

Volunteering for Wellbeing: Improving Access and Social Inclusion by Increasing the Diversity of Museum Volunteer Training for Public-facing Roles

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Abstract

This article reports outcomes from a 15-month (2018-19) study led by UCL on behalf of the Culture, Health and Wellbeing Alliance in partnership with three London museums of differing sizes with natural or local history collections. The study aimed to address mental health inequalities by diversifying volunteer populations through reforming recruitment procedures to overcome perceived barriers, and enriching training programmes to improve wellbeing for volunteers. A mixed methods approach was used to assess wellbeing and mechanisms by which key benefits were derived, such as social interaction and forming connections. The article considers how increasing the diversity of volunteer training in museums can improve wellbeing, widen access and promote social inclusion. Policy and practice implications are discussed in relation to embedding wellbeing training strategies into heritage organizations.

Keywords: diversity; health inequalities; social exclusion; volunteering; wellbeing

Introduction

Over the last 40 years, socioeconomic and health inequalities in the UK have increased (Black 1980; Acheson 1998). Ongoing reviews led by Sir Michael Marmot, resulting in the publication of *Fair Society, Healthy Lives* (Marmot 2010) and, more recently, *Health Equity in England: The Marmot Review 10 Years On* (Marmot et al. 2020) have demonstrated strong links between the UK creative and cultural sectors and economic, cultural, social and health inequalities. As health and wellbeing outcomes are often associated with a person's socioeconomic position, health inequalities are therefore an expression of wider social determinants (Marmot et al. 2020). This social gradient places vulnerable people at greater risk of negative health outcomes, which can be exacerbated by structural and institutional disadvantage. Cultural resources interact with economic and social capital in structuring people's health chances; for example, income for supporting health-enhancing behaviours such as visiting museums is linked to social class and status (Abel 2008). As cultural resources, museums can have a positive impact on wellbeing (e.g. Dodd and Jones 2014), by 'countering inequalities and engendering support for social justice' (Sandell and Nightingale 2012: 27). Given the transformative roles museums can play in society, they are well-placed to shape and change narratives, and enable access, reduce social exclusion and increase equality (Pearce et al. 2002; Kudlick and Luby 2019). The research draws on a multi-dimensional definition of social exclusion as 'the inability to participate in the normal relationships and activities, available to the majority of people in a society, whether in economic, social, cultural or political arenas' (Levitas et al. 2007: 9).

Museums have been prolific in their outreach programmes and ability to engage audiences (Silverman 2010). Beyond being community spaces, museums can offer social benefits through fostering connections with people, places and objects (Sandell 1998; Silverman 2010). Museums have a social responsibility role which resides in their educational remit and

particularly through partnerships with schools (Hooper-Greenhill 2007; Sandell and Nightingale 2012). Consequently, the aim of improving access for under-represented groups tended to focus on reaching out to disadvantaged school settings. More recently, other community engagement projects have worked to address issues of exclusivity and under-representation (Allison 2020). For example, Tyne and Wear Archives and Museums developed innovative practices involving fostering relationships with local health and social care organizations to support community engagement in participatory research and interventions (Morse 2021). The role of public engagement as a process for 'generating, improving or repairing relationships between institutions of culture and society at large' has been questioned, however, due to the rhetorical use of the term 'engagement' and cynicism about its emphasis in marketing strategies (Ashley 2013: 261).

Given that only a small proportion of a local population visit a museum or gallery, volunteering practices have developed to extend partnerships directed from the museum into the community through enabling community, social and wellbeing benefits (Vogelpoel et al. 2013) and enhancing lifelong learning experiences (Stebbins 1996). The push for museums to become more socially responsible has led to changes in their ethos around volunteering opportunities (Tlili 2008). Historically, the impetus for museums to offer volunteering roles was to fill gaps in their cultural workforce, but this practice has evolved into sustaining and extending their educational remit, and has offered, amongst other benefits, an avenue for improving wellbeing for volunteers who might otherwise be socially isolated (Millar 1991). In contrast to regarding volunteers as 'unpaid staff', it has been suggested that it is more appropriate to see them as 'another segment' of the museum audience on a 'visitor-volunteer continuum', running from non-visitor to occasional visitor, frequent visitor and then volunteer (Holmes and Edwards 2008: 161).

