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Volunteer retention at the Baton Rouge Crisis Intervention Center

Robyn Eileen Keegan

Louisiana State University and Agricultural and Mechanical College

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VOLUNTEER RETENTION AT THE BATON ROUGE CRISIS
INTERVENTION CENTER

A Thesis

Submitted to the Graduate Faculty of the
Louisiana State University and
Agricultural and Mechanical College
in partial fulfillment of the
requirements for the degree of
Master of Social Work

in

The School of Social Work

by
Robyn E. Keegan
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Abstract

This study explores the relationship between increased supervision and volunteer retention at the Baton Rouge Crisis Intervention Center. Due to the agency's anecdotal evidence of a downward trend in volunteer retention between 2011 and 2012, the researcher began examining the groups and performing an intervention to increase retention. Specifically, this study looked at the differential effect of increased supervision on two nonequivalent comparison groups. The researcher hypothesized that increased supervision of the volunteers would result in a greater percentage of volunteers fulfilling their 72-hour commitment to the agency, increase the speed with which they completed the commitment, and increase the number of hours that the group volunteered in comparison with the nonintervention group, which received the normal amount of supervision from staff. The groups were nonrandomly selected based on the naturally occurring training groups at the agency, which occur three times per year. Six total training classes were used in this study. The results showed no significant difference between the intervention group and nonintervention group in terms of completion, speed of completion, and volunteer hours completed. However, there were clinically significant results due to the reversal of the downward trend in volunteers' average monthly hours to the required level of 12 hours per month. Additionally, survival analysis of parallel groups showed that the difference in the speed with which volunteers completed their commitment approached significance, indicating that further observation and research on this intervention may continue to improve volunteer retention at this agency.

Chapter 1: Introduction

Within the sector of social welfare, volunteers have long been an integral motivating and sustaining force in providing services to clients from the “friendly visitors” and settlement house movement of the late 1800s to trained paraprofessional volunteers in the present (Woodford, 1999). In spite of the many political and social changes in America, volunteers continue to be an integral part of social services. During the year 2011, the value of volunteer services in America was approximated at \$171 billion, which demonstrates the substantial impact and gift that volunteers are to social welfare systems (Independent Sector, 2014). One newer medium of volunteer services is volunteer telephone-based crisis counseling, which came to community prevalence in the 1970s (Nelson, 1974).

Since telephone crisis counseling and suicide prevention came to prominence in the 1970s, the volunteers doing this challenging work have been considered as an integral part of community social services by other professionals (Nelson, 1974). However, these organizations have recognized that volunteers only tend to stay committed to organizations when they feel proud of the organization’s work and mission (Boezeman, 2008). Volunteers who are intrinsically motivated also report having higher life satisfaction, which could explain the solidly high numbers of volunteers in America (Kwok, Chui, & Wong, 2013). With this information, it is unsurprising that researchers have found that commitment to an organization’s values is what keeps intrinsically-motivated volunteers working with an agency (Vecina, Chacón, Marzana, & Marta, 2013). Keeping volunteers motivated and supported has been a longtime challenge for nonprofits because these agencies often struggle to maintain the funding for supportive clinical staff.

Baton Rouge Crisis Intervention Center (BRCIC)

Volunteers at BRCIC face a unique set of challenges while doing the very rewarding work of crisis counseling over the telephone and internet. Initially, all of the volunteers undergo a 60-hour training, which involves three-hour training sessions at night, recorded role play reviewed individually with training staff, and observations of experienced counselors in both The PHONE and Crisis Chat, BRCIC's phone and instant messaging crisis intervention programs. Following the intensive training, volunteers commit to volunteering 72 hours on the crisis lines over the course of six months. Currently, BRCIC has only one full-time clinical staff member, Allyson Pardue, who is the coordinator for The PHONE. Some of her many duties include being 24/7 on-call clinical support, providing nighttime training sessions for new volunteers, and overseeing operations on the phone lines (A. Pardue, personal communication, July 17, 2013).

People who volunteer on the phone lines usually have a paid staff member who also assists in taking crisis calls. Additionally, these PHONE volunteers also work with 211 Information and Referral Specialists, who can assist the volunteers in finding local resources for their callers. However, people who do Crisis Chat, the instant messaging crisis intervention service, are much more isolated from other volunteers and paid staff members because those volunteers are not physically located in the call center. Instead, the Chat volunteers are located in a separate room from the PHONE volunteers, paid Advanced Call Specialists (ACS), and 211 Information and Referral Specialists. Following the Summer of 2012, the author noticed a sharp decrease in volunteers completing their 72-hour volunteer commitment to BRCIC, and began to explore the reasons behind it.

Author's Experience at BRCIC

The author had an usually good experience as a volunteer with BRCIC after being trained in the Fall of 2011. Initially, the work as a PHONE volunteer was very difficult, because she volunteered on the weekends when there were very few people in BRCIC's building. This meant that no members of training staff were available to debrief calls, except by phone. Additionally, the ACS often would not speak to the author to acknowledge her presence, thank her for volunteering, or to debrief calls. Luckily, the author's mother was a member of staff, which meant that the author could debrief calls with her mother without breaching caller confidentiality. With this extra support, the author began volunteering with specific ACS counselors, who expressed personal interest in the author, her work with callers, and appreciation for the author's volunteer work. After making this change, the author became highly integrated into the call center community. In this case, the author's mother was a liaison between the author and BRCIC's staff community, enabling the author to get her emotional needs met by debriefing calls and connecting emotionally with members of staff in the call center.

From the beginning of her work on the lines, the author loved working as a crisis counselor, and the rewarding nature of helping callers in crisis was still not enough to offset the anxiety of being emotionally isolated in the call center. Often the ACS would sit on the opposite side of the room from the author, which meant that the author could not see the ACS counselor to ask for advice during a call. As a volunteer, the author found that debriefing calls verbally was very helpful in allowing her to process and let go of calls. When the ACS expressed no interest in talking about calls and callers, it became difficult for the author to improve as a counselor and let go of the anxiety surrounding difficult calls. Once the author began working with ACS who willingly discussed calls, checked in while the author was actually on calls, and

debriefed them with her afterwards, she was able to improve as a counselor and volunteered more hours per week in order to spend time with the people she liked.

Other Volunteers' Experiences

Once the author began graduate school, several of her cohort from her BRCIC training class were also in the same program as she. In speaking to them conversationally about BRCIC, she realized that her rewarding experience as a volunteer was starkly different from theirs. One classmate, a male who had gone through BRCIC's training to help people and also to make friends since he had recently moved to Baton Rouge, stated that he felt isolated once he completed training and started his volunteer commitment because so few people talked to him. The culture at BRCIC was very isolating for him, which was particularly problematic for this volunteer because he joined the agency in order to make friends. Similarly, he reported that ACS counselors ignored him when he volunteered and sat on the opposite side of the room from him.

Though these experiences are singular and anecdotal, the author began paying attention to the problem of isolation amongst the volunteers. One concerning fact that the author noticed was that subsequent classes, particularly the Summer 2012 training class, had fewer volunteers meeting their commitments at all. The author investigated the volunteer data on the Summer 2012 training class, and noticed that half of the members of that class failed to meet their 72-hour commitment. This of course meant that BRCIC, a small nonprofit, had to swallow the cost of training over 50% of those volunteers without receiving the benefits of the volunteers working 72 hours on the lines to support callers and chatters. Upon seeing this change in volunteer retention, the author decided to begin providing increased support and supervision for the volunteers in her role as an intern, ACS counselor, and volunteer training staff member in order to assess the intervention as a means for volunteer retention.

Why Volunteers Leave

The coordinator for The PHONE, BRCIC's crisis phone line, reported that, in her experience, volunteers often leave when they do not have a personal connection to the BRCIC community (A. Pardue, personal communication, July 17, 2013). For this reason, she often refuses to take volunteers who, in their intake screenings, tell her that they will take a month or longer hiatus from their volunteer work prior to completing their commitment (A. Pardue, personal communication, July 17, 2013). Similarly, if a volunteer has someone they already know working or volunteering at BRCIC, this can provide a stronger social connection to the community and, in her experience, makes it more likely that the volunteer will complete his/her 72-hour commitment to BRCIC (A. Pardue, personal communication, July 17, 2013).

Social Capital

Based on the professional experience of the program coordinator and the literature on volunteer retention, the author began to work to build and facilitate personal relationships with everyone working on the crisis lines, which included PHONE volunteers, Crisis Chat volunteers, and ACS. Research on social capital suggests that people in positions with low levels of support experience the highest levels of emotional strain (Sapp, Kawachi, Sorensen, LaMontagne, & Subramanian, 2010). Thus, the author's goal was to reduce stress and increase interpersonal support within the BRCIC crisis worker community as a way to facilitate volunteer retention.

