ASUME

Volunteering in Dementia

environment

Community

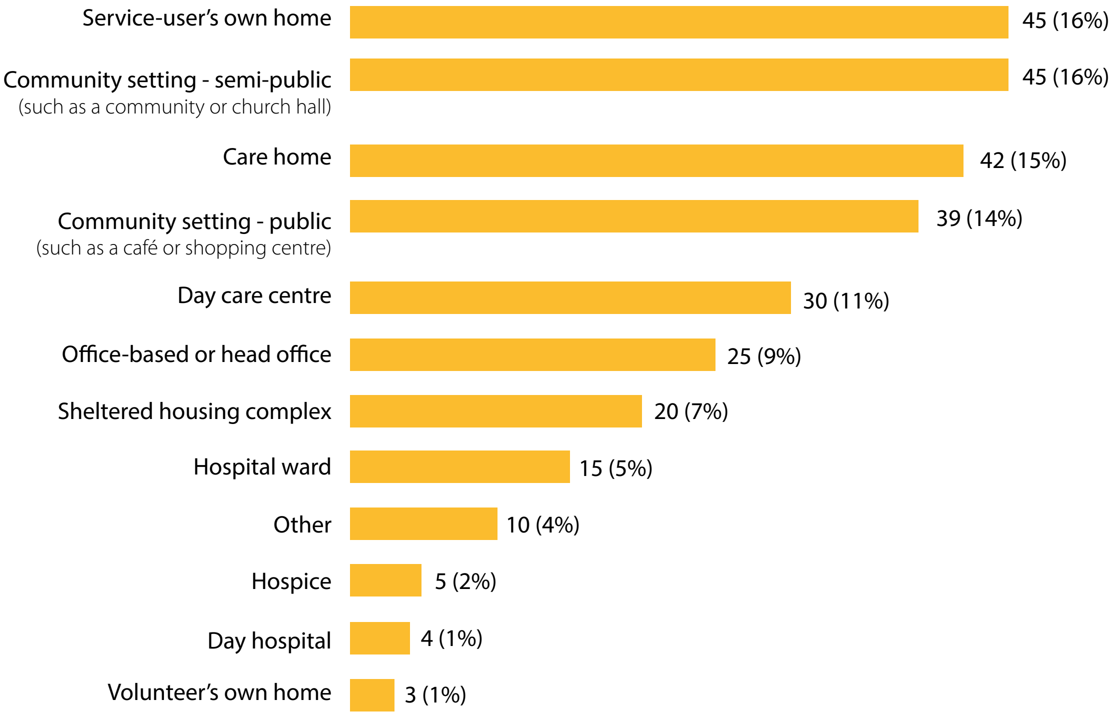
The setting of the volunteering activity was of particular interest to this project due to the literature review outlining this as a clear gap in knowledge. Often a study has taken place in one specific setting, such as a sheltered housing complex or hospital setting. If multiple sites were used, it was unusual for the research to reflect on the impact of the different environments. Only one study we found explicitly covered insights from different environments in regards to both volunteers and dementia.

Therefore, the organisational survey in particular explored the different settings in which volunteering activities took place. This resulted in a range of settings, where home and community settings were the most prevalent.

The organisational survey shows that where volunteering activities take place is very versatile.

The impact of the environment was explored further in the qualitative element of the project, where the idea of the community was particularly

Volunteer activity settings



prevalent. The idea of supporting the 'community' was a linked theme between all the settings where dementia activity took place. There was a clear indication that carers and volunteers were aware of the potential impact their activities made:

> Really that you can make a difference to somebody's life… It's like if you volunteer to do something in the community, you'll make a difference to that community, you know. Yeah. So it's making a difference. I looked forward to the Thursdays. (CVF04, Cumbria)

Previous research around volunteering has been predominantly focused on the individual benefits to the volunteer or the benefits to the individuals they volunteer with. However, our data indicates that volunteers often linked their activities to a much wider role in regards to community. They were not only volunteering for an individual, but it was part of their goal to also make a difference to their community. This was often through the lens of taking 'responsibility' for your own community. The carer in the next quote almost frames volunteering in the community as a call to action, a civil responsibility:

> No it's good and we should all be volunteers I think, we can't depend on the government, you shouldn't rely on the government to do it, it's in here and it's in here really, people should take more on board and do more for their elderly people and…instead of sitting on your backside, blaming everybody else for not doing it, get on with it and just do it yourself, go see the old buddy over the road or the old guy next door, just get on with it and do it. (CCF04, Cumbria).

This 'call to action' was described as a way to tackle isolation in the community. As a way to create a 'safe space'.

> The way that they're perceived by their own elderly community I think is so isolating and so difficult for relatives and carers, that I think to have somewhere like this which is a safe place where people can say what they want and react in a way nobody will find it unusual, is such a nice safe place. I think the community is pretty hard work on people with mental health problems and dementia generally so it was something I wanted to do really. (CVF03, Cumbria)

Volunteers saw themselves as facilitators between the community and those living with dementia and their carers – some of them even promoting the idea that they were a safety net from the stigma and ability to challenge that stigma. Informal volunteers were also explicitly mentioned as a safety net.

Therefore, volunteers sometimes saw themselves as a conduit between the private and public networks of those living with dementia and their carers. This came out particularly clearly in the networking analysis, where volunteers and those living with dementia and carers were mapping their networks.

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