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## THE HEALTH BENEFITS OF VOLUNTEERING

■■■ A REVIEW OF RECENT RESEARCH ■■■



2007

## AUTHORS

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From the Office of Research and Policy Development,  
Corporation for National and Community Service

*Robert Grimm, Jr.*, Director & Senior Counsel to the CEO

*Kimberly Spring*, Policy Analyst

*Nathan Dietz*, Research Associate and Statistician

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1201 New York Avenue, NW  
Washington, DC 20525  
(202) 606-5000 • TTY: (202) 606-3472  
info@cns.gov • www.nationalservice.gov

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## INTRODUCTION

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Volunteering has long been a common ethic in the United States, with people each year giving their time without any expectation of compensation. While these volunteer activities may be performed with the core intention of helping others, there is also a common wisdom that those who give of themselves also receive. Researchers have attempted to measure the benefits that volunteers receive, including the positive feeling referred to as “helper’s high,” increased trust in others, and increased social and political participation.

Over the past two decades we have seen a growing body of research that indicates volunteering provides individual health benefits in addition to social benefits. This research has established a strong relationship between volunteering and health: those who volunteer have lower mortality rates, greater functional ability, and lower rates of depression later in life than those who do not volunteer. Comparisons of the health benefits of volunteering for different age groups have also shown that older volunteers are the most likely to receive greater benefits from volunteering, whether because they are more likely to face higher incidence of illness or because volunteering provides them with physical and social activity and a sense of purpose at a time when their social roles are changing. Some of these findings also indicate that volunteers who devote a “considerable” amount of time to volunteer activities (about 100 hours per year) are most likely to exhibit positive health outcomes.

These findings are particularly relevant today as Baby Boomers—the generation of 77 million Americans born between 1946 and 1964— reach the age typically associated with retirement. Based on U.S. Census data, the numbers of volunteers age 65 and older should increase 50 percent over the next 13 years, from just under 9 million in 2007 to more than 13 million in 2020. What’s more, that number can be expected to rise for many years to come, as the youngest Baby Boomers will not reach age 65 until 2029.

**Research demonstrates that volunteering leads to better health and that older volunteers are the most likely to receive physical and mental health benefits from their volunteer activities.**



As we have pointed out in two recent reports, *Keeping Baby Boomers Volunteering: A Research Brief on Volunteer Retention and Turnover* and *Volunteer Growth in America: A Review of Trends Since 1974*, Baby Boomers in their late 40s to mid-50s are volunteering at a higher rate than earlier generations did at the same age.<sup>1</sup> At the same time, we see that the more hours per year that Boomers spend on volunteer activities, the more likely they are to continue to volunteer from year to year. Baby Boomers are a highly talented and motivated group who can help solve some of our most challenging social problems, including helping seniors live independently. However, the findings regarding the health benefits of volunteering indicate that attention should also be given to the strong possibility that the very act of

volunteering may allow individuals to maintain their independence as they grow older and will likely face increased health challenges.

The following report documents some of the major findings from studies that look at the relationship between health and volunteering, with particular emphasis on those studies that seek to determine the causal relationship between

these two factors. These studies ask whether volunteering actually leads to improved health, or simply that healthy individuals are more likely to volunteer. While it is undoubtedly the case that better health leads to continued volunteering, these studies demonstrate that volunteering also leads to improved physical and mental health. Thus they are part of a self-reinforcing cycle.



<sup>1</sup> Both reports, *Keeping Baby Boomers Volunteering* and *Volunteer Growth in America*, can be downloaded at the Corporation's website: [www.nationalservice.gov](http://www.nationalservice.gov).

## THE BENEFITS OF GIVING THROUGH SERVICE TO OTHERS

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Research on the benefits of volunteering tends to focus on measuring the benefit of the volunteer activities on the health of the community, as well as the relationship between volunteering and other forms of social capital or civic engagement. For example, researchers seek to evaluate the effects of volunteering on social services, or they ask whether volunteering contributes to greater levels of trust and norms of reciprocity in a community. In essence, the focus of this research has been about understanding how activities such as volunteering, strengthen the community and improve the lives of beneficiaries.

