer training skills, and 5. consultant skills.

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profession, volunteer resource management, volunteer manager

Not only the Volunteer Services Coordinators, but every person is going to have to learn new attitudes, skills and knowledge to live successfully in the rapidly changing world of the 70's.

Most of us who are over thirty grew up in a fairly homogeneous society. We lived and associated through our early years with people much like ourselves. Communities and neighborhoods were fairly stable. Our neighbors and friends were usually of our own racial, social, economic and religious background. If we were black, we probably knew few, if any, white people. If we were white, we probably did not have black friends. Even protestants and catholics mingled chiefly with their own religious groups. There wasn't much overt hostility, because there was so little contact.

Today we are seeing great hostility between racial, economic and ethnic groups. (I like to think that the ecumenical movement of recent decades has lessened religious antagonisms—although they still appear in unexpected places.) The tensions arise because we are in the period of transition to a pluralistic society. We will gradually begin to discover that differences between people are enriching. They make life far more interesting. Groups of men and women are more stimulating than women's groups or men's groups. A few young people in a traditionally adult activity can add great excitement to any activity.

As we learn to appreciate diversity, hopefully we will stop putting people in pigeon-holes or stereotypes. We may begin to realize that every individual is unique and important. This will have an effect on our attitudes toward—and our handling of—both volunteers and those they serve—in your case the mentally handicapped. With the volunteers—we will not limit ourselves to one group of people. If we have had mainly middle-aged, middle-class housewives as volunteers, we may find the supply drying up. But volunteers cannot be stereotyped as "middle-aged, middle-class housewives." Increasingly, retired people, businessmen and women, young people, poor people are volunteering. Are you finding your share of such people?

Very often these "non-typical" volunteers can make better contact with
patients—many of whom relate to them more readily than to the "typical" volunteer (if there is any such animal!)

It is largely your attitude toward and about volunteers which will determine whether or not you recruit and welcome those who are different. How do you feel about differences? Do you see them as enriching, or as potential sources of conflict and trouble? How comfortable are you in working with people very different from yourself?

Another difference in the volunteers of the 70's may well be their motivations. We used to assume that people volunteered for purely altruistic reasons—simply to help the less fortunate. This is, of course, a part of the motivation of most volunteers. But today, where such things as mental handicaps are openly acknowledged, you may get volunteers who have a mentally handicapped family member, and who volunteer in order to learn more about the mentally disabled. Or you may get volunteers who are testing a possible career. Or you may find students looking for data or research possibilities. We are increasingly realistic about motivations today, and need to admit that most volunteers expect and receive some satisfaction from their volunteer work. You and I need to be careful about possible "judgmental" attitudes toward motivation.

And our attitudes toward the patients or clients can have a great influence on the volunteers. Do we lump all the mentally handicapped together and treat them as "things"? Or do we recognize the fact that they differ as much as so-called "normal" people—and so treat each one as an individual? Especially in a hospital or institutional setting, this individual concern can be a powerful therapy.

If attitudes are so important, what can we do about them? We must not assume that attitudes cannot be changed, because they can! Human relations training has developed effective change. It cannot be accomplished by telling people what their attitudes should be. But involvement techniques—role playing, case studies, well designed audio-visual aids—can do it. Have you had such training? Do you include it in your training of volunteers? There are skilled human relations trainers in every area of the country. Use them.

As we all acquire new attitudes which are appropriate to the 1970's, we will begin to want new skills. This great new vocation of "Coordinator of Volunteers" which you are pioneering can make use of a wide range of skills. Don't feel that one course, or even one series of courses, will teach you all you need to know. One of the best features of our modern society is the growing emphasis on continuing education. Just as teachers, doctors, lawyers and other professionals go back to school every few years, you and I need to plan this into our careers. I'll list a few skills that you need now. By 1975, the list may be very different.

1. As I have already suggested, you need human relations skills above all else, because your job is human relations. The NTL Institute, for which I work, is the pioneer in modern human relations training and runs a nationwide program of basic human relations laboratories every year. But many colleges and universities and a wide range of other organizations and institutes also offer such training. I only urge you to be careful in checking the training and credentials of those who offer it, because—like any field—this one has its "quacks."

2. You need some good management skills—ability to plan, to delegate responsibility, to make decisions, to evaluate your own and others' performance. Management training is offered in many settings. Check with some of your local business firms, as well as colleges and universities. Our Center for a Voluntary
Society is planning management training for executives of voluntary organizations and for coordinators of volunteers and will be glad to keep you informed of such opportunities.

3. Your own association, through the American Psychiatric Association, should be planning seminars and workshops to keep you up to date on the latest developments in the field of mental illness and its treatment. New discoveries are being made every day, and you can do your job far better if you have a current knowledge of the field.

4. You need skill in designing and conducting training courses. Here again, the NTL Institute, our Center, many universities offer "Training of Trainers" programs which will teach you how to design and conduct effective training. Too many of us tend to repeat the patterns of training which we received, when there are endless innovations which could help us enormously.

5. You need skills as a consultant, because this is a role which you probably play more often than you realize. You often act as a consultant to a volunteer who comes for a first interview, or an experienced volunteer with a problem. If you improve your consulting skills, you may be helpful to staff members who have problems with volunteers, or to organizations who supply volunteers.

The new knowledge which you are going to need as we move through the decade of the 1970's is implied in many of the things I have already suggested. Among the changes of our day, the knowledge explosion is one of the greatest. None of us dare be satisfied with what we knew five years ago, or even last year. How to keep up with all the new discoveries and ideas in the field of mental health and the exploding world of volunteering is a real problem. But if we are to do our jobs, we must find a way. Within a hospital or institution, or in a community where there are several Volunteer Service Coordinators, you could very well establish an informal seminar, meeting perhaps once a month. At each meeting one participant could do some special reading, or interview a psychiatrist or researcher, and report on new developments. If you are like me, this is the only way I can make myself keep up with the fields in which I need to be informed.

Back of all this—which may seem formidable—lies the simple question—"What do you think of yourself and of the job you are doing?" If you feel inadequate, frightened and defensive—or if you wish you were doing something else—maybe you should! But if you recognize that you are pioneering a new vocation—as a Volunteer Service Coordinator—which by the end of the 1970's may well be recognized as on a par with Social work, medicine and other established fields; and if you recognize that in working in the field of mental health you are in what is probably the most important area of human life today—your pride and joy in what you are doing will impel you to keep learning and growing and changing. More power to you!

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