It is estimated that around 115,000 people regularly volunteer for 2,500 UK museums and heritage organizations (Museums Association 2018). A large study of over 200 volunteers from ten museums and heritage organizations found that volunteers were more likely to be retired individuals than younger people (Holmes 2003). For older adults volunteering is primarily seen as a leisure pursuit and fulfilling use of time (Okun and Schultz 2003). Comparable with most museum audiences, older volunteers seek leisure and social interaction, and already have an interest in the subject (Deery et al. 2011). Their motivation sits within the leisure model of volunteering, which relies on individuals having the free time to give and share without the economic necessity of paid work (Orr 2006). The model aligns with the notion of intrinsic motivation, being satisfied by the work alone, rather than extrinsic motivation dependent on external rewards (Metzger 1996). For young adults, the motivation to volunteer in the heritage sector is largely seen as an opportunity to gain work experience (Edwards 2005). Research with young volunteers has questioned the usefulness of unpaid museum experience outside of a programme of study and whether it is 'valuable experiential learning or simply exploitation by an under-resourced sector' (Holmes 2006: 241) but noted that young volunteers may benefit from building up workplace contacts. Furthermore, a Canadian study found that for young adults, rates of informal volunteering, such as directly helping people outside of the household and not on behalf of an organization, were significantly higher than for older adults, and may represent a different type of volunteer preference (Hahmann et al. 2020).

In addition to age, findings show a lack of diversity in volunteer ethnicity, specifically Black, Asian and minority ethnic (BAME) groups, and socioeconomic background, as single or joint factors (Reynolds 2016; Museums Association 2018). There is well-documented evidence that children of Western European middle-class families who engage with the museum sector tend to 'inherit' cultural pursuit practices, accrue cultural capital and thereby attain higher educational achievement than those from lower socioeconomic populations (Sullivan 2001). A more nuanced view of visitor demographics across England, Australia and the United States, however, found that 'those from non-dominant ethnic identities tended to be more critically active in the registers of engagement than those from dominant ethnic identities, who tended to be over-represented against variables measuring passive or less critical engagement' (Smith 2020: 164). The museum sector, therefore, needs to promote access of its cultural capital to those less represented in society (Bourdieu 1986; Alper 2017;

but see de Andreotti 2014).

The reduction of social exclusion as an integral purpose of the museum, particularly larger local authority museums, has necessitated the repositioning of the sector, with a paradigm shift to address inequality and promote social capital (Sandell 2003). Museums have the potential to bring about this repositioning through actively prioritizing their outreach, volunteering, and engagement targets (Hollows 2019). Museums are seen to play an important though largely underestimated role in exercising a variety of political practices, which have consequences for society and individuals (Gray 2015). Furthermore, the sustainability of museum programmes aiming to improve access to collections by actively attracting a diverse and locally representative audience has depended on training staff to deliver these objectives (Scott 2013). In the midst of austerity and tightened social care budgets, there is an argument that museums should not be picking up the fall-out from underfunded local authorities, as the cultural sector itself has sustained 40 per cent cuts since 2012 (Harvey 2016; Robertson et al. 2017), an important point because staff losses often mean that learning gained through training is lost to the organization.

Engagement in museums and the cultural sector as a whole is well established as being beneficial to health and wellbeing (Camic and Chatterjee 2013), with benefits understood to arise through social, psychological, physiological and behavioural mechanisms (Fancourt and Finn 2019). An Australian study found that volunteers reported higher wellbeing compared to non-volunteers, and that self-esteem, self-efficacy, and social connectedness were significant mediators of the volunteering-wellbeing relationship (Brown et al. 2012). A review of the impact of volunteering found greater psychological wellbeing and increased physical activity among older adults (Piliavin and Siegl 2014). Although the wellbeing benefits of older adult volunteering are well-documented, fewer studies have researched the effect of leaving volunteer positions due to age-related conditions. One such qualitative study explored experiences of older people obliged to leave volunteering due to ill health (Davenport et al. 2021). Semi-structured interviews conducted with current and ex-volunteers across three North East England heritage organizations found that leaving was anticipated or experienced as a loss of benefits that contributed negatively to their wellbeing. The authors suggested these feelings could be modified through agency and a more pragmatic personal appraisal of the situation. They concluded that further research was needed to explore management practices that helped older people leave volunteering in a way that minimized potential negative impacts.