One benefit of the author's position within the call center was the eclectic nature of her work. Upon the start of the project, she was working at BRCIC during non-business hours, which gave her a unique ability to physically be in the call center when volunteers could not access daytime staff. In addition, the author was working as a member of training staff as an intern and was very familiar with the callers due to her work there as a part-time ACS. As a

member of staff-on-call, she was also authorized to make decisions about caller/chatter safety. The multiple roles that the author held at BRCIC allowed the volunteers to use her for support in a variety of ways, and the author's integration in the BRCIC community helped her make recommendations to the volunteers about ACS counselors that the volunteers would personally like. Since no other member of training staff regularly works on the crisis lines, the author had a unique position of connection to both the callers and the people in the call center. Additionally, the author had the time as an intern to give the volunteers extra attention and model that behavior for other ACS counselors working with the volunteers in order to facilitate a more inclusive and supportive community.

Gaps in Knowledge

Though there is a good deal of research on the efficacy of crisis intervention centers, there is very little research on volunteer retention within the specific sphere of retaining volunteer crisis counselors. Furthermore, no studies have been conducted at BRCIC on volunteer retention and potential problems or improvements. Based on these gaps, the purpose of this study is to explore the relationship between increased and purposeful supervision and emotional support of volunteer crisis counselors at BRCIC and volunteer retention. In particular, this study will focus on the following research questions:

1. Does supportive supervision impact whether volunteers completed their full 72-hour commitment at BRCIC?
2. Does supportive supervision impact the speed in months with which volunteers complete their 72-hour volunteer commitment at BRCIC?
3. Does supportive supervision have a positive impact on volunteer groups' average volunteer hours completed?

Chapter 2: Review of Literature

A growing literature indicates that a variety of factors influence volunteer retention among those who do telephone-based crisis counseling. The training for this volunteer work is over sixty hours with a seventy-two hour volunteer commitment to be completed after training (Baton Rouge Crisis Intervention Center, 2011). Due to the extensive nature of this commitment, there is an unspoken psychological contract between the agency and the volunteers that the volunteers will get their supervision and relational needs met by the staff in exchange for their many hours of volunteer work (Stirling, Kilpatrick, & Orpin, 2011). Therefore, the volunteers' own motives are individually-based and must be discussed prior to training in order to maintain each volunteer (Clary, 1998). It is clear that in order for an agency to meet the unspoken psychological contract, training staff must explore volunteers' needs and expectations from their agency in order to best meet them.

In that same vein, the agency has a vested interest in maintaining their volunteers because each volunteer is an investment of training and supervision. Research shows that supervision is an agency investment in human and social capital, which helps cement the agency within the community (Akdere & Roberts, 2008; Beattie, 2006). Agencies like BRCIC are required to maintain American Association of Suicidology (AAS) accreditation, which involves continuously researching and maintaining best practices for services, both towards clients and volunteers (American Association of Suicidology, 2013). Best practices include supervision that increases counselor self-efficacy as well as utilizing transformational leadership in order to best motivate volunteers (Bandura, 1978; Bass, 1985). Agencies and volunteers have mutual interests in meeting volunteers' needs and supervising them adequately to achieve best practices for both the clients and the volunteers.

Crisis Intervention Theory

Crisis intervention theory is the conceptual foundation in which crisis line volunteers are trained and services are provided (Aquilera, 1998). BRCIC uses a multi-stage crisis intervention model that is based on the crisis stages laid out by Shneidman (1993). One of the central aspects of the training at BRCIC is centered on the concept of Nonviolent Communication (NVC) (A. Pardue, personal communication, July 17, 2013; Rosenberg, 2003). Echterling et al. (1980) discuss the essential nature of rapport-building as the first part of their crisis intervention model because the rapport a counselor is able to build and maintain with his or her client often helps determine how effective the call will be for the client. Nonviolent communication focuses on facilitating empathic communication between the counselor and client (Rosenberg, 2003). This model of telephone crisis intervention has been shown to reduce suicide rates, and is well-established within the field of social work (Echterling et al., 1980).

The experience of crisis is very distressing for the callers because it includes a breakdown of their normal coping, such as their ability to sleep, eat, and attend to work or school duties (Lester, 2002). Often they receive advice from people in their lives about ways to fix their crisis, and yet still find themselves incapable of basic self-care. One common circumstance for people who choose to call The Phone, BRCIC's 24-7 crisis line, is the end of a romantic relationship. Typically, common self-care behavior, such as eating and sleeping, is strongly associated with the significant other because they have done these things together. When the loss of that relationship happens, a caller may find himself or herself incapable of self-soothing without their romantic partner's presence.

When crisis counselors work with their callers, it is important to remember that crisis counseling is about restoration of basic functioning rather than solving the bigger problems that

may have led callers to utilize The Phone. Due to the limitations of being a phone-based counseling service, a calm, gentle tone and active listening skills are vitally important for a successful call because rapport between the counselor and caller greatly impacts how effective the call will be. The counselor merely listens, reflects feelings, summarizes, and explores how well the caller is functioning. By acknowledging the caller's feelings, the caller feels validated rather than criticized. Though the bulk of crisis calls are based in rapport-building and exploration, the rest of the call is focused on making a concrete self-care plan to help the caller focus on basic functioning in order to cope more effectively with the crisis.

Psychological Contracts

One of the core aspects of volunteer retention is based in the concept of psychological contracts, which Masterson and Stamper (2003) define as the reciprocal relationship between an individual and the agency for which they work, whether that work is paid or unpaid. Masterson and Stamper (2003) specify that in order for an agency to uphold their end of the psychological contract, volunteers and employees need to perceive that their relational needs are being met by their agency. When volunteers join an agency like BRCIC, they enter into a serious time and work commitment, yet the psychological contract between the volunteer and the agency is largely implicit, as is often the nature of psychological contracts. When some major aspect of the professional needs or expectations of a worker are not being met by an agency, the worker may perceive the psychological contract with the agency to be breached. Workers (volunteers and paid staff) may respond strongly to perceived breaches of the psychological contract in ways that may undermine the mission of the agency (Stirling et al., 2011). The intervention that is the focus of this study is guided to a great extent by the importance of the agency's fulfillment of the psychological contract because of the potentially damaging consequences to workers and the

agency when the psychological contract has been breached (Stirling, 2011). The fact that employees show similar responses to volunteers when they perceive this breach of contract suggests that the intervention may play an important part in maintaining both employees and volunteers at BRCIC (Deery, 2006; Dulac, 2008).

Effects of Psychological Contract Breach. Within volunteer agencies like BRCIC, research shows that the psychological contract between the agency and the volunteer is mostly based around the volunteer working and getting their relational needs met in exchange (Stirling et al., 2011). An example of relational needs a volunteer may have would be their perception that their work is noticed and appreciated by their supervisors. One of the difficulties within BRCIC is that the volunteers rarely volunteer during business hours, which makes it more challenging for employees to provide adequate in-person supervision to the volunteers. The agency does not currently employ a volunteer coordinator, so there are significant difficulties in meeting relational needs such as support, guidance, and camaraderie (A. Pardue, personal communication, July 17, 2013). In a study about burnout and connectedness in palliative care volunteers, Huynh, Winefield, Xanthopoulou, and Metzger (2012) found that volunteers do not usually quit because of the emotional strain of the work, but because of the lack of support and resources for that work. While logically it might seem that the main cause of burnout in telephone crisis counseling would be attributed to the emotional strain of speaking to people in crisis, the findings from this study suggest that this may not be the case (Huynh et al., 2012). Instead, failure to meet volunteers' emotional needs by affirming their work and value to the organization appears to contribute to their disaffection and attrition (Huynh et al., 2012).

In addition to the importance of maintaining volunteers' relational needs in order to keep them at the agency, there are also long-reaching effects of breaches of the psychological contract.

Non-profit agencies like BRCIC rely heavily on the community for donations as well as volunteers (A. Pardue, personal communication, July 17, 2013). In researching volunteer sustainability, Stirling et al. (2011) concluded that volunteers who do not get their needs met will not recommend the agency to other volunteers. Breaching the psychological contract with volunteers therefore may be detrimental to the relationship between the agency and the community because of a shared perception that the agency is not responsive to its workers (Stirling et al., 2011). Additionally, it is clear from this research that management of volunteers is directly related to the agency's ability to retain volunteers as well as recruit new ones (Stirling et al., 2011).

The failure to uphold the psychological contract between a volunteer and an agency could also potentially have an effect on the quality of the volunteer's work. In Bordia's (2008) study on the relationship between breach of psychological contract and workplace deviance, workers who perceived a breach of psychological contracts were more likely to be late and take their jobs less seriously. Even more significantly, this study also showed that workers in these circumstances were more likely to engage in behavior aimed at damaging the organization for which they worked (Bordia, 2008). In order for an agency to flourish, it is vital that the volunteers and employees feel committed to accomplishing the mission of the agency rather than undermining it.