However, recent studies on the relationship between health and volunteering demonstrate that the benefits of volunteering are not limited to the recipients of the volunteer services. (Dulin and Hill, 2003; Brown et al., 2005; Brown et al., 2003; Liang et al., 2001; Morrow-Howell et al., 2003; Midlarsky and Kahana, 1994; and Schwartz et al., 2003) In fact, these studies show the benefits derived from serving. Those who give support through volunteering experience greater health benefits than those who receive support through these activities.<sup>2</sup>

For example:

- The results of a survey of a large, ethnically diverse sample of older adults showed no association between receiving social support and improved health; however, the study did find that those who gave social support to others had lower rates of mortality than those who did not, even when controlling for socioeconomic status, education, marital status, age, gender, and ethnicity. (Brown et al., 2005)
- A longitudinal study of older married adults found that those individuals who reported providing instrumental support to friends, relatives, and neighbors had lower rates of mortality five years later than those who had not reported providing support. In addition, providing support was found to have a stronger relationship with longevity than receiving support from others. (Brown et al., 2003)

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<sup>2</sup> For summaries of the research on the relationship between altruistic activities, volunteering, and health benefits, see Post (2005) and Piliavan and Chang (1990).

## VOLUNTEERING, LIFE SATISFACTION, AND MENTAL HEALTH

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Why might we see a connection between volunteer activities and longer and healthier lives? Evidence suggests that volunteering has a positive effect on social psychological factors, such as one's sense of purpose. In turn, positive social psychological factors are correlated with lower risks of poor physical health. Volunteering may enhance a person's social networks to buffer stress and reduce risk of disease.

This connection between volunteering, social psychological factors, and social networks has been captured by what has been termed "social integration theory," or "role theory," which holds that an individual's social connections, typically measured by the number of social roles that an individual has, can provide meaning and purpose to his or her life, while protecting him or her from isolation in difficult periods. However, research also suggests that volunteer activities offer those who serve more than just a social network to provide support and alleviate stress; volunteering also provides individuals with a sense of purpose and life satisfaction. In fact:

- A study of adults age 65 and older found that the positive effect of volunteering on physical and mental health is due to the personal sense of accomplishment that an individual gains from his or her volunteer activities. (Herzog et al., 1998)
- Volunteering can provide a sense of purpose, as found in a study of older adults; according to this study, formal volunteering moderated the loss of a sense of purpose among older adults who had experienced the loss of major role identities, such as wage-earner and parent. (Greenfield and Marks, 2004)
- A study of older adults found that participation in community service was more strongly correlated with life satisfaction for retirees than for those individuals who continued to work for pay. (Harlow and Cantor, 1996)

In addition, an analysis of the *Americans' Changing Lives* data set by Musick and Wilson explored the possible effect of volunteering on depression by comparing the volunteering habits of individuals in 1986 and differences in the level of depression between 1986 and 1994.<sup>3</sup> Controlling for other forms of social interaction, the

Volunteer activities can strengthen the social ties that protect individuals from isolation during difficult times, while the experience of helping others leads to a sense of greater self-worth and trust.

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<sup>3</sup> For the study, depression was measured using an edited version of the Center for Epidemiological Studies Depression Scale.



researchers found statistically significant, positive relationships between volunteering and lower levels of depression. While the analysis found no relationship between depression and volunteering for respondents under the age of 65, volunteering leads to lower rates of depression for individuals 65 and older.

## DOES AGE MATTER?

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The majority of studies on the relationship between health and volunteering have focused on older individuals, a population particularly vulnerable to illness and depression. While this focus is, in part, related to the practical efforts to identify those activities that effectively allow individuals to live longer, independent, and healthy lives, some research also indicates that age does matter when it comes to the positive effects of volunteering on physical and mental health.

Some researchers hypothesize that younger volunteers may not experience the same benefits from volunteering because of the greater likelihood that their volunteering may be, in some sense, obligatory (e.g., tied to other responsibilities, such as parenting). In contrast, the volunteer activities of older persons are more likely to be discretionary and provide them with a purposeful role in their community; for these reasons, the experience of volunteering is more likely to be beneficial to them. At the same time, younger adults are less likely to experience ill health, thereby making it difficult for studies to measure quantifiable changes in health.