The inquiry report, *Creative Health*, found a rapid growth in arts and health practices with wellbeing as a central theme (All-party Parliamentary Group on Arts, Health and Wellbeing 2017). The call for museums to do more for audiences that they would not normally reach out to, such as socially disadvantaged and isolated older adults, has informed the drive towards social prescription (Thomson et al. 2018; Thomson et al. 2020) and fostered public engagement programmes that embed visitor wellbeing as a central outcome (Ashley 2013). Analysis of the relationship between volunteering and subjective wellbeing was conducted with a sample of around 15,000 interviews from the longitudinal *British Household Panel Survey* (Jenkins 2010); findings showed a significant association of volunteering with wellbeing that increased over time when regular volunteering was sustained (Binder and Freytag 2013). Although the study covered a range of volunteering opportunities, it did not particularly look at those in museums. On the other hand, a social return on investment (SROI) study, *Inspiring Futures (IF): Volunteering for Wellbeing*, delivered by Imperial War Museums North, Manchester Museum and eight other museums, and focused specifically on volunteering, recruited participants aged 18-25 and 50 and above comprising armed forces veterans and those experiencing long-term unemployment, low mental wellbeing or social isolation. After a year, volunteers reported a 75 per cent increase in wellbeing and after two to three years, almost 60 per cent of these participants experienced sustained wellbeing with 30 per cent gaining employment or other opportunities (Garcia and Winn 2016). The authors calculated that long-term outcomes generated an estimated social and economic value of £2 million, with £3.50 return for every £1 invested. Qualitative analysis of 40 volunteer interviews found that they gained a sense of connectedness to others and to local events which enhanced self-awareness and social relationships. As SROI studies can be unreliable due in part to the difficulty of attributing a financial value to human outcomes, such as confidence or self-esteem (Millar and Hall 2012),

the current study took a different position from that of a financial one and focused instead on the processes by which the wellbeing benefits of volunteering would impact on participants, staff and the museum organization.

Aims and objectives

The overall aim of the current study was to counter mental wellbeing inequalities by firstly, increasing the diversity of the museum volunteers and secondly, by offering mentoring and training with a view to improving wellbeing in the newly diverse groups of volunteers, thus reducing inequality within the study population. Specific aims were to make heritage more accessible to people experiencing inequalities and increase volunteering diversity through novel recruitment strategies and by offering mentoring, training and enrichment activities to new volunteers. The mixed methods study aimed to address a research gap by considering the extent to which diverse volunteer cohorts in museums would benefit in terms of social and psychological wellbeing. The study adopted a broad definition of diversity to include neurodiversity, and encompassed individuals diverse in socioeconomic position, ethnicity, gender, disability and health status¹. For the purposes of the research, wellbeing was defined as encompassing 'hedonic dimensions, such as feelings of happiness or anxiety, as well as eudemonic dimensions focused on perceptions of the extent of meaning and purpose in one's life' (Daykin et al. 2020: 30). For an operational definition of wellbeing used in their training programmes, museums referred to *Five Ways to Wellbeing* (Aked et al. 2008) comprising: 'be active'; 'connect'; 'give'; 'keep learning'; and 'take notice', with an additional sixth theme, 'care of the planet' from the *Wheel of Wellbeing* (Hann 2017) that was deemed appropriate given the natural history collections. The study's objectives were to determine and overcome barriers that prevented atypical volunteers from seeking opportunities in museums, and to ascertain whether specific actions such as training and mentoring would lead to the improved wellbeing of volunteers and staff. It was hypothesized for the quantitative research that volunteer wellbeing would improve pre-post session through training and mentoring in a supported environment.

Method

Design

The study used mixed methods to assess quantitative and qualitative evidence for volunteer wellbeing benefits at three London museums with natural or local history collections (Natural History Museum; Horniman Museum and Gardens; and Valence House Museum). Museums differed in size (>150, 100-150 and <50 staff) and funding model (national, independent and local). The qualitative evaluation used in-depth semi-structured one-to-one interviews administered post-training. The quantitative evaluation used a repeated measures design with two wellbeing scales, the UCL Museum Wellbeing Measure (MWM: Thomson and Chatterjee 2014; 2015) and the Short Warwick Edinburgh Mental Wellbeing Scale (SWEMWBS: Fat et al. 2017), completed weekly for between five and seven weeks during the volunteer training (for programme details, see Procedure, below).