The effects of a breach of psychological contract are not merely limited to the relationship between the volunteers and the agency. One study has shown that there is a trickle-down effect to clients when there is a breach of the psychological contract (Bordia, Restubog, Bordia, & Tang, 2010). Bordia et al. (2010) demonstrated a relationship between reduced consumer satisfaction and increased employee perception of a breach of psychological contract

within the field of business. While similar relationships among volunteer telephone counselors and their agencies have not yet been studied, this literature does suggest that a volunteer agency's failure to uphold their half of a psychological contract can have negative effects on the agency, the volunteer, and most importantly, the vulnerable clients who call a crisis telephone line.

Relational Needs of Volunteers. Part of the relational needs that volunteers have pertains to being part of a group and a community. Training staff provide a bridge between the trainee volunteers and the community of telephone crisis line workers (Stirling et al., 2011). Staff can provide introductions that new volunteers may be too shy to make, thus facilitating the integration of new volunteers into the BRCIC counseling community. Stirling et al. (2011) refers to this type of support as the building of social capital that volunteers expect in exchange for their work. Additionally, staff presence in the phone and chat rooms can provide the type of public recognition that is essential to volunteer retention by giving in-person positive feedback to the volunteers, who are in a room full of their peers (Stirling et al., 2011).

For many years, BRCIC's crisis lines were manned almost exclusively by volunteers (A. Pardue, personal communication, July 17, 2013). Thus organizations like this one have a vested interest in working to meet the volunteers' relational needs from staff and the volunteer community. In studies conducted on employees' perceptions of psychological contract breaches, employees have higher rates of absenteeism when they think their employer has not fulfilled the psychological contract (Bordia, 2008; Deery, 2006). Again, if these results are generalizable to volunteer communities, pervasive absenteeism can cause significant difficulties in managing a 24/7 crisis line, as BRCIC does. Therefore, breach of psychological contracts are not merely a

failure to meet volunteer expectations, they are also detrimental to nearly every aspect of the service that an agency provides.

Social Capital

Though upholding the agency's psychological contract with the volunteers is a vital aspect of volunteer retention, it is also an investment in social capital (Warburton & Stirling, 2007). Research has shown that investing in social capital in this way, particularly in the development and maintenance of employees, is extremely beneficial to an agency (Akdere & Roberts, 2008; Barros, 2005; Hezlett & Gibson, 2007). Akdere and Roberts (2008) state in their study that social capital is one of the best investments an agency can make in terms of cost-benefit. Often this aspect of agency work can be neglected because, though it is quantifiable through research, creating social capital is not usually the main function of an agency.

Social Capital in Recruitment. One of the ways social capital is vital to an agency like BRCIC is through the recruitment of volunteers. Word-of-mouth is one of the most important recruitment techniques that BRCIC employs (A. Pardue, personal communication, July 17, 2013), and without a satisfied past and current volunteer community, volunteer recruitment takes a serious hit (Akdere & Roberts, 2008). There are consequences beyond losing volunteers if the agency is unable to create a community of support in order to develop social capital among volunteers.

Several researchers have found that good management and supervision are the most effective way to develop meaningful relationships within a volunteer or agency community (Akdere & Roberts, 2008; Beattie, 2006). Attentive supervisors, such as the training staff at BRCIC, provide a critical role in the integration of new volunteers into that community (Akdere & Roberts, 2008; Beattie, 2006). By fostering a warm and supportive community, supervisors

can potentially increase social capital of an agency by facilitating the building of relationships between volunteers at the agency.

Financial Benefits of Social Capital. Social capital has been shown to not only improve volunteer retention in the voluntary sector, but also to improve an organization's earnings (Barros, 2005). This study on the positive relationship between earnings and social capital within the business sector also indicates that the most vital aspect of this investment is a well-educated, purposeful, and competent supervisor (Barros, 2005). Once more, the necessary means to building social capital and upholding a psychological contract is based in a supervisory staff whose size and training is sufficient to attend to the building of relationships amongst the volunteers and community (A. Pardue, personal communication, July 17, 2013). Barros (2005) states that human capital is the key to developing social capital in a way that is beneficial to an agency. Part of the skills supervisors need for working with employees are the same as those involved in the training of phone volunteers, such as good communication skills, empathy, and a grasp of NVC (Barros, 2005). Though this study is not based in the voluntary sector, Barros (2005) suggests that the results are likely to be generalizable to other sectors besides the business sector.

Mitigating Emotional Risk to Volunteers. Research supports the fact that social capital has a positive effect on agencies' finances and is also part of agencies upholding the psychological contract with their volunteers (Barros 2005). However, it is also an important factor in mitigating risk in the actual workers (Sapp, Kawachi, Sorensen, LaMontagne, & Subramanian, 2010). The volunteers at BRCIC do emotionally draining work which can cause them emotional stress during and after their shifts. In a study on the effect of social capital on stress management in the workplace, Sapp et al. (2010) found people in jobs with low levels of

support reported the highest levels of strain. In dealing with volunteers, agencies like BRCIC have a responsibility to provide the support that will reduce those levels of strain. By building relationships between volunteers and staff as well as facilitating volunteer relationships with each other, the staff at BRCIC can create increased systems of support for volunteers through investing in social capital.

Best Practices

When discussing the benefits and challenges of volunteer retention and the factors which figure into this issue, it is important to provide an overview of the research-supported best practices for volunteer retention. Brudney (1999) suggests that one of the issues specific to non-profit agencies' difficulties in retaining volunteers rests solely in the management of those volunteers. Volunteers often join non-profit organizations because they are interested in the values and mission of the organization, so best practices include rewarding them and recognizing them for doing the work based solely on their desire to be a positive force for the agency (Brudney, 1999). One of the ways that BRCIC maintains its funding from the community is through maintaining best practices in their work with their clients (A. Pardue, personal communication, July 17, 2013). Thus, it is important for this agency to be informed about the best practices in supporting the volunteers who are providing telephone counseling to the clients as well.

In terms of providing the best training to employees and thus the best services to the clients, Chen (2002) suggests that good leadership is the best motivator for individuals as well as a whole group. Immediate supervisors will be most effective, according to Chen (2002), when they provide socio-emotional support. If volunteers have the same supervision needs as employees, this type of support would consist of supervisors providing in-person debriefs with

volunteers to discuss emotionally draining calls and any challenges the volunteers are having with the work. Oftentimes, volunteers will choose not to reach out to their supervisor for help, so staff presence in the room with the volunteers can be invaluable in terms of providing emotional support (A. Pardue, personal communication, July 17, 2013).

Self-Efficacy

The work of Chen (2002) and other researchers also suggests that supportive supervision is also essential to a volunteer's sense of self-efficacy (Bandura, 1978). In a study on burnout rates in child welfare workers, Chen and Scannapieco, (2010) found that the more supportive a supervisor, the higher a worker's sense of self-efficacy and willingness to remain at the job in spite of the high-stress inherent in child welfare work. Additionally, workers with lower senses of self-efficacy require supportive supervision even more than workers with a higher sense of self-efficacy (Chen & Scannapieco, 2010). Though the training at BRCIC to prepare the volunteers for crisis line work is focused on supporting them and helping them develop their own sense of self-efficacy, it is likely that the volunteers need continued supportive supervision once they begin their work on the crisis lines after completing training (A. Pardue, personal communication, July 17, 2013). Bandura's (1978) seminal work on the theory of self-efficacy clearly demonstrates that the more people consider themselves effective, the more effective they are in reality. In other words, self-efficacy involves more than competence, it also requires the individual's perception of him/herself as effective, which is a distinct element of a behavioral process. Thus, supportive supervision can potentially both promote self-efficacy and also help support the volunteers with lower senses of self-efficacy in order to retain the maximum number of effective volunteers (Bandura, 1978; Chen & Scannapieco, 2010).

Supervisors' Effect on Self-Efficacy. In this vein, Nilsson's (2007) study on factors which influence self-efficacy in trainee counselors indicates that the quality of the supervisory relationship is one of the essential aspects of student self-efficacy. This study indicated that the perception of the supervisor as trustworthy even had an impact on the trainee counselors' coursework (Nilsson, 2007). Of course, this has implications for the trainee crisis counselors at BRCIC because that relationship may impact their comfort level with the coursework as well as their efficacy once they become trained crisis counselors. Nilsson's (2007) study indicates that the supervisory relationship is important from the time the volunteers begin training and continues to have an effect on their self-efficacy and work satisfaction as they begin their work as telephone crisis counselors.

While Nilsson (2007) does suggest that supervision is critical to a professional counselor's development, there is very little research on supervision for volunteer counselor development. However, the research on students training to be professional counselors demonstrates the need for supervision to fulfill a variety of needs, specifically interpersonal needs and learning needs, in order to increase students' self-efficacy (Fernando & Hulse-Killacky, 2005). Fernando and Hulse-Killacky (2005) indicate the need for supervision to be extremely purposeful in nature because it is the best way for counselors to grow in their skills and confidence. Within a volunteer agency like BRCIC, this could mean that supervisors providing in-room support to the volunteers on the lines need to maintain a balance between expressing interest and concern for the volunteers personally as well as providing clarification on policy and ways to handle different types of callers.

