Volunteer Support for Frail Seniors in Their Homes: Needs Assessment Study

United Way of Allegheny County

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Executive Summary

In 2007, 29.3 percent of the residents of Pittsburgh and surrounding areas reported they had provided unpaid work for a community agency at some point in the year. This level of volunteering is higher than the national average of 26.2 percent. Pittsburghers also volunteered more hours per year than the national average, a median of 70 rather than 52. Yet nonprofit agencies in Allegheny County report great difficulty in securing adequate numbers of volunteers to provide services to vulnerable elders.

One reason is the historically high numbers of elderly relative to younger adults, and especially relative to people aged 65-74, who provide the bulk of volunteer services for vulnerable seniors. Even with declines in the proportion of elderly projected over the next decade, we will still see growing numbers of the oldest old. These elderly will be more likely to remain in the community, given new incentives to keep older people out of skilled nursing facilities and increased opportunity to take advantage of community-based supportive housing arrangements.

A second reason is the wide geographic extent of Allegheny County, which makes it hard to match seniors and available volunteers by locality.

Finally, nonprofit agencies have typically recruited volunteers from venues that provide aging services, such as senior centers. This recruitment strategy was effective so long as younger elderly attended these programs. But younger senior cohorts are less likely to attend these venues, and the traditional volunteer pool has aged.

This needs assessment in Allegheny County suggests a current shortfall of nearly a third between the demand for volunteer hours among community-dwelling vulnerable elders and supply. The gap will narrow slightly and then increase over the next 20 years if current conditions prevail. It is driven largely by increasing demand and by reliance on recruiting volunteers from current programs for the elderly. As one agency director put it, “We are heading toward a cliff because these people will not be able to continue for long, and younger people are not stepping up to the plate.” Aging providers have moved toward more effective volunteer management but not enough to address this gap and develop a compelling culture of volunteerism for aging services.

Results from a survey of nonprofit providers of hands-on services to vulnerable elders suggest that the primary use of volunteers is social visiting (68 percent of agencies), followed by transportation, helping with medications, and food preparation/delivery (each 47 percent). Accompanying elders to doctor appointments (42 percent), helping keep homes safe (37 percent), and home maintenance (32 percent) follow. Eighty-five percent of agencies reported that volunteers “are critical” to the agency. These are important functions. The economic value of current volunteer efforts for seniors is impressive, $45.8 million to the Allegheny County economy. Key informants suggest that volunteerism quadruples the output of agency budgets.

Yet agencies report difficulties recruiting, retaining, and using volunteers well:

- More than half the agencies reported they had lost volunteers in the past year.
- Only 20 percent reported that all their volunteer positions were filled.
- A number of agencies reported they were not currently using all available volunteers; 26 percent reported they were unable to match people with a volunteer opportunity or had turned away someone because of a screening requirement or mismatch of skills.
- Only 20 percent consider their volunteer recruitment efforts “very good.”

The needs assessment suggests the following as reasonable targets to close the gap between volunteer demand and supply. These involve efforts to boost the supply of volunteers as well as more effective volunteer management in agencies to aid in recruitment, retention, training, and evaluation of volunteers.

Supply of Volunteers

- Aim to recruit younger, healthy elders (primarily age 50-75 but also in some cases over 75) as volunteers for aging services. These people have the greatest likelihood of volunteering.
  - Strategy: Seek out older adults aged 50-75 in new venues, such as workplaces, lifelong learning programs, other non-aging volunteer pursuits, and community organizations.
- Offer a greater array of volunteer opportunities, for example, museum programs or other ways to involve volunteers with elders outside homes.
  - Strategy: Develop partnerships with arts organizations and other services likely to appeal to volunteers as well as seniors
- Get senior volunteers to involve their families: spouses, children, and grandchildren.
  - Adapt “bring a daughter to work” programs for volunteers: “Bring a family member to volunteer”
- Begin recruiting before retirement; continue workplace volunteer programs through retirement.
  - Strategy: Change the culture of aging services volunteerism, so that it becomes part of a lifestyle of active retirement and civic engagement.
• Develop an evidence base for the productivity of these volunteer efforts to show the benefit to communities and also health and social benefits to volunteers themselves.
  - Strategy: Collect data on volunteer experiences: physical activity, cognitive engagement, satisfaction, social networking

One way to cultivate volunteerism in the longer run is adopt the Experience Corps model for volunteering for vulnerable elders. Elements of the adapted program include a group focus, formal training in aging and health, greater control and latitude in delivering a product, and formal assessment. It could be a citywide or regional program, in which the young-old are placed with different agencies. In this way, it could draw on other resources and develop its own branding and culture. Other promising models include the Civic Ventures Next Chapter program, which explicitly links volunteerism to retirement lifestyles.

Another question for future efforts in Allegheny County is how to increase involvement of younger people in volunteering for vulnerable seniors. The age distribution of Pittsburgh volunteers is actually younger than the national profile (CNSC 2007). Given that 18-65 year old population is not engaged to a high degree with senior programs, and there is a high level of volunteerism in our community, we need to develop strategies and best practices to engage the younger population as well.

Volunteer Recruitment, Retention, and Management

• Seek greater funding for volunteer coordinators in agencies. This would likely attract higher caliber personnel, who would be explicitly tasked with organizing volunteer efforts.
• Standardize and upgrade training for volunteer coordinators. Pittsburgh Cares provides such efforts but outreach to aging services agencies could be expanded.
• Consider developing an enhanced website for volunteer outreach, awareness, and screening, based at United Way. Matching and interviewing would remain at the agency level, but the central website and allied publicity would benefit all agencies and allow leveraging of United Way resources. A standardized volunteer screening form would be valuable.
• Consider developing a volunteer management training certificate. This could be offered at community colleges.
• Consider community-wide “volunteer teaser” opportunities to introduce people to one-to-one volunteering with seniors. A good start would be a one-time delivery of nonperishable foods to seniors' homes at the start of each winter season.
• Accumulate good stories of the volunteer experience for a publicity campaign.
• Consider a study of volunteers themselves to document the benefits to volunteers.

A central target for boosting volunteerism for seniors in Allegheny County should be the home delivered meals program. This program is well-established, has support from the Area Agency on Aging, provides demonstrable value as broader social visiting/health monitoring program, and faces an immediate challenge because of a declining number of volunteers, who themselves are increasingly old. This effort should be prioritized and offers measurable targets for enhanced volunteer effort. Possible short term targets include:

• Increase volunteerism in this area by 10 percent
• Recruit in new venues that yield a younger volunteer pool
• Reallocate delivery of meals to allow greater participation of working volunteers
• Use a one-time delivery of nonperishable items each winter as a central community-wide publicity campaign to expand interest in volunteers
• Consider group volunteering models for adoption of meal packaging and delivery
INTRODUCTION

“Pittsburgh was built on volunteerism and still is. Look at our history of unions, churches and synagogues, and communities. Look how we respond to emergencies, like floods. We have advantages in our ability to partner with corporations and government agencies. Volunteering is a real Pittsburgh thing.”