Participants

Participants (n=48) comprised newly recruited museum volunteers (n=33) called 'Wellbeing Champions' or 'Engage Volunteers' (museums used different titles), mentors from among the established volunteer base to support new volunteers called 'Volunteer Buddies' (n=7) and museum staff (n=8), including one from each museum at director level (for recruitment process, see Procedure, below). Wellbeing Champions/Engage Volunteers comprised younger adults (20-25 years) and older adults (50-66 years) from diverse backgrounds including those experiencing mental or physical health challenges, at risk of social isolation, the long-term unemployed and ex-offenders; they comprised 61 per cent female, 33 per cent male and six per cent non-binary, with 77 per cent from BAME communities and 23 per cent white British.

Volunteer Buddies comprised older adults (60 years and above) who were white British.

Materials

Interviews used open questions; those for volunteers covered personal wellbeing and contribution, team working, session content, and perceptions of museums and volunteering (Appendix 1); those for staff involved volunteers, diversity, training and the organization (Appendix 2). The MWM consisted of six items (Active; Alert; Enthusiastic; Excited; Happy; Inspired) rated on a five-point scale (I don't feel...; I feel a little bit...; I feel fairly...; I feel quite a bit...; I feel extremely...), where higher numbers indicated greater psychological wellbeing scores. The SWEMWBS consisted of seven items (I've been... feeling optimistic about the future; feeling useful; feeling relaxed; dealing with problems well; thinking clearly; feeling close to other people; and able to make up my own mind about things) rated on a five-point scale (None of the time; Rarely; Some of the time; Often; All of the time), where higher numbers indicated greater mental wellbeing scores.

Procedure

Adapting the recruitment process

Museum staff recruited volunteers through consultation and building community partnerships with local volunteer and third sector organizations tackling health inequalities in their surrounding London Boroughs. Since a specific aim was to make heritage more accessible, and the definition of wellbeing included care of the planet, the opportunity to work with natural or local history collections was promoted during recruitment because it was felt that these areas would be both inclusive and attractive to atypical volunteers. Given that the standard application process was thought to be arduous and might have acted as a barrier to atypical volunteers, the application process was streamlined; volunteer roles were advertised on community partner websites and at local volunteering events; the application form was simplified to two questions carried out as a phone interview to gauge motivations for volunteering; and new volunteers were introduced to the museum by the staff member concerned. The Natural History Museum recruited 12 new volunteers; nine became Wellbeing Champions and three joined the regular Learning Volunteer programme; additionally, six established Natural History Museum volunteers became Buddies. Valence House recruited two new volunteers as Wellbeing Champions and one established volunteer as a Buddy. The Horniman recruited 15 new volunteers who became Engage Volunteers.

Systems of support

Rather than asking established volunteers to take on the role of mentor, the Horniman opted to recruit four new volunteers where individuals were placed together in two sets of Buddy Pairs by the community partners through which they were recruited. As new volunteers had diverse support needs that were difficult to accommodate as a group, sessions were monitored so that training and enrichment activities could be customized to ensure all volunteers were given opportunities to contribute and feel comfortable doing so. All museums focused on building resources to enhance visitor wellbeing.

Training

Participants attended weekly training sessions at the Horniman and Valence House and fortnightly sessions at the Natural History Museum. Training was offered in-house where expertise was available and sourced externally when specific knowledge was required. Museums assessed and tailored their training needs for the specific roles that staff and volunteers fulfilled. In addition to a range of training courses (Customer Service; Delivering Audio Object Descriptions; Dementia Awareness; Introduction to the Animal Kingdom; Live Interpretation; Mental Health First Aid; Object Handling; Public Engagement; Safeguarding; and Working with Vulnerable Adults), there were also sessions providing wellbeing enrichment, such as creative activities and trips to galleries and gardens. The Natural History Museum's

eight training sessions comprised three phases: i) two-week familiarization with the museum and its collections; ii) three-week resource research and idea generation; and iii) three-week resource development and production. The Horniman's five sessions consisted of a staged induction of learning by doing; shadowing; one-to-one briefings and training; and a self-guided orientation resource. The six sessions at Valence House focused on developing the public engagement and object handling skills of volunteers and increasing the capacity of volunteers to use their new resource, an object handling table with replica objects funded by the project.

Data Collection

Interviews of around one hour were carried out at the end of the training programmes by a university researcher independent of the museums. Interviews were carried out face-to-face or by phone if this was not possible due to volunteer access or part-time working. On completing the training programmes, volunteers were supported by the local volunteer and third sector partners through which they had been recruited, and were helped to find other opportunities (outlined in the Discussion, below). The MWM was completed pre-post training session at all three museums and the SWEMWBS was completed pre-session at the two largest museums; raw scores were transformed into metric scores using SWEMWBS' conversion table.