Transformational Leadership

Though there is a dearth of literature on the specifics of the effect of good supervision on volunteer telephone crisis counselors, there is a significant amount of research on the importance of supervision upon employees. Kark, Shamir, and Chen (2003) found that there is a positive correlation between employee empowerment and transformational leadership. The theory of transformational leadership suggests that leaders can motivate their followers to exceed expectations in terms of the followers' skills at their job (Bass, 1985). In layman's terms, this theory suggests that good leadership can cause an overall improvement in work performance at an agency. Part of that good leadership involves being mission-focused, which means that the supervisor must be aware of the purpose behind the mission of the agency and be able to relate that mission effectively to supervisees. Hater and Bass (1988) characterize transformational leaders as charismatic people, who provide individualized consideration and providing intellectual stimulation to the people that they supervise. According to observations shared by training staff members at BRCIC, volunteers who demonstrate an exceptional work performance tend to complete their volunteer hours quickly and perform their counselor duties more thoroughly.

Hater and Bass (1988) state in their research that transformational supervision is effective in a variety of fields, such as military or corporate settings. Not only can this type of effective leadership help followers by keeping them focused on the mission or goal of the work, it can also lead to the followers doing more and better work in their field (Hater & Bass, 1988.) Since nonprofit agencies have a goal of donating all their resources to the community, the mission of the work tends to be a motivating factor for volunteers. Thus, leaders who keep followers focused on the goal of the work could potentially be even more successful in the nonprofit arena.

Influence of Transformational Leadership. Later studies of transformational leadership and its effect on employees in other fields suggest that transformational leadership can have an effect on followers in a variety of fields (Kark et al., 2003; Dvir, Eden, Avolio, & Shamir, 2002). In a study by Kark et al. (2003) on transformational leadership in a banking setting, the researchers found that followers' dependence on their leaders does not necessarily mean anything negative about dependent followers' work. In fact, this study shows that dependence on one's supervisor for support and supervisee empowerment can both result simultaneously from supportive and mission-focused transformational leadership (Kark et al., 2003). Returning to the context of volunteer crisis counselors and their relationship with their supervisors, this research indicates that transformational leadership is generalizable to a variety of fields of employment, which could potentially mean that this same relationship exists in the volunteer sector (Kark et al., 2003).

Qualities of Transformational Leaders. It seems clear that Bass's (1985) concept of transformational leadership goes beyond competent supervision. Dvir et al. (2002) suggest that transformational leaders have the ability to meet the individual needs of followers, such as providing supportive feedback and purposeful instruction, in order to maintain the followers' interest in and commitment to the mission of the agency. According to the literature on best practices for volunteer retention, providing extra support and recognition helps the volunteers feel valued and respected for the work they do (Weeks & MacQuarrie, 2011; Brudney, 1999).

Gaps in Knowledge

Reviewing the literature demonstrates the areas in which research is sparse. While there is plenty of literature about preventing employee burnout or burnout within other volunteer sectors, there is relatively little research on the specific field of volunteer retention in the field of

telephone counseling. Along this vein, psychological contract breach has not been explored in the field of telephone counseling. In fact, most of the research on psychological contracts pertains to employment settings rather than volunteer settings. Within the volunteer sector, breach of psychological contracts has been explored in similarly high-stress volunteer positions like palliative care, rather than other volunteer fields like telephone counseling (Huynh et al., 2012). However, once again there is not enough literature on psychological contract breach within an agency like BRCIC whose volunteers are highly trained telephone crisis counselors.

Research on the theory of social capital is similarly limited in terms of knowledge on the effect of social capital within the volunteer sector. While it is clear that social capital is important to volunteer recruitment, other aspects of social capital, such as financial benefits to the agency, have only been explored in an employee setting rather than a volunteer setting, (Barros, 2005). Social capital accrued by better-quality supervision has been shown to increase job satisfaction in employees in high-stress environments similar to that of crisis counselors, such as the field of child welfare (Chen & Scannapieco, 2010). However, child welfare workers are employees rather than volunteers like the ones at BRCIC.

Within the studies of self-efficacy, there is abundant research on how supportive supervision can increase counselors' self-efficacy. According to Bandura's (1978) theory, self-efficacy often leads to empirical performance efficacy as well. However, once again, this research is based on professional counselors rather than volunteer crisis counselors (Fernando & Hulse-Killacky, 2005; Nilsson, 2007). Factors which influence volunteer telephone crisis counselor self-efficacy are a relatively unexplored field. Lastly, the theory of transformational leadership has been well-explored in a variety of employment settings, yet it has not been

explored to any degree in volunteer settings, nor in the specific setting of volunteer telephone counseling.

Therefore, the purpose of this study is to explore the relationship between increased and purposeful supervision of volunteer telephone counselors at BRCIC and volunteer retention. In particular, this study will focus on the following research questions: Does supportive supervision impact volunteers' fulfillment of their 72-hour commitment at BRCIC? Does supportive supervision impact the speed with which volunteers complete their 72-hour volunteer commitment at BRCIC? Does supportive supervision have a positive impact on volunteer groups' average hours completed?

Chapter 3: Methodology

Target Problem

The target problem addressed in this study was volunteer retention at BRCIC. Anecdotally, the training staff at BRCIC noticed that during the year of 2012, fewer volunteers were completing their commitments to the agency. Specifically, the program coordinator for The Phone noticed a disconnect between the staff and volunteers, which she attributed to the agency decreasing the number of clinical staff supporting the volunteers. Since the training staff consisted of paid full and part-time members of staff, training each volunteer had a substantial cost to the agency, which was previously offset by the volunteers completing their commitments. In the past, the average volunteer remained at the agency for approximately three years (A. Pardue, personal communication, July 17, 2013), which was a substantial return on the investment of training the volunteers. Therefore, volunteers failing to complete even their minimum commitment resulted in increased costs to the agency without the payoff of the minimum requirement and the investment in building an experienced volunteer counselor base.

Supportive Supervision

The intervention applied was in-person check-ins of the volunteers inside the call room by the author. The author also provided desserts and treats for the volunteers to express appreciation when she did her check-ins on new volunteers in the call center in addition to expressing verbal appreciation for their volunteer work. She made in-room safety decisions about callers/chatters and provided emotional support to help volunteers make decisions about callers/chatters and provided opportunities for volunteers to debrief chats/calls with a member of staff. Lastly, she facilitated relationships between volunteers and other call room staff members

by doing introductions and utilizing her knowledge of both the volunteers and staff to help them recognize commonalities between themselves.

The author worked to see each volunteer approximately once a month during his/her shifts in order to observe and support them during their shifts. The first month that volunteers were on the lines, the author went to the call/chat rooms nearly every day each week to see the volunteers because the first month is when the volunteers tend to build confidence on the crisis lines. The check-ins began with questions about the shift, such as, “How is your shift going? Has it been busy? Any difficult callers/chat visitors?” Depending on the volunteer’s response, the author would then allow them to debrief any tough calls he/she had taken. During the debriefs, the author would model NVC with the volunteer and actively listen to any concerns he/she had about the people he/she spoke to during the shift. This gave the author the opportunity to validate the volunteer’s emotions, offer suggestions for ways to handle specific situations, and sometimes to offer in-person decision-making if the volunteer was currently engaged in a call/chat that required a staff safety decision.

After doing a check-in on the status of the volunteer’s shift, the author would then do a personal check-in on the volunteer. A lot of these personal check-ins were based on details that the author learned about the person during the process of training him/her. If the volunteer was a student, the author would ask how the semester was going for the volunteer. This gave the author and volunteer an opportunity to debrief their school/work anxieties. The goal of debriefing personal concerns was to emotionally support the volunteer in multiple aspects of his/her life in order to prevent burnout. Lastly, the author would encourage conversations between other staff members in the call rooms and the volunteer in order to facilitate connections between the volunteers and the call room community. The author’s two go-to topics for group

involvement were favorite foods/restaurants in the area and pets. After talking to the volunteers, the author would thank them personally for volunteering their time that day. The intervention was nonrandomly applied to the training classes that the author trained and supervised (Fall 2012, Spring 2013, Summer 2013).

Population and Sample

The population that this study focused on was people who applied and completed training to be crisis line volunteers. The sample consisted of all the new BRCIC volunteers who completed their training as part of the following training groups: Fall 2011, Spring 2012, Summer 2012, Fall 2012, Spring 2013, and Summer 2013. Masters-level interns in each training class were excluded from the study due to their additional volunteer requirements for school credit. These interns were expected to complete 240 hours on the lines for their Master's programs. The final sample for the study consisted of 101 volunteers, 49 of whom composed the nonintervention group (training groups not receiving supportive supervision from Fall, 2011, Spring 2012, and Summer 2012), and 52 of whom composed the intervention group (training groups receiving supportive supervision from Fall 2012, Spring, 2013, and Summer, 2013).