P. Vingle, Jewish Healthcare Foundation

“My wife – and me too – benefit from a caring community. I don’t know what we would do without this help.”

Meals on Wheels recipient

In 2007, 29.3 percent of the residents of Pittsburgh and surrounding areas reported they had provided unpaid work for a community agency at some point in the year. This level of volunteering is higher than the national average of 26.2 percent (Corporation for National & Community Service [CNCS], 2008a). Pittsburghers also volunteered more hours per year than the national average, a median of 70 rather than 52 (US Bureau of Labor Statistics, 2008). Another measure of involvement is the age of volunteers, which usually is tilted toward people aged 60+. In fact, the age distribution of Pittsburgh volunteers was actually younger than the national profile (CNSC 2007).

Yet nonprofit agencies in Allegheny County report great difficulty in securing adequate numbers of volunteers to provide services to community-resident vulnerable elders. Agency directors report great foreboding that the gap between demands on their services and the supply of volunteers is growing and that as a result they are nearing crisis: “We are heading toward a cliff because these people will not be able to continue for long, and younger people are not stepping up to the plate” (M. Bloomingdale, Lutheran Services). A number of factors seem to be at work that distinguish Pittsburgh from other regions.

First, an historically high proportion of elderly relative to younger adults makes the demand for volunteer services high relative to supply. Even with declines in the proportion of elderly projected over the next decade, we will still see growing numbers of the oldest old. These elderly will be more likely to remain in the community, given new incentives to keep older people out of skilled nursing facilities and increased opportunity to take advantage of community-based supportive housing arrangements.

Second, the great geographic extent of Allegheny County makes it hard to match volunteers to clients even when volunteers are willing and available. Allegheny County is 200 times larger than Philadelphia County, for example, with a correspondingly widely dispersed population (H. Cohen, Senior Corps Companion program).

Third, and perhaps most critically, volunteers for aging services traditionally have been drawn from senior centers. Indeed, in Pittsburgh the mean age of volunteers in home-delivered meals programs, a key element in aging services, is over 70 (J. Barker, Area Agency on Aging). These people started volunteering 10-15 years earlier and have aged. Many are no longer capable of delivering meals, for example, or have had to cut back on hours because of health limitations. This, by itself, would not be a problem if younger cohorts of elders were available to be recruited at these sites. But younger elders are not attending senior center programs to the same extent. The result is an increasingly older and shrinking volunteer pool.

We should not underestimate the demands on volunteer services. One director of a Faith in Action (FIA) program reports that every time she gives a presentation to recruit volunteers, she ends up with new clients (A. Berger, IVC). Nor can we underestimate the significance of volunteers for aging services agencies. In our survey, described below, 85 percent of agency directors reported that volunteers “are critical” to the agency. A perfect storm of increasing demand and declining supply appears to be brewing.

The three factors suggest severe and growing challenges to meeting the needs of vulnerable elders in our community. We undertook this needs assessment to answer the following questions:

(i) What is the current landscape of volunteer activity in nonprofit agencies that provide aging services? How are volunteers recruited and what do they do? How well do agencies engage with volunteers? Is inadequate volunteer management a source of the shortfall in volunteering? To address these questions, we conducted an online survey of major agencies that use volunteers for delivering aging services to vulnerable elders. See Appendix 2 for list of participating agencies.

(ii) How does a critical aging service make use of volunteers? For this question, we examined the Area Agency on Aging [AAA] home delivered meal program in Allegheny County. The AAA-supported program covers perhaps 75 percent of home-delivered meals (including meals served at senior centers) and thus is a key element in the continuum of volunteer efforts for vulnerable elders. The AAA provided key data for this effort and granted multiple interviews.

(iii) How do key stakeholders, such as directors of agencies, county officials, and Foundation officers, view the challenge? Are people who see different aspects of the volunteer challenge basically in agreement on the magnitude of the problem or what should be done? For this effort, we
conducted key informant interviews. See Appendix 1 for list of key informants.

(iv) Finally, what is the likely demand for volunteers by vulnerable elders in Allegheny County, and how will supply and demand change over the next 20 years? Here we reviewed available statistics and developed a model to assess supply and demand in light of changing population structure over the next two decades. We also provide some estimates of the economic value of volunteerism in this sector.

Together, these efforts suggest some strategies that may help close the gap between supply and demand of volunteers. We conclude with suggestions and action steps.

2. Environmental Scan of Volunteer Services for Community-Dwelling Vulnerable Elderly

2.1 Results from Web-Based Agency Survey

In October-November, 2008, we identified 70 nonprofit agencies in Allegheny County that provide in-home services to vulnerable community-dwelling elderly. The list of agencies included United Way partners, vendor agencies from the Allegheny County Area Agency on Aging, all home-delivered meals programs in the county, and all senior centers. We began with a list of over 200 and removed duplicates, defunct agencies, agencies outside the county, and agencies that did not appear to have a direct focus on aging services. Each of the remaining 70 agencies received an email with an invitation to participate in a web-based survey. A copy of the survey is attached (Appendix 4). Each agency was called at least three times, sent reminder emails, and offered the opportunity to complete the survey by telephone or mail.

By early February, 2009, we received replies from 40 of the 70 agencies, about 60 percent. The list of agencies participating is shown in Appendix 2. We received responses from just about all the major providers of community aging services (for example, 15/16 agencies on the Area Agency on Aging list).

Of the 40 agencies, eight did not currently use volunteers and were excluded from this report. Of the remaining 32 agencies, 20 (63 percent) currently use volunteers who have hands-on, one-to-one contact with elders. These are the agencies of primary interest for this needs assessment. In the case of the remaining agencies, volunteers were reported to perform back office tasks, such as fundraising, bookkeeping, and community advocacy, or else only served on advisory boards. The 20 agencies are shown here. Fifteen of the 20 agency staff completing the survey managed volunteers themselves.

Benedictine Center for Seniors
Blind & Vision Rehabilitation Services Brashear Association
Catholic Charities
Catholic Youth Association
Chartiers Community Mental Health
Elder-ado
Family Services of Western Pennsylvania
Lemington Community Services
LifeSpanLutheran Service Society
North Hills Community Outreach
Operation Safety Net
Rebuilding Together Pittsburgh
RSVP of Allegheny County
Senior LAW Center
The Pittsburgh Project
UPMC Living-at-Home Program
Ursuline Senior Services
Vintage

Features of Agencies
- Half the agencies had only a single site.
- The number of full-time employees ranged from one to 110, and part-time employees from 0 to 200.
- The number of clients age 60+ ranged from 15 to 5,000, and for age 80+ from four to 3,500.

Services Provided
- Of 24 aging services, the median number provided by agencies was seven. The most common included information and referral (90 percent), medication management (60 percent), help with entitlements (55 percent), utility support and meals (each 45 percent), and telephone check-in, socialization/travel, and exercise (each 40 percent). The least commonly provided were mental health services (10 percent), home health services (10 percent), and personal emergency services or food pantries (each 15 percent).