Consent and Ethics

Ethical approval was obtained from the UCL Research Ethics Committee (REC 4525/002) for research with vulnerable adults. Museum volunteers and staff participating in the study were asked to read the privacy notice and participant information sheet, given an opportunity to ask any questions and then asked to sign the consent form.

Results

Qualitative findings

Interviews were conducted with Wellbeing Champions/Engage Volunteers (n=12), Volunteer Buddies (n=5), and museum staff (n=8) comprising Volunteer Managers/Co-ordinators (n=5) and Directors (n=3). Inductive thematic analysis (Boyatzis 1998) of interview transcripts using NVivo 12 software showed that impact on volunteer wellbeing was mediated through a hierarchy of 13 themes, six main and seven minor, derived from 37 nodes (active, agency, bad mental health status, being occupied/employed, belonging, buddying, caring for the planet, change, confidence, contribution, diversity, exclusive space, fear of social rejection, feeling valued, flexibility, forming connections, giving, learning, local, motivation, organization of self, perceptions of volunteering, preference, rejuvenation, routine, sadness at ending, satisfaction, self-awareness of needs, shared experience, social isolation, social prescription, socialising, support, transactional or relational, volunteering as a springboard, wellbeing, and work experience). A hierarchical map was generated (Figure 1) where box size represents the relative importance of each theme depending on the number of quotations associated with it in NVivo coding, rather than signifying any power imbalance; main themes (also see Table 1) are depicted in white boxes and minor themes in grey.

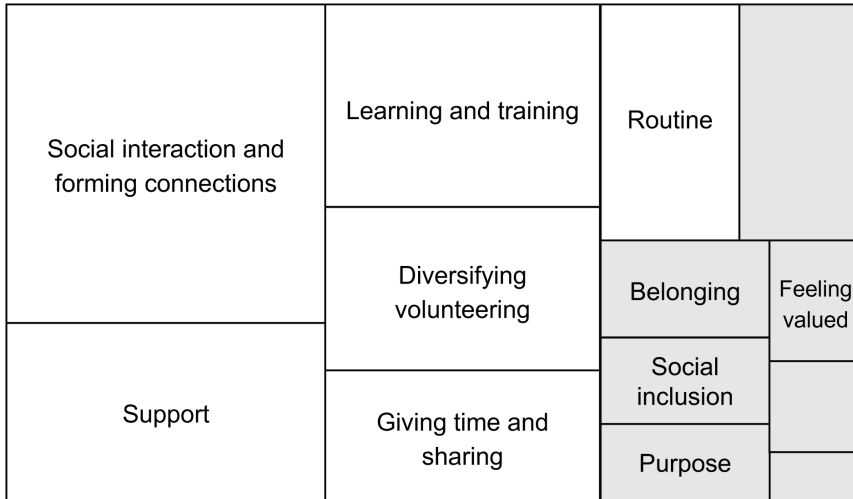


Figure 1: Hierarchical map of themes

Given that participants were asked directly about their wellbeing, the analysis could not be entirely inductive; however, themes were determined in keeping with the practice of inductive thematic analysis by reading the data thoroughly and becoming familiar with it prior to analysis. In particular, patterns in experience and meaning were sought by two researchers and led by the data, rather than being fitted into existing concepts as with deductive thematic analysis. Almost a third of new volunteers disclosed during interviews that the desire to change their state of poor mental health had motivated them to volunteer. As a new volunteer recruited by a link worker expressed, 'I was suffering from depression and anxiety, so it was, come in Mr [name], sit down and we are here for you, what do you want to do?'. With similar health issues, another new volunteer disclosed:

It's mental health, you know, my situation. I'm in very big, big depression in these last years, very massive depression and affecting everything, the change, your real personality change, the simple decisions, take the simple decisions, that's very difficult... When I come to this project, is... I don't know, is take analysis... that everything is possible.

In many cases new volunteers were additionally concerned about enhancing their prospects of employment by accessing work experience; two made similar points:

I had a whole spell of anxiety, depression where I wasn't leaving my flat often and because technically, I'm unemployed, I was compelled by the Job Centre to go to a jobs fair..., which is where I discovered the information about this.