Two analyses of longitudinal data from the *Americans' Changing Lives* survey demonstrate that older adults receive greater health benefits from volunteering than younger volunteers:

**Older individuals who volunteer demonstrate greater health benefits than do younger volunteers, due in part to the fact that volunteer activities by older individuals are more likely to provide them with a purposeful social role.**



■ One study found that volunteering among older adults (age 60 and over) provided benefits to both physical and mental health, while similar correlations were not found for mid-life adults who volunteer. The analysis also found that while depression is a barrier to volunteer participation in mid-life adults, it serves as a catalyst for volunteering among older adults, who may seek to compensate for role losses and attenuated social relations that occur with aging. (Li and Ferraro, 2006)



■ A second study found that, in general, volunteers report greater life satisfaction and better physical health than do non-volunteers, and their life satisfaction and physical health improves at a greater rate as a result of volunteering. At the same time, older volunteers experience greater increases in life satisfaction and greater positive changes in their perceived health as a result of their volunteer activities than do younger volunteers. (Van Willigen, 2000)

## **VOLUNTEERING AND PHYSICAL WELL-BEING**

It is the case that physical and mental health can be both a benefit of and a barrier to volunteering—that is, while volunteering may bring benefits to an individual’s well-being, poor health may limit an individual’s ability to engage in volunteer activities. A study of data from the *Americans’ Changing Lives* survey found that those who volunteered in 1986 reported higher levels of happiness, life-satisfaction, self-esteem, a sense of control over life, and physical health, as well as lower levels of depression, in 1989. Similarly, those in 1986 who reported higher levels of happiness, life-satisfaction, self-esteem, a sense of control over life, and physical health, as well as lower levels of depression, were more likely to volunteer in 1989. (Thoits and Hewitt, 2001)



Evidence indicates that those who volunteer at an earlier stage are less likely to suffer from ill health later in life, thereby offering up the possibility that the best way to prevent poor health in the future, which could be a barrier to volunteering, is to volunteer. For example:

Those who engage in volunteer activities are less likely to suffer from ill health later in life and may be introduced into a positive reinforcing cycle of good health and future volunteering.

- Data from interviews conducted in 1956 and 1986 of a group of women in an upstate New York community found that those women who had volunteered on an intermittent basis from the time that they married until the age of 55 scored higher on functional ability in 1986 than those who had not;<sup>4</sup> this finding was significant even when controlling for socioeconomic status and previous illness. Those who had volunteered were more likely to occupy multiple roles in later years, indicating greater social integration. At the same time, a negative relation was found between health and paid work and caregiving. The researchers for this study posit that these outcomes may be due to the degree of autonomy that the women had in engaging in different activities: while volunteering was typically a discretionary activity, caregiving and paid employment were generally required of them.<sup>5</sup> (Moen et al., 1992)
- According to an analysis of longitudinal data from the *Assets and Health Dynamics Among the Oldest Old Study*, adults over the age of 70 who volunteered at least 100 hours during 1993 had less of a decline in self-reported health and functioning levels and lower levels of depression and mortality in 2000 than those who did not volunteer. (Lum and Lightfoot, 2005)
- A second study of the *Assets and Health Dynamics Among the Oldest Old Study* also found a correlation between volunteering in 1998 and better health and lower mortality rates in 2000 among those individuals born before 1923, even when controlling for previous health conditions. Those who volunteered for at least 100 hours per year were two-thirds as likely as non-volunteers to report bad health, and also one-third as likely to die. (Luoh and Herzog, 2002)

<sup>4</sup> Functional ability includes the ability to do the following without help: go out to a movie, attend church or a meeting, or visit friends; walk up and down stairs; walk half a mile; do heavy work around the house.

<sup>5</sup> The study also found that membership in voluntary associations, as distinct from volunteer activities, had a significant positive effect on all three of the study's health indicators (longevity/duration of good health, functional ability, and subjective health appraisal). However, membership and volunteering, while correlated, were not confounding factors.