Use of Volunteers for Aging Services
- Agencies completed information on seven volunteer activities. The primary use of volunteers involved social visiting (68 percent of agencies), followed by transportation, helping with medications, and food preparation/delivery (each 47 percent). Accompanying elders to physicians (42 percent), helping keep homes safe (37 percent), and home maintenance (32 percent) followed.
- Eighty-five percent of agencies reported that volunteers “are critical” to the agency.

Features of Volunteers
- The majority of volunteers are aged 60+. Sixty percent of the agencies report having volunteers age 60+, while only 30-40 percent report having volunteers younger than this age. In a quarter of the agencies, 80 percent or more of all volunteers were over age 60.
- Women were more likely to volunteer, though differences across agencies were small.
Recruitment of Volunteers

- The median number of volunteers providing direct services to elders in homes in the past 30 days was ten per agency (range 0-700).
- The number of new volunteers per agency in the past year ranged from 0-1,200.
- More than half the agencies reported they had lost volunteers in the past year.
- Only 20 percent reported that all their volunteer positions were filled.
- Three agencies reported they were not currently using all volunteers on their waiting lists, and 26 percent reported they had turned away people who wanted to volunteer because of a screening requirement or mismatch of skills.
- Only 20 percent consider their volunteer recruitment efforts “very good.”

Open-ended comments shed light on the high number reporting unfilled volunteer positions:
- “Many of our meals on wheels kitchens and senior centers need more help, but all of our services operate on weekdays, when most people are working. This will become more of a problem when our current volunteers retire due to old age and illness.”
- “Our volunteer roster operates on a rolling basis; some go away in the winter and come back in the spring. We find it necessary to remain flexible and take volunteers when they are available.”
- “No one wants to volunteer as an ongoing task.”
- “Our volunteer coverage is thin in certain areas of Allegheny County, such as Pittsburgh’s North Side and the Mon Valley communities. The impact of the shortage is that consumers from underserved areas may not be matched with a volunteer.”
- “We can always use more Home Delivered Meal Drivers and runners. The gas prices have really affected this service.”
- “Volunteers we have are elderly themselves. They can only handle one client at a time.”

Likewise, open-ended comments shed light on non-use of some volunteers:
- “We ask our volunteers to define what is convenient for them - where they are willing to go, how often they want to volunteer, etc. Sometimes we have unused volunteers because we have not yet found care receivers whose location and needs match the available volunteer.”

Volunteer Management

- Eighty percent of agencies reported they have someone serve as a manager or coordinator of volunteers, and 50 percent report a specific budget for this function. Virtually all reported they had some kind of training in volunteer management.
- All the agencies provide some kind of public recognition to volunteers, though few provide other incentives.

- Eighty percent of agencies review the fit of volunteers to tasks regularly, and half require volunteers to make specific time commitments.
- Ninety percent track the time of volunteers.
- Forty percent report a budget line item for volunteer efforts.
- The most common source of recruitment is word of mouth from other volunteers (90 percent of agencies), followed by direct invitations or referrals from other agencies (each 45 percent). Media announcements are less commonly used and less successful.

Evaluation of Volunteer Programs

- Seventy-five percent of agencies track volunteers in a computerized database.
- Seventy percent seek regular feedback from volunteers and clients on volunteer activities.
- Sixty-five percent of agencies report the paid staff provides evaluations of volunteers.
- Only 10 percent report no evaluation effort for volunteer programs.

Thoughts on Ways to Expand Volunteerism

- We asked if coordinating advertising of volunteer positions, or developing standard reporting of volunteer services, or making available standard volunteer resource materials would enhance volunteerism in the agencies. Less than half the agencies thought any of these would be “very useful.”

Summary and Evaluation

Are these aging services agencies reasonably organized with respect to recruitment, retention, management, and evaluation of their volunteer programs? They recognize the centrality of volunteers and appear to be seeking ways to develop their volunteer management efforts. However, the following figures, which summarize agency responses, suggest a need for a closer look and perhaps some missed opportunities for effective volunteer management.

As Figure 1 (page 6) shows, most agencies report a person serving as volunteer coordinator but less report a budget for this position or a budget line for volunteer activities. This mismatch suggests that agencies are not able to make a full commitment to recruiting, training, and retaining volunteers. Despite the reported centrality of volunteerism (with 85 percent of agencies reporting that volunteers are critical to their ability to deliver services and meet program objectives), volunteerism appears to be under resourced. This may account for the agencies’ aggregate rating of only 20 percent for “very good” volunteer recruitment and management. This may also account for fairly high turnover of volunteers (50 percent report loss over the past year), underutilization of volunteers who approach agencies, and unfilled positions.
Yet the agencies have made some effort to develop effective volunteer management procedures. As Figure 2 shows, most agencies track volunteer time, review the fit between volunteers and their tasks, use computerized databases for these efforts, and provide evaluations. Still, no agency is effectively organized in all the areas we assessed, and some of the larger are only able to provide aggregate counts of services provided.

Thus, the picture is mixed. A review of volunteer management training in agencies would be valuable. Likewise, it may be valuable to make available more extensive volunteer management training. We return to these issues below.

2.2 Case Study: Volunteerism and Home Delivered Meals in Allegheny County

As part of this needs assessment, Joseph Barker, Deputy Director of the Allegheny County Area on Aging, conducted a brief survey of providers of home-delivered meals who contract with the AAA. Since home-delivered meals are a central service for seniors and perhaps also the major focus of volunteer efforts for vulnerable elders, this information gives an important snapshot of the challenges agencies face in providing sufficient volunteer time to meet the needs of vulnerable seniors.

Eleven agencies serve as vendors for home delivered meals (HDM) provided through the Allegheny County Area Agency on Aging. The program includes meals served at senior centers as well, which accounts for about half the meals provided by the program. Together, the 11 agencies serve about 50,000 meals monthly, which represent perhaps 75 percent of all home-delivered meals provided to seniors in the county. As part of their HDM contracts, vendors are expected to use volunteers to cook, package, and serve or deliver meals. Indeed, for the 17 agencies currently active in the 61 county senior centers, one of the five areas of activity specified in their contracts includes development of volunteer efforts to support HDM or other services.

The AAA budget for 2009-2010 includes $321,890 for volunteer activities/services in senior community centers, which is largely centered on the home delivered meal program. This is the largest AAA contribution to volunteerism for vulnerable elders. The only other AAA efforts to recruit, train, manage, or recognize volunteers are much smaller and
include $20K for the Interfaith Volunteer Caregiver Program (for information and referral) and $10K for the senior ombudsman program. (United Way provides 135K for the Interfaith Volunteer Caregiver program and has been a longstanding supporter of its efforts.)