I volunteered because I was having trouble finding work and because I did long periods as a carer, stay-at-home carer, both my parents passed away. Yeah but when I started volunteering, I couldn't get into it, it was okay, but I just couldn't get into it, but I did it. I had to get out of the house, and I had mental health problems as well.

Each of the six main themes appeared to lead to positive outcomes, although these

resulted from differing interactions between new and established volunteers, museum staff and visitors, and third sector agencies (Table 1). The main themes are discussed in turn:

Theme	Outcomes	Interactions
Social interaction and forming connections	Social inclusion, establishing a social network	New volunteers with other new volunteers and with museum visitors
Support	Feelings of confidence and security	New volunteers with established volunteers and museum staff
Learning and training	New knowledge, feelings of agency and being valued, motivation and satisfaction	New volunteers with museum staff and museum visitors
Diversifying volunteering	New recruitment practices and increased scope of training	Museum staff with third sector agencies
Giving time and sharing	Sense of belonging and purposeful fulfilment	New volunteers with museum visitors
Routine	Purpose, help with integration, interaction and engagement	New volunteers with established volunteers, museum staff and visitors

Table 1: Outcomes and interactions associated with the six main themes

Social interaction and forming connections

Social interaction and the forming of connections between new volunteers mainly occurred through established procedures such as working in the same part of the museum on the same day. Engagement with the public alongside other volunteers allowed new volunteers to form connections which contributed to establishing a social network, as a new volunteer pointed out: 'The most important thing is to communicate with the people. I want a social life with the people, so it is very useful for me to be a volunteer there'. This network helped to increase sociability and confidence and encouraged volunteers to return every week, fostering social inclusion. As another new volunteer reasoned, 'I think my depression really comes from when I feel isolated, and when I'm here mixing with people, I feel less isolated so I'm sure it does help my mental wellbeing... I have made connections with other people'.

Support

All new volunteers were supported in their roles by established volunteers acting as Buddies, other established volunteers and/or museum staff. Volunteer Coordinators in particular were vital in delivering support to instil feelings of confidence and security among the diverse volunteer cohorts, as one Volunteer Coordinator expressed after encouraging a volunteer: 'There is verbal appreciation, and that's when you feel that you have made a difference, you have supported someone'. The idea of giving support to the new volunteers was endorsed by a Buddy who stressed 'we were trying to help other people to gain confidence here, and enjoyment and purposefulness'. New volunteers reported that their wellbeing had improved due to the support given to them by Volunteer Managers and Buddies, as illustrated by three comments: 'When you have support from special people working in here, you are more confident, more comfortable... you're going in different areas'; 'I think it boosts my confidence.

Because I was, before, I was in a hospital and I felt insecure with people'; and 'The volunteer manager supported us as a group, in a good way, I think, no one felt left out or ignored or that they weren't contributing, that they weren't valued, they were'.

Learning and training

New volunteers were further supported by the learning and the training they were offered to fulfil their different museum roles. Learning about the collections, for example, was acquired during training sessions or in passing on this knowledge while engaging with museum visitors, as a new volunteer asserted: 'The perfect place to keep learning, like learning from people. Just everything and just about giving. So, yeah, it's giving something back. Connecting with people'. Learning appeared to consolidate volunteer motivation and satisfaction, and bolster feelings of agency, as another new volunteer expressed: 'I really did rejuvenate with my motivation and by the end of it, to be quite honest with you, I was satisfied with the work that we were doing. I'd learnt a lot'. Similarly, two new volunteers noted 'I think most of all I enjoy learning because I've learnt' and 'Every time I come here I learn something different'. Skills training given by the museums, such as object handling, empowered volunteers to learn and inform, and become more confident in their roles. As a new volunteer working on the handling table with members of the public described:

During training sessions, they give us a lot of information about these objects and when the people came to us, I extend that to them, I have a lot of information about these objects so I can explain them really well.

Two other new volunteers in public facing roles described their relationship with museum visitors: 'Without knowing it, without noticing it and you connect', and 'So they give you a smile. You try to do your best to change at least for a moment'.

Diversifying volunteering

The aim of increasing diversity in the volunteer base led to diversification of the recruitment procedures by museum partners working with third sector agencies. As it was seen that normal recruitment procedures, such as questions about previous work experience and a formal interview, would usually impede vulnerable potential volunteers, processes were simplified to make application less challenging. Having a diverse cohort of new volunteers with diverse needs led to changes in the scope of training required by these volunteers and staff, as a Volunteer Coordinator revealed '... [there was] one volunteer who right from the start was very, very open and shared a history of very poor mental health... that level of disclosure was already a challenge for us.' Offering specific training to Volunteer Managers, such as Dementia Awareness, enabled them to support the more diverse needs of their volunteers.