- A study of the longitudinal data from the *Americans' Changing Lives* survey found a positive relationship between volunteering activities and better health outcomes among adults over the age of 60, including higher levels of self-reported health and physical functioning, and lower levels of depression. These findings held even when controlling for other factors, such as informal social integration, race, and gender. (Morrow-Howell et al., 2003)

## VOLUNTEERING, MORTALITY, AND ILLNESS

A number of studies have used longitudinal data to examine specifically the relationship between volunteering and mortality rates. To do this, they look at the presence of volunteer activities at one point in time and the rate of mortality at a later point in time. Consistently, these studies have found that those individuals who volunteer during the first wave of the survey have lower mortality rates at the second wave of the survey.

Among these studies, the following results were found:

- An analysis of data from the *Longitudinal Study of Aging* found that those individuals who volunteer have lower mortality rates than those who do not, even when controlling for physical health. According to the study, the 16 percent of respondents 70 years or older, who had volunteered in 1984 were less likely to have died by 1988 than those who had not volunteered. Further analysis also indicated that the positive effect of volunteering was stronger for those in good health in 1984. (Sabin, 1993)
- Controlling for other factors, such as age, marital status, education, and gender, respondents to the *National Health Interview Survey* who volunteered in 1983 were considerably more likely to still be alive in 1991: while 21.5 percent of those alive in 1991 had volunteered in 1983, only 12 percent of those who had died by 1991 had been volunteers in 1983.<sup>6</sup> (Rogers, 1996)

Even when controlling for other factors such as age, health, and gender, research has found that when individuals volunteer, they are more likely to live longer.

<sup>6</sup> All respondents to the *National Health Interview Survey* were age 55 or older.

- Using the *Americans' Changing Lives* survey, one study found that when respondents from a subgroup in 1986 volunteered, they had a lower mortality rate in 1994, even after adjustments for age, gender, race, and socio-economic status. In addition, those respondents with low levels of informal social interaction most benefited from volunteering. (Musick et al., 1999)

Several studies have also looked specifically at the effects of volunteering on those with chronic or serious illness. These studies have found that when these patients volunteer, they receive benefits beyond what can be achieved through medical care.

For example:

- Those individuals suffering from chronic pain experienced declines in their pain intensity and decreased levels of disability and depression when they began to serve as peer volunteers for others also suffering from chronic pain. (Arnstein et al., 2002)
- According to a Duke study of individuals with post-coronary artery disease, those individuals who volunteered after their heart attack reported reductions in despair and depression, two factors that have been linked to an increased likelihood of mortality in this type of patient. In addition, these individuals reported a greater sense of purpose in their lives. (Sullivan and Sullivan, 1997)





## THE “VOLUNTEERING THRESHOLD”

A number of studies have sought to identify whether the amount or type of volunteering in which an individual engages might affect the health benefits from the volunteer activities. These studies indicate that there is not a linear relationship between the amount of volunteering and health benefits; in other words, it is not the case that the more an individual volunteers, the greater the health benefits. Instead, there appears to be a “volunteering threshold”—that is, these studies have identified a certain amount of volunteer activities necessary for health benefits to be derived from the activities. Once that threshold is met, no additional health benefits are acquired by volunteering more.

For example:

- In examining the volunteer habits of individuals from four age groups (55-64, 65-74, 75-84, and 85 and older), one study looked for predictors of mortality five years later based on the frequency of volunteering. The study found that those who volunteered with two or more organizations

Individuals must meet a “volunteering threshold” in order to receive the positive health outcomes from volunteering; that is, they need to commit a considerable amount of time—or at least one or two hours a week—to volunteer activities.

experienced 44 percent lower mortality rates over a five-year period than those elderly persons who did not volunteer, even after adjusting for other factors such as age, health habits, and social support. Indeed, volunteering was found to contribute more to lower mortality rates than high religious involvement or perceived social support.