Outliers. Upon analyzing the data pertaining to volunteer hours, it became evident that there was one outlier skewing the data. This volunteer's average hours were 3.75 standard deviations away from the mean total hours of her group, the Summer 2012 training class. When this volunteer was excluded from the group, the group's mean total volunteer hours went from 165.83 hours to 95.01 hours. Similarly, the average hours per volunteer for this group went from 12.11 hours per month to 8.67 hours per month once this volunteer was excluded from the study.

Descriptive Statistics (Outliers and Interns Excluded). As predicted, the Chi Square test reflected the homogenous nature of the study sample's demographic information.

Volunteers were labeled as Black, White, or Other. Since there were so few members of the sample who labeled their race as “Other,” they were excluded from the Chi Square because the small numbers would have rendered the analysis invalid. The analysis of race between groups was therefore a sample size of 93, rather than 101. Once the author compared the intervention and nonintervention groups demographically, the Fisher’s Exact Test revealed no significant difference ($p=1.00$) between groups. Similarly, the difference in gender between groups was not statistically significant either. The mean ages between groups were statistically insignificant. Thus, the analysis, as shown in Table 1 *Gender and Race by Group Cross Tabulation* and Table 2 *Descriptives for Age by Group Condition*, demonstrated that the intervention and nonintervention groups were demographically similar, consisting predominately of Caucasian women in their mid-20s.

Table 1 Gender and Race by Group Cross Tabulation

Nonintervention Group=0 Intervention Group=1			Race		Total
			B	W	
0	Gender	F	6	31	37
		M	1	5	6
	Total		7	36	43
1	Gender	F	8	34	42
		M	1	7	8
	Total		9	41	50
Total	Gender	F	14	65	79
		M	2	12	14
	Total		16	77	93

Table 2 Descriptives for Age by Group Condition

			Statistic	Std. Error
Age	Non Intervention	Mean	24	1.7
		Std. Deviation	8.7	
		Skewness	2.5	0.5
		Kurtosis	5.8	0.9
	Intervention	Mean	27	2.2
		Std. Deviation	11.7	
		Skewness	2.1	0.4
		Kurtosis	3.7	0.8

Variable Measurement

Dependent Variable. Volunteer retention at BRCIC was considered the major dependent variable construct, measured with two ratio level and one nominal level variables derived from volunteer hours recorded in BRCIC’s helpline management software, Icarol. The first nominal level dependent variable was whether or not each volunteer completed his/her 72-hour commitment, measured by 1/0. The next dependent variable was the speed, as measured in months, with which volunteers completed their commitment. The final ratio level dependent variable was the number of hours of volunteer credit given in Icarol over the course of their time at BRCIC.

Independent Variable. Application of the intervention was a nominal level variable based on whether or not the volunteer received supportive supervision, which was measured by 1/0.

Group Assignment

This study was quasi-experimental with nonequivalent comparison groups with similar, but not identical, demographic characteristics. This research took advantage of naturally occurring groups resulting from the three volunteer training groups that BRCIC did each year. The author served as supportive supervisor and trainer for three groups and compared them with three prior groups. The six groups included in this study were the Fall 2011, Spring 2012, Summer 2012, Fall 2012, Spring 2013, and Summer 2013 training classes. The author completed her training as volunteer in Fall 2011. She interned and volunteered as staff and provided the supportive supervision intervention to the training groups of Fall 2012, Spring 2013, and Summer 2013. The pre-intervention groups consisted of the training groups of Fall 2011, Spring 2012, Summer 2012.

Statistical Analysis

Analysis was done solely by comparison groups due to the demographic homogeneity. The author analyzed the first research question of whether increased supportive supervision of volunteers impacted the retention of volunteers for their 72-hour commitment to BRCIC with a Chi Square statistic. In this study, the author analyzed volunteers' attainment of the 72-hour commitment as a function of the groups to which the volunteers were assigned. The second research question of whether increased supportive supervision impacted the speed with which volunteers completed their 72-hour volunteer commitment at BRCIC was analyzed using survival analysis, with the time it took volunteers to reach 72 hours analyzed as a function of their group assignment. Finally, the author used a t-test to analyze the last research question of whether increased supportive supervision had a positive impact on volunteer groups' average hours, with the average volunteer hours analyzed as a function of their group assignment.

Chapter 4: Results

Variables

Though most of the analyses done on these data were with nonparametric tests, the analyses of the mean hours for the intervention and nonintervention utilized t-tests and ANOVAs. Since substantial portions of the data were non-normal, based on the kurtosis and skewness, the author ran log transformations on them in order to normalize the data pertaining to the average monthly volunteer hours and the average total volunteer hours in each group. Even with the log transformations, the kurtosis was 1.7 for the nonintervention group's total hours and 2.9 for the intervention group's total hours; the skewness was -0.5 for the nonintervention group, and 0.7 for the intervention group. The kurtosis for the average monthly hours was 0.6 for the nonintervention group and 2.0 for the intervention group; the skewness was 0.4 for the nonintervention group, and 1.0 for the intervention group.

The descriptives for the continuous data, as shown in Table 3 *Descriptives for Groups' Time to 72 Hours in Months*, Table 4 *Descriptives for Groups' Total Hours*, and Table 5 *Descriptives for Groups' Average Monthly Hours* without the log transformations were: Time to 72 Hours in Months (M=6.8, SD=3.6 for the nonintervention group; M=6.3, SD=2.1 for the intervention group), Total Volunteer Hours (M=157.6, SD=131.7 for the nonintervention group; M=110.7, SD=62.2 for the intervention group), Average Monthly Volunteer Hours (M=12, SD=5.2 for the nonintervention group; M=12.8, SD=6.3 for the intervention group), and Volunteer Age (M=24, SD=8.7 for the nonintervention group; M=27, SD=11.7 for the intervention group).

Table 3 Descriptives for Groups' Time to 72 Hours in Months

			Statistic	Std. Error
Time To 72 Hours	Non Intervention	Mean	6.8	0.7
		Std. Deviation	3.6	
		Skewness	0.1	0.5
		Kurtosis	0.3	0.9
	Intervention	Mean	6.3	0.4
		Std. Deviation	2.1	
		Skewness	-0.5	0.4
		Kurtosis	-0.2	0.8

Table 4 Descriptives for Groups' Total Hours

			Statistic	Std. Error
Total Volunteer Hours	Non Intervention	Mean	157.6	26.3
		Std. Deviation	131.7	
		Skewness	2.8	0.5
		Kurtosis	8.0	0.9
	Intervention	Mean	110.7	11.5
		Std. Deviation	62.2	
		Skewness	4.2	0.4
		Kurtosis	20.2	0.8

Table 5 Descriptives for Groups' Average Monthly Hours

			Statistic	Std. Error
Average Monthly Hours	Non Intervention	Mean	12.0	1.0
		Std. Deviation	5.2	
		Skewness	2.2	0.5
		Kurtosis	5.3	0.9
	Intervention	Mean	12.8	1.2
		Std. Deviation	6.3	
		Skewness	2.5	0.4
		Kurtosis	7.5	0.8

Attainment of 72-Hour Commitment

The analysis of volunteers' attainment of their 72-hour commitment utilizing Fisher's Exact Test showed no significant difference between groups ($p=.42$). The groups were analyzed with a Chi Square statistic, with 0 representing the nonintervention group and 1 representing the intervention group. Table 6 showed the nonintervention group had 57.5% of its members who attained the 72-hour commitment and 42.5% who failed to meet that goal. The intervention group had 47.5% of its members complete the 72-hour commitment and 52.5% fail to complete the commitment during the course of the study. In total, 51.5% of the total sample completed their commitment, and 48.5% of the sampled failed to complete the commitment. The nonintervention group had higher numbers of volunteers who completed their commitments and lower numbers of volunteers who failed to complete their commitments. This analysis used all the 101 members of the final sample. The nonintervention group had an additional year of time to complete their commitment in comparison with the intervention group, which means that

some of the members of the intervention group were still in the process of attaining their 72 hours when these data were collected.