Overall, the HDM program provides one meal a day, five days a week (or about 21 days each month). Thus, the 50,000 meals provided monthly represents about 2380 meals each day. If the program represents 75 percent of HDM in the county, we estimate that some 3,200 seniors receive a meal daily. And if about half the meals are served in senior centers, then about 1,600 seniors receive a meal delivered to their home or apartment five days a week.

More specifically, Lutheran Services provides about half the meals in the AAA-sponsored program, some 25-27,000 meals each month, prepared in 33 kitchens. This effort requires 200-300 volunteers daily. Volunteers do all cooking, preparing, packaging, and delivering. The situation is different in the senior centers and some of the other agencies, which may utilize a small number of paid food vendors and drivers in addition to volunteers (because of inability to recruit volunteers). Still, using these numbers, we can estimate that the HDM program in the county as a whole requires some 500 volunteers daily to provide meals to 3,200 seniors. A rotating pool of volunteers works in this capacity, and so in practice many more are needed. Indeed, in four of the providers (Lutheran Services, Riverview, Eastern Area Adult services, and Wilkinsburg Community Ministries), 222 volunteers work daily but the total yearly volunteer pool is 3,620. Thus, a yearly pool of perhaps 7,000 volunteers is needed to reliably provide 500 volunteers daily.

To maintain this level of volunteer commitment is likely to become increasingly difficult in coming years. The mean age of volunteers in the Lutheran Services kitchens, the largest program, is 70.6. When asked to give the age range of volunteers in other programs, most were in this range: 55-80 in one, 74+ in another, 60-65 in a third. Only one of three programs administered by Lifespan had volunteers under age 65 (Dormont). Yet without adequate numbers of volunteers, these programs will completely collapse; and thus the aging of the volunteer pool, without replenishment with younger cohorts, is a clear threat to program viability.

The AAA requires volunteer involvement in these programs, as mentioned earlier, but expectations regarding volunteer activity are "not concrete" (J Barker, AAA). Funding through block grants is included to recruit and train volunteers, but how providers secure volunteers is left to their discretion. Likewise, no explicit evaluation of volunteer efforts is currently in place. Indeed, no HDM program has a staff person who serves as volunteer manager. The AAA does not currently provide volunteer recruitment materials, guidelines, best practices, or evaluation standards. Nor is social visiting separating analyzed or targeted as part of the HDM program.

Mildred Morrison, Director of the AAA, pointed out weaknesses in current agency efforts to recruit volunteers. For example, in the case of HDM vendors, she stressed that "having an adequate number of volunteers is their responsibility and part of the contract. They have set themselves within a certain pattern [of volunteer recruitment], but the world has changed. Their model needs to change. If they need more management to recruit and oversee volunteers, let them say so and ask for funds. So far they have not." How to change program models remains a challenge. For example, if volunteers were tasked — and trained — to deliver meals and also check smoke detectors, look in on pets, reset televisions and other appliances, or make more formal inquiries about health, would this attract a greater number of volunteers or perhaps younger volunteers? (M Bloomingdale, Lutheran Service Society).

Part of the current problem appears to be the historical legacy of volunteer recruitment in senior centers. Until recently, most volunteers were senior center attendees themselves. They have aged, and younger cohorts of seniors are less likely to come to senior centers now. As a result, the volunteer pool is now much older, with many of these people unable to drive or make extensive hourly commitments. Younger seniors (along with younger people generally) prefer to volunteer in parks, homeless shelters, animal rescue efforts, or food banks, or for political campaigns. "Senior centers and home-delivered meals are not on the radar screen for them" (J Barker, AAA).

What should HDM programs do to attract new, younger cohorts of volunteers? Clearly, recruitment from senior centers will no longer suffice. Part of the answer may be to repackage volunteering for vulnerable seniors to make it more attractive. Potential volunteers need to get past their fear of aging (M Morrison, AAA). It might also help to train potential volunteers so they are more comfortable recognizing abnormal aging and able to respond appropriately (J Barker, AAA). Another part of the answer is for HDM agencies to become more astute in customer relations and volunteer management. Finally, some of the volunteer shortfall can be met with repackageing of HDM services. Volunteers may be able to deliver meals for two days in one home visit, for example, or match volunteers with seniors more efficiently. The problem with some of these last measures may be reduction in actual time with vulnerable elders, since an important element of HDM is not simply delivery of meals but also social visiting and general check-ins with elders.
3. Gap Analysis

3.1. Service areas where volunteer services to seniors have been constrained or limited due to financial, personnel, or infrastructure constraints

Our key informant interviews suggest that home-delivered meals, transportation services, and social visiting-checking in are the key volunteer activities in aging services. This was confirmed in the online agency survey, where the primary use of volunteers included social visiting (68 percent of agencies), followed by transportation, helping with medications, and food preparation/delivery (each 47 percent). What are the barriers to increasing volunteer efforts in these areas?

Our informants made a distinction between motivations for general volunteering and motivation to volunteer to help vulnerable elders. People volunteer “to find a cause they believe in, where they can make a difference” (R Steigerwalt, Family Services of PA). It is often linked to congregational or community agency activity. Others volunteer to build their resume and develop skills, and see volunteering as a stepping stone to paid employment (P Vingle, Jewish Healthcare Foundation). Still others do it because it can be trendy.

The last is less likely to be the case in volunteering for the elderly, which is seen as scary and perhaps unrewarding for people who are not properly trained. Our informants suggested that many potential volunteers, especially younger people, would rather apply their efforts to maintaining parks, working with the homeless, teaching English to refugees, or helping with reading to children. Volunteering for the elderly is scary in the sense that a client may fall, need medical care, or need personal assistance, all of which volunteers may feel they are unqualified to address. Providing help to the aged is also emotionally more complex. The effective volunteer for the vulnerable elders needs to shop with Ms. Jones, not for her (M. Morrison, AAA); and this level of involvement is challenging. Likewise, even meal delivery is really less significant for an elder than the social contact it allows (D Goughler, Family Services of Western PA). Volunteers who provide aging services may provide a different kind of service, with a stress on social involvement rather than simply performing a task. The effective volunteer for an elder must have this skill set.

Does elder volunteerism require or attract a different kind of volunteer? Little research is available. Our key informants stressed that motivations to volunteer may be similar, but volunteering for the elderly may require more intrinsic motivation. Thus, incentives or recognition do not seem to be the critical factor for volunteers who work with frail elderly: “I haven’t found any incentive that would make someone volunteer who doesn’t already have the commitment inside them. Banquets and get togethers do not do it. It’s intrinsic. Volunteers often don’t want the recognition” (A Berger, Faith in Action).

Still, even if not everyone is equally attracted to volunteer activities, key informants felt strongly that once a person volunteers, he or she will benefit. “It feels good to give back; you feel good when you put your head on your pillow” (P Vingle). Thus, the challenge is to communicate opportunities for volunteering in ways that stress its benefit to the volunteer as well as to elders, and to broadcast this opportunity to a wider potential pool of volunteers: “We need to make it easy for people at work, in schools, and in community organizations to access volunteer activities” (D Horgan, Pittsburgh Cares). We return to this point below.