(Oman et al., 1999)



- Two studies of data collected through the *Assets and Health Dynamics Among the Oldest Old Survey* both found that the volunteering threshold is 100 hours per year, or about two hours a week. Typically, no or little relationship was found between volunteering and positive health outcomes when an individual engaged in less than 100 hours per year. There did not appear to be any additional benefits to health as the number of volunteer hours increased beyond 100 hours. (Lum and Lightfoot, 2005 and Luoh and Herzog, 2002)
- A study of the *Americans' Changing Lives* survey found a more moderate level of volunteering was necessary for health benefits. Those individuals who volunteered at least 40 hours per year, as well as those who volunteered with just one organization, or group, had the lowest risk of mortality.<sup>7</sup> (Musick et al., 1999)

## STATE VOLUNTEER RATES AND PHYSICAL WELL-BEING

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The studies discussed so far suggest that volunteers are more likely than those who do not volunteer to experience positive health benefits. In fact, serving others may increase longevity, lead to greater functional ability later in life, and strengthen one's resilience when dealing with health problems. With these findings in mind, we conducted a state-level analysis of the relationship between volunteering and to indicators of health: mortality and heart disease.

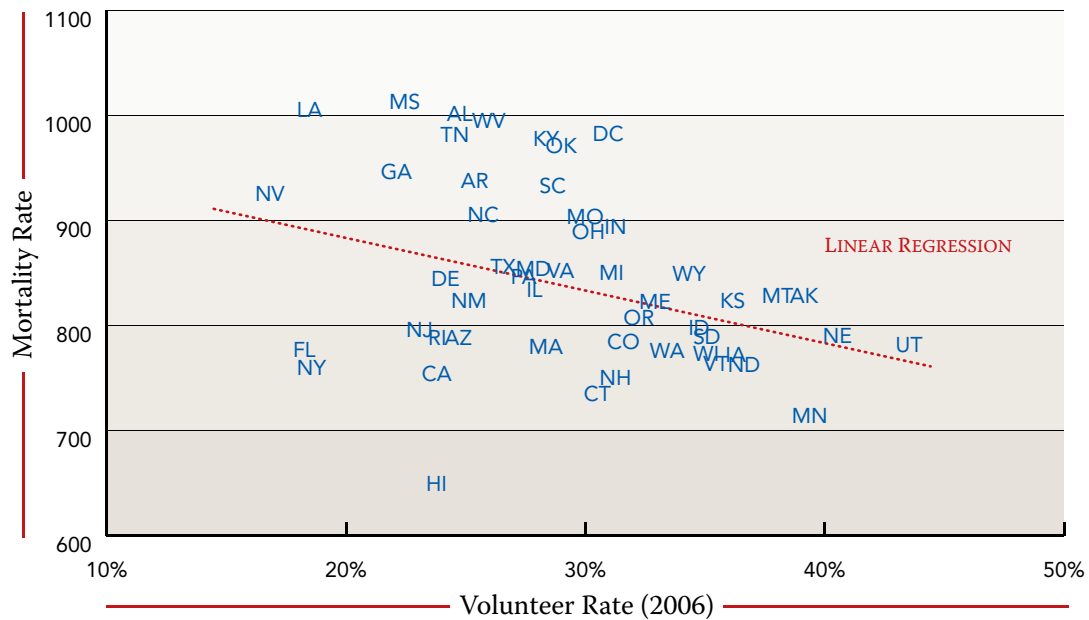
Using health and volunteering data from the U.S. Census Bureau and the Center for Disease Control, we find that states with a high volunteer rate also have lower rates of mortality and incidences of heart disease. Charts 1 and 2 illustrate this relationship: the line on each chart represents the general trend, which is for health problems to be more prevalent in states where volunteer rates are lowest. These state-level findings parallel those of noted sociologist and Harvard University professor Robert Putnam, who found a strong correlation between the level of social capital and measures of good health in his widely acclaimed book, *Bowling Alone*. When put in the context of the other findings presented above, the correlations presented here suggest that state policies designed to increase volunteering may serve to enhance the mental and physical well-being of the state's residents.

States with higher volunteer rates are more likely to have lower mortality rates and less incidence of heart disease.