Giving time and sharing

The action of volunteering was based on new volunteers giving their time in a rewarding way and sharing knowledge with other volunteers and museum visitors, as a new volunteer confirmed: 'I was committed to come here because I thought it's my way of giving'; and as a Volunteer Coordinator explained: 'We had people coming in who want to give something back by supporting their community, or who are socially isolated and want to make some friends'. When volunteers dedicated their leisure time and efforts to the museum, it helped them to develop a sense that they belonged and were valued, as a Volunteer Manager highlighted: 'It is a really important part of their wellbeing that they feel worthy and belonging'.

Routine

Routine established regular social interaction and engagement for new volunteers with other volunteers, staff and visitors. Volunteering provided a structured way to spend time, as described

by a new volunteer: 'I think for me I like to be productive. So that for me just gives me a bit more structure. So I know that on Mondays I volunteer'. The commitment to and regularity of the role gave volunteers a sense of purpose and fulfilment, as another new volunteer explained: 'I think it definitely has because for me things like that, like feeling immense sense of purpose like I'm doing something that is important'. When asked about reasons for joining the project, the advantage of having a routine was recognized by a volunteer seeking work experience '...and it was suggested to me, having a routine and I didn't have confidence to go to job interviews and I was quite an anxious person, but I thought I would start with volunteering'.

Interviews with senior museum staff showed that motivation to involve volunteers was integral to how they viewed and supported the staff and volunteers in their organization in terms of wellbeing. As one director explained, 'I think the concept of wellbeing is a really important one and is one of the benefits of having a good volunteering programme'; and another endorsed, 'Giving people that agency and skills and social networks and challenging them in a very supportive environment can make such a huge difference to wellbeing'. Furthermore, endorsing the level of support to embed wellbeing organizationally appeared to impact directly on volunteer mental health, as another senior staff member explained:

We are all supporting wellbeing and in our heritage strategy we have how volunteering is about giving people new skills, new social experiences, but actually none of that is described in any wellbeing terminology and I think that needs to change if we are going to show our value and the value of the work that we do.

Quantitative findings

Measures from the new Wellbeing Champions/Engage Volunteers (n=21) were evaluated using descriptive and inferential statistics in IBM SPSS v24. Volunteer MWM scores (6-30) were pooled for the five training sessions at the Horniman and Valence House, and the last four of eight training sessions at the Natural History Museum when the measure was taken. Volunteers from the Natural History Museum and Valence House completed pre-post session measures and those from the Horniman completed pre-session measures only. A repeated measures analysis of variance (ANOVA) found a highly significant difference across sessions, $F(4,48)=6.34$, $p<.001$ (Figure 2). Planned Bonferroni t-tests showed a decrease in pre-session scores between Sessions 1 and 5, $t(12)=3.32$, $p<.001$, one-tailed (mean=4.31, SD=2.81). Scores improved pre-post session for Sessions 1 to 3 and 5, indicating beneficial though non-significant effects of four of the training sessions, $t(10)=1.89$, $p<.1$, one-tailed (mean=3.33, SD=3.06) for the largest difference. Volunteer SWEMWBS scores (7-35) were pooled for the five training sessions at the Horniman and the last seven of eight training sessions at the Natural History Museum, all completed pre-session. Volunteers at Valence House did not complete the SWEMWBS. A repeated measures ANOVA found no significant differences across sessions, $F(6,42)=2.11$, $p<.072$. SWEMWBS scores dipped slightly in Sessions 2 and 5 but these differences were not significant (Figure 3).