How much of this is happening now? Are agencies making this effort? We have mentioned earlier criticism of agencies for not adopting new models of volunteer recruitment and training. Our informants at least partly recognized the justice of this charge and the need to recruit volunteers outside the programs they run for healthier seniors (E Boyd, Hill House). But they also mentioned more immediate challenges. For example, “there are more restrictions for volunteers, especially with children. I’m not saying it’s a bad thing, to screen people or go through background checks; but it is more red tape and more complicated” (D Goughler). Insurance for volunteers who drive elders can be an obstacle (H Cohen, Senior Corps Companions). There are IRS complications for some uses of volunteers (D Goughler).

One general problem is a disconnect between volunteering for the elderly and most “days of caring” kind of volunteering. Most one-shot community volunteer efforts do not give a true sense of elder volunteering. “It’s easy to paint a community site; it’s a mainstay of Day of Caring efforts. It’s easy to organize and fun, but it gives no sense of what goes on in human services everyday. We have nothing that gets people to experience what it’s like to take Ms. Jones to the grocery store” (H Miller, Future Strategies).

Thus, at least from our interviews, infrastructure challenges are only a part of the obstacles that make it difficult to recruit a younger pool of volunteers. Rather, it seems to be more a failure of imagination or volunteer models. Still, creative thinking is apparent in this area as well, to which we now turn.

3.2. Efforts to bolster volunteerism

Our informants mentioned a variety of possible underused or new volunteer opportunities worth developing:

- Senior arts enrichment, in collaboration with cultural organizations
- Meeting the emergency needs of elders
- Accenting the human service component, the value of personal contact with elders rather than simply stressing tasks
• Allowing volunteers to rotate between multiple volunteering opportunities
• Aiming for continuous, ongoing involvement ("volunteer for life")
• Seeking whole family involvement
• Volunteering with friends or co-workers
• Stressing that executives or professionals may appreciate direct personal contact with elders
• Stressing volunteerism as a way to build community
• Use of "Good Neighbor Center" kiosks in community agencies
• Recognizing that it costs money to volunteer (e.g., travel): offering ways to defray these costs
• Stress the social change component: that these tasks bring about change
• Seek better integration with community organizations.

Informants also mentioned ways to bolster volunteer management:

• Provide adequate orientation for potential volunteers: "this is what it feels like"
• Teach staff how to conduct a good volunteer interview
• Make a great match based on what you know about the person
• Avoid the "stuff envelopes" approach to volunteer expectations
• Treat volunteers as unpaid staff: with respect, same expectations, regular feedback, and opportunities to develop of skills
• Aim for retention: give volunteers a place to sit, responsibilities, authority
• Provide daily recognition through incentives, such as bulletin board announcements, gift cards, etc.
• Use the expertise of volunteers well

Our informants recognized the need to bolster evaluation of volunteer programs. Currently, agencies mostly evaluate programs as a whole, not individual volunteer productivity. Record keeping is still weak, on the whole. Few agencies have developed manuals for volunteer recruitment, training, retention, and assessment. Very few collect information from clients or staff supervisors on volunteer efforts. Only a handful provide opportunities for volunteers to provide feedback. Better use could be made of the kind of volunteer management training made available by Pittsburgh cares.

4. Need Projections

4.1 Estimates of demand for volunteer services for seniors over next 20 years

To estimate the demand for volunteer services among vulnerable elders, we begin with estimates of the size of the vulnerable elder population over the next 20 years. Complete population estimates for Allegheny County over this time period are available from the University Center for Social and Urban Research (UCSUR, 2005) at the University of Pittsburgh and are reproduced as Table 1. The UCSUR estimates project a larger population and slightly larger elder population than Census projections because they are based on a regional economic model (REMI) rather than demographic projections alone. In this way, they account for economic changes likely to affect population and regional migration. For these reasons, we consider UCSUR projections more appropriate and rely on these.

Elder demand for volunteering is estimated as the number of elderly multiplied by the proportion living alone without family involvement (15 percent and 20 percent by age band) times the proportion with IADL disability (6.4 percent and 18.3 percent by age band). This calculation yields a count of elderly in the 65-74 and 75+ age range who we consider vulnerable and in need of volunteer services.

We based vulnerability on concurrent disability and relative isolation. For disability prevalence, we used estimates of age-specific disability in the instrumental activities of daily living (IADL, difficulty with household competencies) from Health US, 2007 (NCHS 2008). The IADL cover need for help with cooking, shopping, filling prescriptions, doing light housework, using the telephone, managing money, and related activities. These are a plausible indicator of disabilities that can be addressed by volunteers and have been associated with transition to more severe ADL disability (difficulty in personal self-maintenance activities, such as bathing, dressing, using the toilet, and feeding oneself). IADL disability also is associated with need for social contact, since they imply curtailed activity outside the home. For isolation, we estimated that 15-20 percent of elders live alone and do not have strong connection to family or neighbors. This estimate is based on the prevalence of elders who live alone in the community, which is about 30-40 percent of elderly depending on locale (NCHS 2007). We assumed that about half these elders lack family nearby and have weak neighbor ties.

We assumed as well that elderly in this situation would require two hr/day of help over the year. This estimate is based on the hour commitment required to perform household tasks, check-in, and transport of an elder outside the home.

With these assumptions, we then multiply the number of vulnerable elders in each age band by the 2 hr/day for the year to yield an estimate of age-specific yearly hour need. This is our basic model. We also developed an alternative scenario for elder volunteer demand, in which a combination of additional family care, elder financial resources, and in-home paid services cut the proportion of elderly requiring volunteer services by 25 percent.
A fully worked out calculation for the basic scenario in 2005 is shown in Table 2. In 2005, we estimate that 5300 elders (2.5 percent of elders) require volunteer effort. In the aggregate, they require 3.89 million hours over the year if each received two hr/day of volunteer time. In the more favorable alternate scenario, 3995 elders (1.9 percent) require volunteer effort for a total of 2.92 million hours of volunteer time over the year.

Assuming no change in the definition of vulnerability, this aggregate yearly demand for volunteer hours is expected to decline through 2015 and then pick up, given current projections of a declining but increasingly older population through 2015 and then an increasing population through 2025 (see Tables 1 and 3). Demand for volunteer hours is 3.73 million in 2010, 3.67 million in 2015, 3.87 million in 2020, and 4.35 million in 2025. In the alternate scenario, demand for volunteer hours is 2.80, 2.75, 2.90, and 3.26 million, respectively, over the same years.