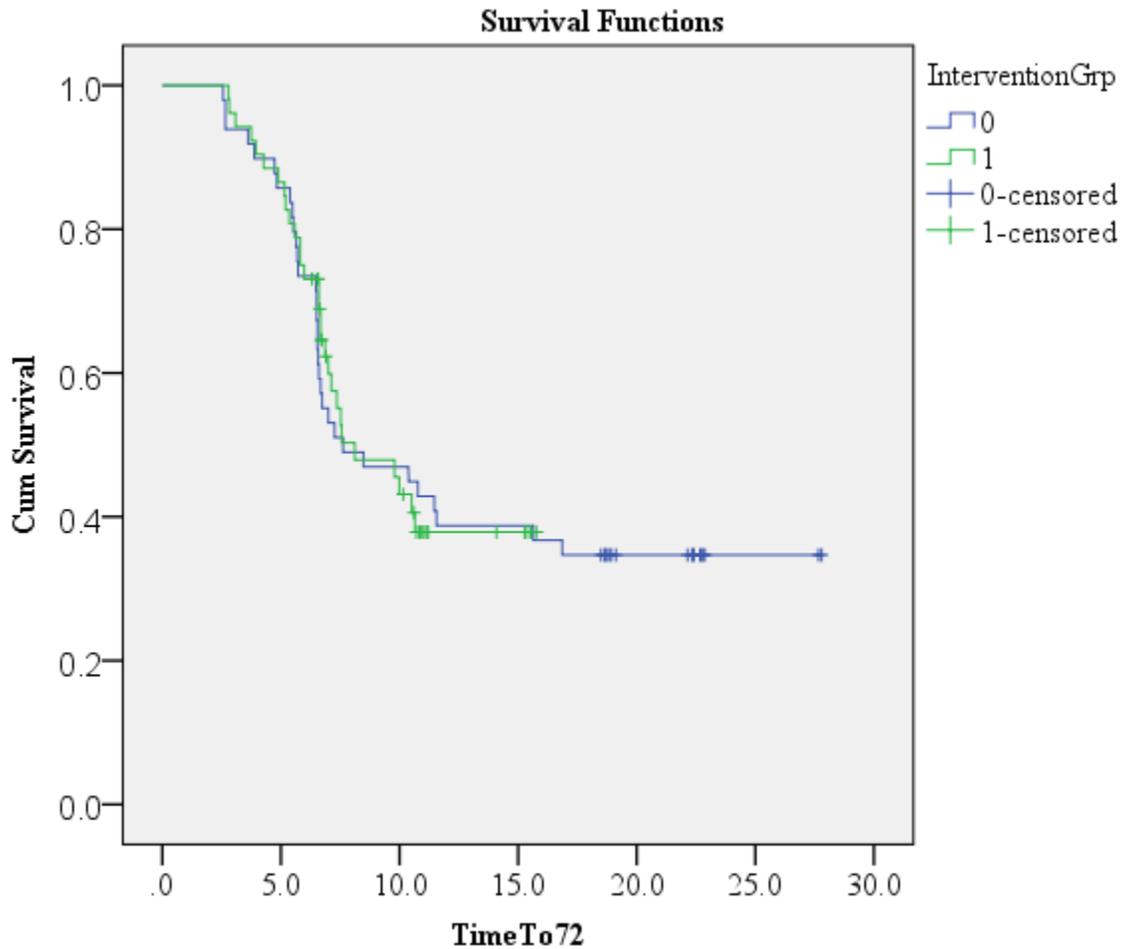
Table 6 Attainment of 72 Hours by Groups Cross Tabulation

1		Failed to complete 72 Hours	Completed 72 hours	Total
0	Number of people	17	23	40
	% of Nonintervention Group	42.5%	57.5%	100.0%
	% of of Total Group	34.7%	44.2%	39.6%
1	Number of people	32	29	61
	% of Intervention Group	52.5%	47.5%	100.0%
	% of Total Group	65.3%	55.8%	60.4%

Time to 72 Hours

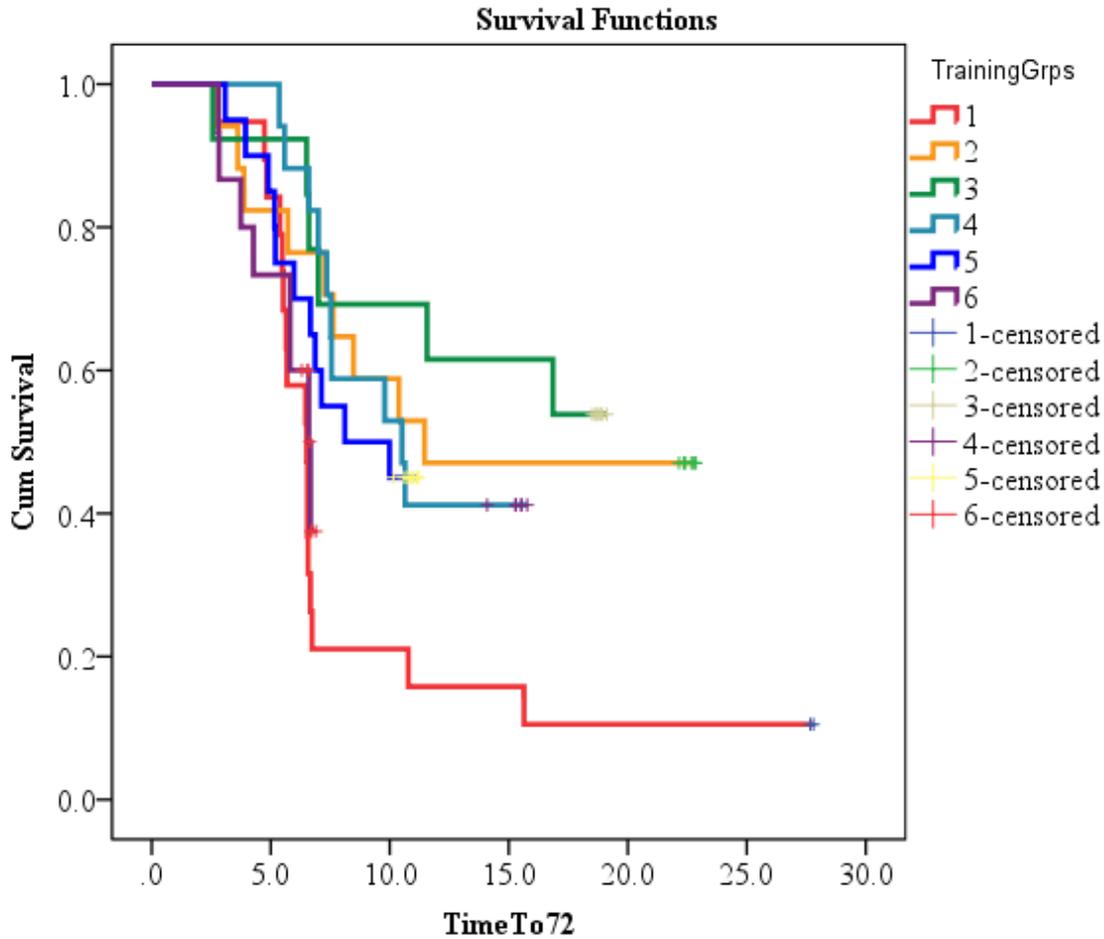
The mean amount of time in months that volunteers took to reach the 72 hour commitment was slightly less for the intervention group (M=6.3) compared to the non-intervention group (M=6.8). This difference, however, was not statistically significant (p=.36). The groups were analyzed based on how long it took them to reach their 72-hour commitment. There were no trending differences between groups numerically or visually (See Figure 1 *Survival Analysis of Groups*). The one area of this analysis that shows a very slight difference between groups was at the 10-month mark. At the 10-month mark, there was a slight visual difference in between the intervention and nonintervention group. However, that difference was still not statistically significant. Additionally, the nonintervention group had a longer amount of time over which they were analyzed, which is why there is more data on that group.

Figure 1 Survival Analysis of Groups



The researcher also used survival analysis to examine the speed with which each training group completed the 72-hour commitment (See Figure 2 *Survival Analysis by Training Groups*). The mean time in months that it took the nonintervention groups to complete their volunteer commitment were: 8.8 months for the Fall 2011 group, 14.4 months for the Spring 2012 Group, and 14.2 months for the Summer 2012 group. The mean time in months for the intervention group were: 11.1 months for the Fall 2012 group, 8.4 months for the Spring 2013 group, and 5.8 months for the Summer 2013 group.