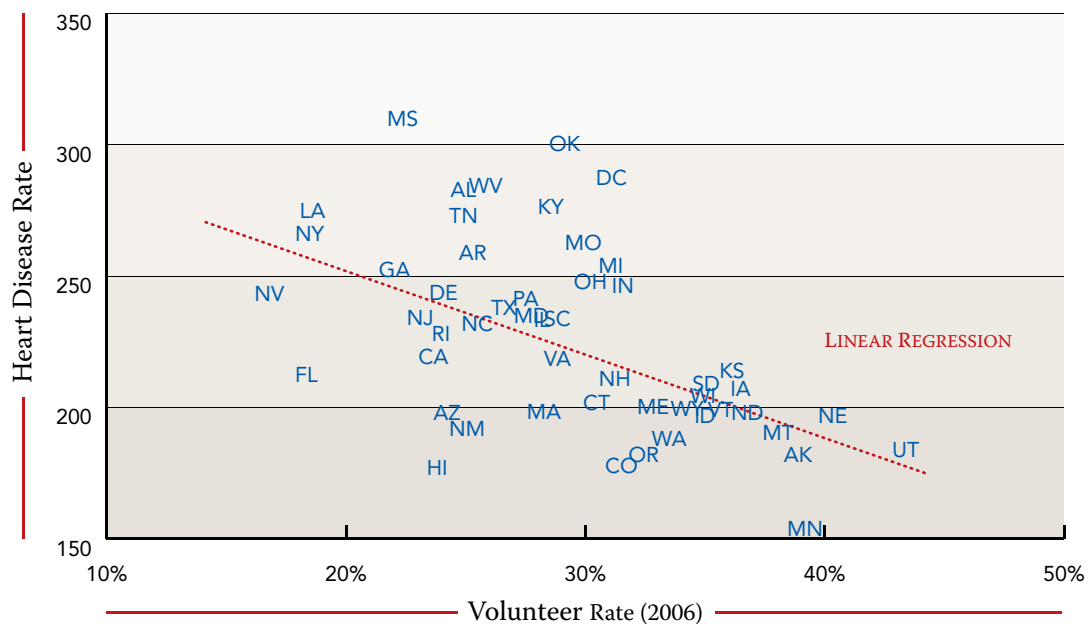
<sup>7</sup> A study by Schwartz et al. (2003) raises the possibility that too much volunteering may have a negative effect on individuals. The study found that the positive benefits of volunteering were reduced, or even erased, when individuals are overwhelmed by responsibilities.

<sup>8</sup> The state volunteer rates used in the Figures were calculated from the 2004-2006 September Volunteer Supplements to the Current Population Survey (CPS). Age-adjusted mortality and heart disease rates were taken from National Vital Statistics Reports, Vol. 54 No. 13, April 19, 2006, Table 29, available at: [http://www.cdc.gov/nchs/fastats/pdf/mortality/nvsr54\\_13\\_t29.pdf](http://www.cdc.gov/nchs/fastats/pdf/mortality/nvsr54_13_t29.pdf).

## 2006 VOLUNTEER RATE VS. AGE-ADJUSTED MORTALITY RATE



## 2006 VOLUNTEER RATE VS. AGE-ADJUSTED INCIDENCE OF HEART DISEASE





## CONCLUSION

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This report summarizes the impressive findings from a number of studies that have explored the relationship between volunteering and health. While these studies may differ in terms of their specific findings, they consistently demonstrate that there is a significant relationship between volunteering and good health; when individuals volunteer, they not only help their community but also experience better health in later years, whether in terms of greater longevity, higher functional ability, or lower rates of depression. In addition, we present first-time evidence that when a state has high volunteer rates, they are more likely to have greater longevity and less incidence of heart disease.

Given the sheer size of the Baby Boomer population and the fact that the oldest Boomers are just entering their 60s, this research on the relationship between volunteering and health deserves a high degree of attention. Of particular importance are the findings regarding the “volunteering

threshold,” which indicates that in order for older volunteers to experience significant benefits from their volunteering activities, their level of commitment to these activities needs to be considerable, or, on average, one or two hours a week. If we engage Baby Boomers and others in substantial volunteer experiences, we may not only help solve community problems, but simultaneously enhance the health of the growing number of older adults.



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*Youth Helping America Series. Leveling the Path to Participation: Volunteering and Civic Engagement Among Youth from Disadvantaged Circumstances* (2007). Examines the attitudes and behaviors of young people from disadvantaged circumstances including volunteering and other forms of civic engagement.

*Keeping Baby Boomers Volunteering* (2007). Describes volunteering trends for Baby Boomers and projections for older adults. Also provides strategies to harness Baby Boomer's experience and energy and identifies the factors likely to impact their decision to volunteer.

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