4.2 Estimates of supply of volunteers for seniors over next 20 years

To calculate the supply of volunteer hours for vulnerable elders, we again begin with the Allegheny County population projections shown in Table 1. We first apply total volunteer rates by age taken from Pittsburgh Volunteer Trends, Volunteering in America, Cities, 2007 prepared by the Corporation for National and Community Service (2007). This gives the prevalence of volunteerism by age group, which ranges from 20 percent to 40 percent. We use the proportion volunteering for “social/community service” as a proxy for senior volunteerism, since figures for elder volunteering are not available. This seems reasonable since it is intermediate between the highest volunteer venues (religious organizations) and other venues with lower volunteer involvement. If we multiply these first two estimates, we develop an estimate of age-specific elder volunteering, which ranges from 3 - 5 percent for different age bands. We then apply this proportion to the number of people in age group to estimate the number of volunteers to vulnerable elders (number of volunteers times median yearly hours). Median yearly hours for each age group are available from Volunteering in the United States, 2007 (Bureau of Labor Statistics, 2007), which we inflated to capture the median of 70 hr/year of volunteer time reported for Pittsburgh. These are summed to yield the aggregate yearly supply of elder volunteer hours.

A fully worked out example for the volunteer pool in 2005 is shown in Table 2. In 2005, about 35,000 volunteers in Allegheny County provided about 2.43 million volunteer hours for vulnerable elders.

Projecting to future years requires that we calculate volunteer prevalence among older adults removing elders who cannot volunteer because they need such services. Table 3 builds in this adjustment and shows an initial decline but then a slow, steady increase in aggregate yearly volunteer hours for vulnerable elders though 2025. The aggregate supply of volunteer hours in Allegheny County is estimated to be 2.42 million in 2010, 2.45 million in 2015, 2.50 million in 2020, and 2.55 million in 2025.

4.3 Projections of degree gap can be closed with expansion of volunteerism

Sufficiency of volunteers can be calculated as the ratio of the aggregate volunteer hour supply to aggregate vulnerable elder hour demand. A ratio of one or greater indicates that elder needs are met. Ratios less than one indicate a shortfall. In 2005, by this calculation 62 percent of elder volunteering need was met in the base scenario (see Table 2). In the more optimistic alternative scenario, available volunteer hours meet 83 percent of elder need.

In the base model, the volunteer sufficiency ratio increases steadily through 2015, moving from 0.62 (2005) to 0.65 (2010) and then to 0.68 (2015), showing a slight closing of the gap driven mainly by declining elder population. In 2020 and 2025 the trend reverses, first to 0.65 and then to 0.59. In other words, given current trends in population, only a third of the vulnerable elder demand for volunteer services is ever met and the proportion met will begin to decline after 2015 (see Table 3).

Under the alternative scenario with fewer elderly requiring volunteer effort, available volunteer hours meet 86 percent (2010), 89 percent (2015), 86 percent (2020), and 78 percent (2025) of elder volunteer need. Thus, even in the more favorable scenario, 11-22 percent of elder volunteer need goes unmet.

These estimates depend heavily on the assumptions specified earlier. Such assumptions are reasonable, given current data available, and parameters can be refined as new data become available. Still, these initial estimates allow us to see what kind of changes in elder volunteerism or elder demand for services will be necessary to close the sufficiency gap.

For the base model, the most potent way to close the gap is to increase the number of people providing volunteer services for the elderly by about half. This would mean going from about 35,000 volunteers in 2010 to 50,000, a 15,000 person increase, and would immediately bring the supply of volunteer hours in line with projected elder demand. Alternatively, we could close the gap by increasing the median yearly hours provided by these volunteers, increasing it to about 100 hours per year. This seems more challenging given reports, summarized above, that one large obstacle to volunteerism is lack of time. Alternatively, and perhaps more realistically, we could seek to increase the number of volunteers and the
yearly hours they contribute. In this case, we would need to increase the number of volunteers by 15-20 percent and seek as well to increase median hours per year to 80-85.

Yet another way to close the volunteer sufficiency gap is to reduce elder demand. This can be modeled by reducing the prevalence of IADL disability, decreasing the proportion of elders who are isolated, or both. National studies suggest that reductions in IADL disability are in fact taking place, with about a 2 percent decline between 1990 and 2005. This level of improving elder health would, however, not change demand to a great extent. Projections suggest that the sufficiency ratio would only increase to about 60 percent under this scenario. Combining expected health improvement with reductions in isolation would have a larger effect, but no data are available on the extent to which isolation may be changing.

In short, closing the gap in volunteer need will require major increases in the number of volunteers, a doubling if hour investments do not increase. This challenge will be less severe if volunteers also increase their yearly time commitment. Improving elder health will only marginally reduce volunteer demand. Figure 1 shows the projected shortfall through 2025 if levels of volunteer supply and elder demand, as they stand in 2005, do not change. The figure also shows that the gap is narrower under the more favorable scenario. Here increasing the number of volunteers by about 5000 would suffice to close the gap at current hourly levels of volunteer commitment.

One limitation of this approach should be noted. Our estimates are based only on volunteering within agencies. Informal volunteerism for an elder neighbor is not captured by these analyses.

4.4. Economic Value of Volunteer Efforts

The Independent Sector (2008) estimate for the economic value of volunteer hours for Pennsylvania in 2006 was $18.86 (Independent Sector, 2008). In 2005, then, volunteers to vulnerable elderly contributed the equivalent of $45.8 million to the Allegheny County economy. Key informants suggest that volunteerism quadruples the output of budgets of agencies.

In fact, this valuation is probably an underestimate. If volunteer efforts prevent hospitalization or admissions to skilled nursing facilities, these savings should be added to the economic value of volunteerism. Unfortunately, it is hard to quantify this gain, since data on the reduction of these events associated with volunteer hours are unavailable.

A back-of-the-envelope calculation suggests that volunteer efforts may result in substantial savings in the case of hospitalization. In a year, we can expect 15 percent of the 5,300 vulnerable elders in Allegheny County to have a hospitalization admission, with each admission costing, on average, perhaps $10,000. If volunteer involvement reduced the risk of admission by 10 percent, the result would be a cost savings of nearly $800,000. Savings from reduction in the rate of skilled nursing home admissions are likely to be much smaller, since the annual risk of nursing admission is quite low.

5. Summary and Recommendations

This needs assessment suggests a current shortfall of about one third between the demand for volunteer efforts among vulnerable elders and the supply of volunteers (and about 16 percent under a more favorable scenario). The gap will narrow slightly and then increase over the next 20 years, if current conditions prevail. It is driven largely by increases in the oldest old but also by an inability to recruit younger volunteers. The latter is at least partly due to reliance on recruiting volunteers from current programs for the elderly. Agencies have moved toward more effective volunteer management but not enough to address this gap and develop a compelling culture of volunteerism for aging services.

5.1 Models for an effective system of volunteer recruitment and deployment

Predictors of volunteerism for aging services established in the literature include religious participation, secular charitable giving, religious charitable giving, higher education, better health, community involvement, and spousal volunteerism (AARP 2003, Einolf 2008, Urban Institute 2004). In addition, research suggests that getting people to start volunteering is the hard part. Retaining volunteers is easier, with people spending a mean of 6 years as volunteers.