Figure 2 Survival Analysis by Training Groups

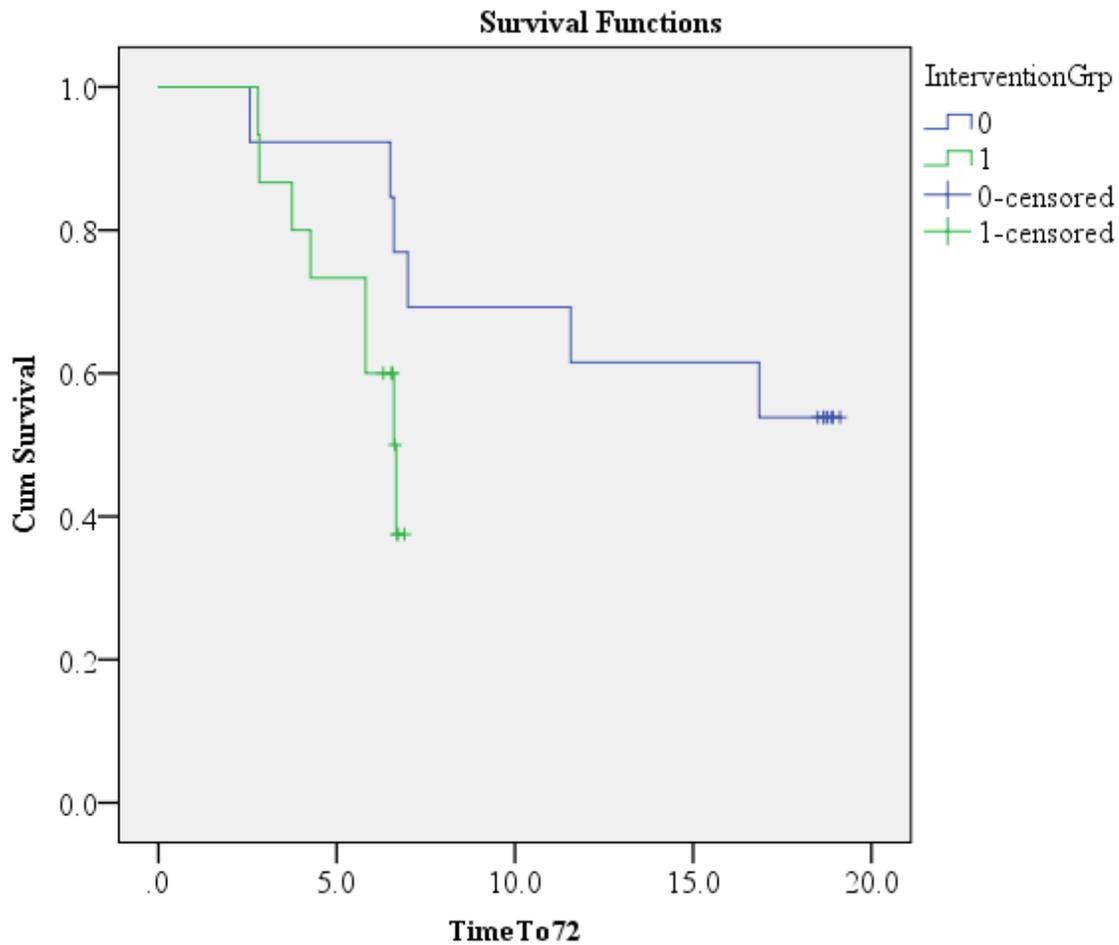


Parallel Groups

Since the nonintervention groups had between 1 and 2 years of increased time to complete their commitment, simply due to the timing of the study, the author did survival analysis comparing the Summer 2012 and Summer 2013 classes. These two classes were particularly important because they reflected the trends in the nonintervention and intervention groups because the downward trend of volunteer hours became apparent with the Summer 2012 class. The Summer 2013 class reflects the upward trend of volunteer hours because they were the final intervention training group in this study, which meant that there were increasingly high expectations of the volunteers' ability to fulfill their commitments. There were 13 members of

the Summer 2012 class and 15 members of the Summer 2013 class, for a total of 28 volunteers in this analysis. The difference between these groups approached statistical significance ($p=.06$). The mean for the average amount of time it took volunteers to complete their 72 hours for the Summer 2012 class was 14 months, while it was 5.8 months for the Summer 2013 class. There was also a visual difference between groups (See Figure 3 *Survival Analysis of Summer 2012 and Summer 2013 Classes*).

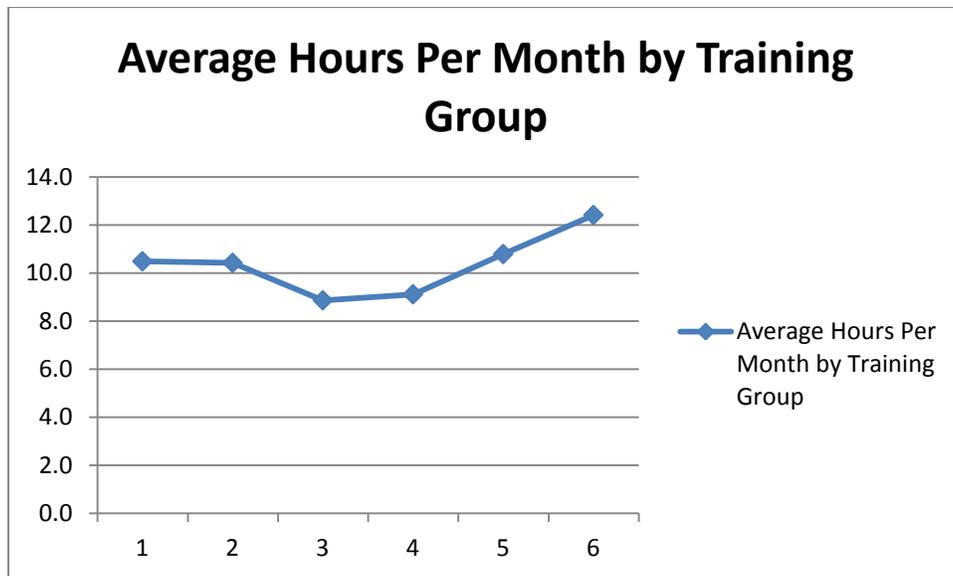
Figure 3 Survival Analysis of Summer 2012 and Summer 2013 Classes



Mean Hours of Groups

The author used a log transformation to normalize the distribution of the data prior to using the t-test and ANOVA statistics. The t-tests used to compare the total volunteer hours showed no significant difference between groups ($p=.96$). Similarly, the average hours per month for the volunteers was not significant ($p=.4$). The average hours per month were slightly higher in the intervention group, and the average total hours were slightly higher in the nonintervention group. It is important to note that the nonintervention group also had increased amounts of time to achieve those total hours due to the dates of the study. A one-way ANOVA of the mean monthly hours per training group, rather than per intervention group, showed an upward trend of hours that was not statistically significant (See Figure 4 *Average Monthly Hours by Training Group*).

Figure 4 Average Monthly Hours by Training Group



In order to assess if the extra time that the nonintervention group had to complete their commitment to BRCIC gave them an added advantage in the analysis, the author compared the volunteer hours between groups during their first seven months on the lines. The reason for this

comparison was to assess if the intervention group completed more hours during that time period. The difference between groups was not statistically significant ($p=.55$). In addition, the nonintervention group actually had a higher mean for the volunteer hours per month than the intervention group.

Chapter 5: Discussion

This study set out to investigate the effect of supportive supervision on volunteer retention and volunteer hours at BRCIC. Three training groups of volunteers received the standard amount of supervision in keeping with typical services, and three training groups received increased amounts of supervision from one member of BRCIC's training staff. The three variables that this study investigated were volunteers' fulfillment of their 72-hour commitment, the speed with which the groups completed their commitment to BRCIC, and the average total and monthly hours completed by each group. This study took place between the years of 2011 and 2014.

Contributions to the Literature

Researchers have found that volunteers join agencies based on the assumption that they will have some relational needs met in exchange for their free labor (Bordia, 2008; Bordia et al., 2010; Stirling et al., 2011). In this vein, building warm relationships between the volunteers and the agency's staff can improve the quality of the volunteers' work (Bordia, 2010). Lastly, researchers have shown that the social capital of volunteer agencies is particularly important to their continued functioning in the community (Akdere & Roberts, 2008; Barros, 2005; Hezlett & Gibson, 2007). This research is what guided the hypotheses of this study and the subsequent intervention that was used to improve volunteer retention at BRCIC.

Attainment of 72-Hour Commitment. This study hypothesized that the intervention group, which received increased supervision and support from training staff, would have more members who attained their 72-hour commitment than the nonintervention group. This was analyzed on a yes/no basis of whether or not the volunteers in each group completed 72 hours of unpaid work for BRCIC. However, the results showed that there was no significant difference

between groups. In fact, the nonintervention group, which received less supervision, had fewer members fail to complete their commitment and more members who were actually able to complete their commitment. What this could mean in terms of the study is that the intervention was not effective in increasing volunteer retention for their full commitment to BRCIC.

It is important to note that the results of volunteers' completion of their 72-hour commitment were based on their completion of this commitment over time. The nonintervention group had a significantly higher amount of time to complete their commitment because of the timing of the study. The Fall 2011 training group, which was the earliest training group in the study, had from November 2011 to February 2014, a total of nearly 2.5 years to complete this commitment. Conversely, the latest group in the study, the Summer 2013 class, only had six months to complete their commitment because the data were collected at the end of February 2014. These data may change over time because many of the volunteers in the intervention group are still current volunteers taking hours at BRCIC.