Review of the literature suggests the following as reasonable general targets to close the volunteer sufficiency gap:

- Aim to recruit younger, healthy adults (primarily age 50-75 but also in some cases over 75) as volunteers for aging services. These people have the greatest likelihood of volunteering.
- Seek out potential volunteers in new venues, such as workplaces, lifelong learning programs, other non-aging volunteer pursuits, and community organizations.
- Offer a greater array of volunteer opportunities, for example, museum programs. as well as home delivered meals.
- Get volunteers to involve their families: spouses, children, and grandchildren.
- Begin recruiting before retirement; continue workplace volunteer programs through retirement.
- Change the culture of aging services volunteerism, so that it becomes part of a lifestyle of active retirement and civic engagement.
- Develop an evidence base for the productivity of these
volunteer efforts to show the benefit to communities and also health and social benefits to volunteers themselves.

5.2 Short-term and longer-term recommendations to build volunteer effort

For Allegheny County, the challenge is to boost the supply of volunteers as well as cultivate more effective volunteer management in agencies. We need more volunteers but also better training, retention, deployment, and evaluation of volunteers.

Supply of Volunteers

- Aim to recruit younger, healthy elders (primarily age 50-75 but also in some cases over 75) as volunteers for aging services. These people have the greatest likelihood of volunteering.
  - Strategy: Seek out older adults aged 50-75 in new venues, such as workplaces, lifelong learning programs, other non-aging volunteer pursuits, and community organizations.
- Offer a greater array of volunteer opportunities, for example, museum programs or other ways to involve volunteers with elders outside homes.
  - Strategy: Develop partnerships with arts organizations and other services likely to appeal to volunteers as well as seniors
- Get senior volunteers to involve their families: spouses, children, and grandchildren.
  - Strategy: Adapt “bring a daughter to work” programs for volunteers: “Bring a family member to volunteer”
- Begin recruiting before retirement; continue workplace volunteer programs through retirement.
  - Strategy: Change the culture of aging services volunteerism, so that it becomes part of a lifestyle of active retirement and civic engagement.
- Develop an evidence base for the productivity of these volunteer efforts to show the benefit to communities and also health and social benefits to volunteers themselves.
  - Strategy: Collect data on volunteer experiences: physical activity, cognitive engagement, satisfaction, social networking

One way to cultivate volunteerism in the longer run is adopt the Experience Corps model for volunteering for vulnerable elders. Elements of the adapted program include a group focus, formal training in aging and health, greater control and latitude in delivering a product, and formal assessment. It could be a citywide or regional program, in which the young-old are placed with different agencies. In this way, it could draw on other resources and develop its own branding and culture. Other promising models include the Civic Ventures Next Chapter program, which explicitly links volunteerism to retirement lifestyles.

Another question for future efforts in Allegheny County is how to increase involvement of younger people in volunteering for vulnerable seniors. The age distribution of Pittsburgh volunteers is actually younger than the national profile (CNSC 2007). Given that 18-50 year old population is not engaged to a high degree with senior programs, and there is a high level of volunteerism in our community, we need to develop strategies and best practices to engage the younger population as well.

Volunteer Recruitment, Retention, and Management

- Seek greater funding for volunteer coordinators in agencies. This would likely attract higher caliber personnel, who would be explicitly tasked with organizing volunteer efforts.
- Standardize and upgrade training for volunteer coordinators. Pittsburgh Cares provides such efforts but outreach to aging services agencies could be expanded.
- Consider developing a website for volunteer outreach, awareness, and screening, based at United Way. Matching and interviewing would remain at the agency level, but the central website and allied publicity would benefit all agencies and allow leveraging of United Way resources. A standardized volunteer screening form would be valuable.
- Consider developing a volunteer management training certificate. This could be offered at community colleges. Such a program was once offered at CCAC.
- Consider community-wide “volunteer teaser” opportunities to introduce people to one-to-one volunteering with seniors. A good start would be a one-time delivery of nonperishable foods to seniors’ homes at the start of each winter season.
- Accumulate good stories of the volunteer experience for a publicity campaign. This could be part of a campaign to show human services work from the inside, with particular application to aging services and the challenges and rewards of volunteerism.
- Consider a study of volunteers themselves to document the benefits of volunteering to volunteers themselves, such as greater physical stamina and cognitive vitality.

A central target for boosting volunteerism for seniors in Allegheny County should be the home delivered meals program. This program is well-established, has support from the Area Agency on Aging, provides demonstrable value as broader social visiting/health monitoring program, and faces an immediate challenge because of a declining number of volunteers, who themselves are increasingly old. This effort should be prioritized and offers measurable targets for enhanced volunteer effort. Possible short term targets include:

- Increase volunteerism in this area by 10 percent
- Recruit in new venues that yield a younger volunteer pool
- Reallocate delivery of meals to allow greater participation of working volunteers
- Use a one-time delivery of nonperishable items each
winter as a central community-wide publicity campaign to expand interest in volunteers
• Consider group volunteering models for adoption of meal packaging and delivery

Applicable Volunteer Models

Two models of volunteering might be considered for these efforts. In the Experience Corps model groups of seniors volunteer together in elementary schools, where they assist with reading and math tutoring as teacher’s aides. The program has demonstrated impressive benefits both for children and seniors themselves, including improvements in physical function, cognitive performance, and proactive health behavior. A randomized trial is currently in the field to assess the value of the program.

It may be possible to put an allied program in place for volunteering to support the vulnerable elderly. It would respond to many of the needs identified in this assessment.

Some elements of the program might include:
• Groups of volunteers providing services together (to encourage socialization and overcome fear)
• Formal training in health and aging to prepare volunteers for working with frail elderly but also for their own education
• Groups of volunteers given scope and freedom to develop new volunteer activities
• Groups of volunteers given greater latitude in organizing activities, such as preparing and delivering meals (to vary tasks and develop different skills)
• Assessment of benefit to clients and volunteers, so that volunteers can concretely see the benefit of what they are doing

This effort differs from current approaches in stressing a group focus, formal training, greater control and latitude in delivering a product, and formal assessment. It could be a citywide or regional program. Ideally it would draw on other resources and develop its own branding and culture.

An alternative model is the Next Chapter Initiative of Civic Ventures. This effort builds volunteerism in the second half of life into civic engagement organizations. The goal in these Arizona-based programs is for every retiree in the community to volunteer as part of his or her involvement in lifelong learning programs. The programs are usually based in libraries, community centers, community colleges, or other foci of social life. The programs establish a common internet portal for information and registration, “experience banks” that link potential volunteers to nonprofit opportunities, “Get Involved Expos,” social networking and active leisure, training in volunteer skills, and community mentoring. This is a promising model, but more experience is required to see how best to link such organizations to existing nonprofit organizations.