Time to 72 Hours. This study hypothesized that the volunteers in the intervention group who received supportive supervision would complete their 72-hour commitment more quickly. This survival analysis used the completion of 72 hours as the point of "death." From both a visual and statistical perspective, the findings showed that there was very little difference between the speeds with which the groups attained their 72-hour commitment. Based on this research, it appears that the volunteers in both groups have extremely similar speeds to completion.

There is a slight visual difference between groups, though not a statistically significant one, which indicates that volunteers in the intervention group may complete their commitment slightly faster around towards the 10-month mark. This may potentially indicate that the

intervention has a slight effect on the volunteers who are slower in completing their commitment to BRCIC. Additionally, the survival analysis showed that the volunteers in the intervention group, on average, completed their commitment in slightly less time, while the volunteers in the nonintervention group took longer, on average. The analysis on volunteers' first seven months of work on the lines showed that the groups were very similar in their progress during the first part of their commitment. It would seem that this intervention was more important to stragglers than the groups as a whole.

Parallel Groups. Since this study began due to the downward trend of BRCIC's volunteer retention during the Summer of 2012, the author chose to compare this group with its intervention group counterpart, the Summer 2013 class. The reason for this comparison was due to the anecdotally reported culture changes at BRCIC. The complete lack of integration of the Summer 2012 class into BRCIC's volunteer community was the reason that the author began working to change the culture of the agency. The Summer 2013 class received a lot of the benefits of the gradual culture changes at the agency, because many other ACS counselors at that point had begun consciously working to emotionally support the volunteers.

Comparing the parallel groups using survival analysis showed the most clinically significant changes between retention of those volunteers. Similarly, survival analysis showed that the difference between groups was approaching statistical significance as well, which may indicate that this study, which is long-term in nature, may need further investigation to determine the efficacy and significance of this intervention. However, it is important to note that these two classes represent the best and the worst in terms of volunteer retention during the course of this study, and that this may be merely attributable to the individual volunteers themselves. Due to

the very small sample size in this analysis, it would be necessary to replicate this study in order to get more information about the validity of this type of comparison.

Mean Hours of Groups. The last hypothesis of this study was that the average volunteer hours, both total and per month, would be higher in the intervention group than in the nonintervention group. Based on the average total and monthly hours completed by volunteers in each group, there was no statistically significant difference between the two groups. Still, once the data were broken down into the six training classes, it became clear that the nonintervention group was experiencing a downward trend in the monthly hours completed by volunteers. Conversely, the intervention group experienced an upward trend in the monthly volunteer hours. Again, this is not statistically significant, nor is it necessarily attributable to the intervention. However, the fact that the downward trend was reversed following the start of the intervention and the last training class who received the intervention was the first class to actually meet their 12-hour per month commitment to BRCIC is definitely clinically significant.

Since the nonintervention groups had a longer amount of time to do their volunteer hours, the author compared means of the volunteer hours between the two groups during their first seven months on the lines. There was no statistically significant difference between group means of their monthly or total hours. Since the survival analysis showed that the widest variance between the intervention and nonintervention groups was towards the end of their commitment, this supports the hypothesis that the intervention was more effective for stragglers.

Cultural Changes at BRCIC. One aspect of this study that is anecdotal in nature, was the cultural changes that occurred over time at BRCIC. Certain new counselors were very responsive to staff check-ins and began emailing staff members to request feedback on challenging calls or chats. This solicitation of feedback was encouraged by the author, and it

began becoming more common for volunteers to email staff when they wanted feedback. This additional comfort volunteers developed in contacting staff began to extend to other aspects of their work, such as emailing staff to ask for volunteer credit that reflected their hours when they stayed late. The simple act of ensuring that volunteers were given credit for their extra hours gave staff an opportunity to thank volunteers for going above and beyond in their work so that the volunteers felt appreciated. As this became more common, other staff members encouraged volunteers to email the author to get credit for their hours. This behavior represented a shift in the culture of the agency because the volunteers felt more comfortable asking for support and assistance from staff.

Volunteers also verbally reflected their relief at having a member of staff checking in on them during their shifts, so that they did not have to seek out staff members for support. They expressed a preference for the support of staff being even more available. Interacting with volunteers in person also helped the author give more personal and specific feedback to the volunteers in order to express appreciation and help them improve. The volunteers expressed to other members of staff how much they preferred in-person debriefs and their appreciation of staff “drop-ins” to check on them and the status of their shifts. These cultural changes, while not measured in this study, were likely a contributing factor to the increase in volunteer hours each month over the course of the intervention.

Limitations

This study had several limitations in terms of the application of the intervention (and lack of intervention). Each of the nonintervention groups received different levels of supervision from training staff prior to the author joining as a member of training staff. Additionally, the training for crisis line work also changed during the course of this study, which decreased the

amount of time training staff spent with new volunteers. Two classes in the nonintervention group received less time with staff than the Fall 2011 class. Thus, the different classes in the nonintervention group did not receive the same amount of attention from staff.

Similar issues occurred in the application of the intervention to the volunteers in the intervention group. Since the author was the only person applying this intervention, it was only applied to volunteers within her times of availability. This meant that certain volunteers got more support than others, merely due to the author's schedule. Of course, the increased supervision to certain volunteers prevented an even application of the intervention to everyone in the intervention group. The limitations of the application of the intervention were substantial threats to the validity of this study.

History. An additional threat to the validity of this study was the fact that the intervention and nonintervention groups worked at BRCIC at different times. This study took place over the course of three years, during which time cultural and historical changes were happening in the state, country, and world political spheres. It is conceivable, for example, Hurricane Isaac, which caused an increased use of the crisis line during the time that the Summer 2012 class started work on the lines. The added stress of hurricane-related calls could have caused burnout among those counselors, which may account for the comparatively reduced hours that the Summer 2012 training class completed. Additionally, within the small community of BRCIC, there were staff and policy changes that took place over the course of this study, such as the changes in the training itself following the Fall 2011 class. These historical changes could be threats to the validity of the study due to their potential impact on volunteer retention (Campbell & Stanley, 1963).

Hawthorne Effect. One of the other issues with this study was the fact that some of the volunteers knew they were part of a study, which may have motivated them to complete their commitment when they otherwise may have failed to do so (Dickson & Roethlisberger, 2003). While this may have been a positive effect on the study, it is important to note that it was a threat to validity. In particular, the Spring 2013 and Summer 2013 classes both contained some of the author's classmates from the Masters of Social Work program. These volunteers in particular were likely influenced due to their relationship with the author outside of this study, and they expressed their desire to improve the data on volunteer retention at BRCIC by completing their commitment on time.

Diffusion of Treatments. The last threat to validity in this study was the fact that the intervention was not merely given to the intervention group. When the author applied the intervention, members of the nonintervention group who were present in the call center for the check-ins received the same type of support based on their proximity to the intervention group. This, of course, means that the intervention was partially applied to both groups, although the intervention group received much more support from the author than the nonintervention group. However, this created a diffusion of treatments, which was a threat to the validity of this study (Campbell & Stanley, 1963).

Kurtosis and Skewness. While the data were altered using log transformations in order to normalize the distribution, there was still some kurtosis and skewness that indicated that some variables were not normally distributed (See Tables 2, 4, and 5). Thus, threats to internal validity include those interval-level variables not normally distributed.

Future Research

Future research should focus on the groups based on more equal amounts of time so that the intervention and nonintervention groups have similar amounts of time to complete their volunteer commitments. Qualitative data about the culture changes at BRCIC could also contribute to the knowledge on volunteer retention at this agency. Increasing the knowledge about other aspects of volunteer retention at BRCIC, such as the personal motivations of the volunteers, etc. could be investigated qualitatively. Further examination of the data on volunteer hours at BRCIC in the future could yield increased understanding of this intervention due to the fact that this study ended before the groups could have similar amounts of time to complete their commitments. Further studies could examine future training classes at BRCIC to analyze whether the upward trend in volunteer hours continued past this study and intervention.

Conclusions

The intervention applied to three training classes at BRCIC did not affect the retention of the volunteers, nor their hours, in a statistically significant way, which indicates that the intervention was not a substantial impacting force on volunteer retention. One exciting aspect of this research was that the downward trend of volunteers' average hours per month was reversed at the time of the intervention. This could be a trend that researchers can explore in future studies on volunteer retention at BRCIC. Additionally, the comparison of the parallel summer training classes showed a difference between groups that approached significance, which could indicate the efficacy of this intervention and the importance of continuing to monitor it.

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VITA

Robyn Keegan was raised in Baton Rouge, Louisiana. She graduated *magna cum laude* from Louisiana State University in 2011 with a Bachelor of Arts degree in English literature.

Following graduation, she began volunteering as a crisis counselor at BRCIC, thus stimulating her interest in the field of social work. After this experience, she chose to enter graduate school in the School of Social Work at Louisiana State University. She is a candidate for her master's degree in May, 2014 and plans to continue her work in the field of volunteer coordination and crisis intervention.