Pending development of such new approaches to volunteerism, reasonable short-run targets would be greater recruitment for the current home delivered meals program, more access to volunteer management training among nonprofits, and community-wide publicity revolving around initial one-time volunteer opportunities that could develop into long-term volunteer relationships. As mentioned earlier, seasonable outreach to vulnerable seniors, such as delivery of nonperishable items each winter, could become one such a community focus.
6. Key Literature


Corporation for National and Community Service. Volunteering in America: Research Highlights.


The Retirement Project. Volunteer transitions among older Americans. Urban Institute,


| Table 1. Allegheny County Population, by Age Group and Year, 2005-2025 |
|-----------------|--------|--------|--------|--------|--------|
| Age Group      | 2005   | 2010   | 2015   | 2020   | 2025   |
| 25-34          | 128,784| 121360 | 149105 | 177596 | 178044 |
| 35-44          | 176140 | 146142 | 122006 | 119216 | 152067 |
| 45-54          | 198477 | 193261 | 169146 | 142848 | 122746 |
| 55-64          | 140824 | 167440 | 184696 | 181697 | 161133 |
| 65-74          | 94804  | 98894  | 119071 | 142790 | 158647 |
| 75+            | 120870 | 113543 | 106034 | 107366 | 121155 |

University Center for Social and Urban Research, 2005
Projections based on REMI model for western PA, which projects population based on economic trends and regional flow across counties.
Table 2. Calculation of Yearly Aggregate Volunteer Hour Supply and Vulnerable Elderly Hour Demand, 2005: Base Model

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35866 2429896

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<th>IADL</th>
<th># elders</th>
<th>hr/day</th>
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5327.048 3891409

**Vol/Elder Hours** 0.62

Population estimates for Allegheny County, 2005 taken from UCSUR (2005); see Table 1. On volunteer supply side, potential volunteers aged 65-74 and 75+ adjusted by removing vulnerable elders.

Total volunteer rates by age taken from Pittsburgh Volunteer Trends, Volunteering in America, Cities, 2007. Corporation for National and Community Service. Elder volunteer prevalence by age calculated as proportion volunteering for social/community service * total proportion volunteering. Rates of elder volunteering range from 3-5 percent in each age group. Number of volunteers is then calculated by applying this rate to number in age bands. Yearly hours are calculated as number of volunteers * median yearly hours, inflated to median of 70 for Pittsburgh. These are summed to yield aggregate yearly supply of elder volunteer hours.

Elder demand for volunteering calculated as number of elderly * proportion living alone without family involvement (15 percent and 20 percent by age band) * proportion with IADL disability (6.4 percent and 18.3 percent by age band). Age-specific IADL disability (difficulty with household competencies) taken from Health US, 2007 (NCHS 2008, Table 58). Volunteer need assumed to be 2 hr/day over year. Age-specific yearly hour need summed over age bands to yield aggregate hours of volunteer need.

Sufficiency of volunteers calculated as ratio of aggregate volunteer hour supply to vulnerable elder hour demand. Ratio of 1 or greater indicates elder need met. Ratio less than 1 indicates shortfall. In 2005, by this calculation 52 percent of elder volunteering need was met.
Table 3. Projection of Volunteer Hour Supply to Vulnerable Elder Need to 2025, Assuming 2005 Volunteer Prevalence and Constant Elder Need: Base Model

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<th>Volunteer Supply</th>
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<td>N vol_n hr/yr</td>
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See Table 2, Note for assumptions used in estimations.
Figure 3. Projected Volunteer Demand and Supply: Vulnerable Elders, Allegheny County, 2005-2025

“Demand: 75 percent” represents a more favorable scenario in which elders needing volunteer hours in each year are reduced by 25 percent because of alternative support hours provided through a combination of additional family care, elder financial resources, and in-home paid services. Even in this scenario, 11-22 percent of elder volunteer need in each year goes unmet.

Appendix 1. Key Informant Interviews

Joe Barker, Deputy Director, Allegheny County Area Agency on Aging
Mildred Morrison, Director, Allegheny County Area Agency on Aging
Harold Miller, Future Strategies, LLC
Pam Vingle, Project Director, Jewish Health Care Foundation
Rachel Steigerwalt, Program Coordinator, and Sarah Papperman, Volunteer Administrator, Interfaith Volunteer Caregivers, Family Services of Western PA

Dan Goughler, Director, Family Services of Western PA
Dan Horgan, Executive Director, Pittsburgh Cares
Ann Berger, Program Director, Faith in Action, Sewickley YMCA
Herman Cohen, Director, Senior Corps Companions, Allegheny County Area Agency on Aging
Marc Bloomingdale, President and CEO, Lutheran Service Society
Eunice Boyd, Director, Hill House Association
Appendix 2. Agencies Completing On-Line Web Survey

ACCESS Transportation Systems  
AgeWell Pittsburgh/Jewish Community Center  
American Respiratory Alliance of Western Pennsylvania  
Benedictine Center for Seniors  
Blind & Vision Rehabilitation Services  
Brashear Association, Incorporated  
Catholic Charities of the Diocese of Pittsburgh  
Catholic Youth Association of Pittsburgh, Inc.  
Center for Victims of Violence & Crime  
Chartiers Community Mental Health and Retardation Center  
Community Human Services  
Eastern Area Adult Services  
Elder-ado, Inc.  
Family Hospice and Palliative Care  
Family Services of Western Pennsylvania  
Holy Family Institute  
Jewish Association on Aging  
Jewish Family and Children’s Service  
Lemington Community Services  
LifeSpan, Inc.

Lutheran Service Society  
National Multiple Sclerosis Society  
Neighborhood Legal Services Association  
North Hills Community Outreach  
Northern Area Companies  
Operation Safety Net  
Rebuilding Together Pittsburgh  
Riverview Community Action Corporation  
RSVP of Allegheny County  
Senior LAW Center  
Southwestern PA Area Agency on Aging  
The ALS Association  
The Pittsburgh Project  
UPMC Living-at-Home Program  
Ursuline Senior Services  
Vintage, Inc.  
Wilkinsburg Community Ministry

(Note: a number of agencies completed more than one survey for different programs; other agencies provided information without identifying themselves.)

Appendix 3. Volunteer Needs Assessment Advisory Committee

Mildred Morrison,  
Allegheny County Area Agency on Aging

Harold Miller,  
Future Strategies, LLC

Jim Denova,  
Claude Worthington Benedum Foundation

Nancy Kukovich,  
United Way Westmoreland County

Nancy Zionts,  
Jewish Healthcare Foundation

Dan Horgan,  
Pittsburgh Cares

Marc Bloomingdale,  
Lutheran Service Society

Don Goughler,  
Family Services of Western PA

Rachel Steigerwalt,  
Family Services of Western PA-Interfaith Volunteer Caregivers

Charlie Teese,  
Northern Area Companies

David Fetterman,  
Center for Healthy Aging, University of Pittsburgh

Becky Surma,  
volunteer

Doris Carson-Williams,  
African-American Chamber of Commerce of Western PA