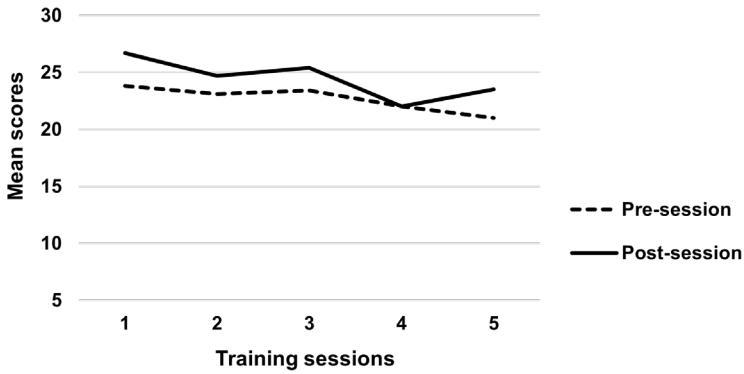


Figure 2: Pooled pre-post MWM scores

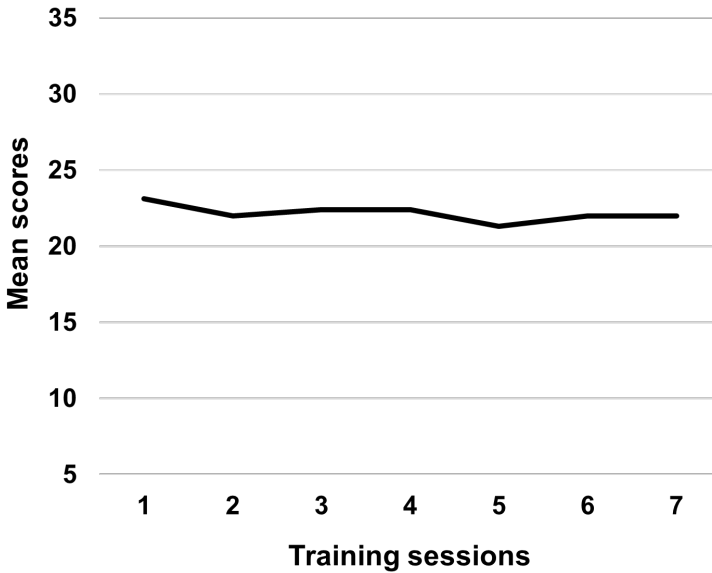


Figure 3: Pooled SWEMWBS scores

Discussion

The current mixed methods study aimed to overcome barriers to diversity, and support and evaluate the wellbeing of volunteers. It considered the extent to which diverse volunteer cohorts in museums would benefit from mentoring, training and enrichment activities selected to facilitate social and psychological wellbeing. Its objectives were to determine the motivation of atypical volunteers to seek opportunities in museums and consider whether specific actions such as training and mentoring would lead to improved wellbeing of volunteers and staff. It was hypothesized for the quantitative research that volunteer wellbeing would improve pre-post session given the support from Buddies and staff within the museum environment.

Analysis of the qualitative data suggested that wellbeing was experienced through aspects of positive mood, such as a sense of achievement and participation in what volunteers saw as something bigger than themselves with a value beyond the project. This finding is analogous to a mixed methods study of group singing with young people, where quantitative data did not confirm the hypothesis that choir members' psychological well-being would increase following participation in the singing project; however, qualitative data provided evidence for a range of beneficial outcomes for those participating (Hinshaw et al. 2014). The authors suggested that completion of each singing session was associated with a reduction in children's immediate state of happiness, which also offers a possible explanation for the small pre-post session differences in the current study. Qualitative analysis of the current interview data found that each of the main themes appeared to impact positively on volunteer wellbeing by reducing social exclusion through engendering feelings of belonging, security, confidence, knowledge, motivation, purpose and satisfaction (Kudlick and Luby 2019). These themes underpinning wellbeing aligned with dimensions of volunteer motivation that included building relationship networks and available time for social and purposeful activity (Edwards 2005). Implications of the association of diversity in volunteering with improved organizational wellbeing suggest that there should be a focus within social and economic policy to provide greater volunteering opportunities (Binder and Freytag 2013).

For the quantitative analysis, comparison of pre- and post-session MWM scores showed short-term impact of activities on psychological wellbeing in four out of five sessions. Although there was a small post-session improvement in post-session MWM scores between two pairs of sessions, there was a decrease in wellbeing between the first and last sessions. SWEMWBS scores remained statistically similar across sessions, and it is likely that six to eight weeks of training may not have been sufficient to show any wellbeing improvement over time. It is also possible that there was less scope for wellbeing improvement than expected, as when pooled across the two museums that used it, SWEMWBS scores lay within the 'medium' range for mental wellbeing (Fat et al. 2017). Other authors found significant increases in wellbeing through volunteering (Brown et al. 2012) but over a time span of a year (Binder and Freytag 2013) and sustained for two to three years (Garcia and Winn 2016). The finding that quantitative measures showed limited wellbeing benefits over a shorter time span was interesting but this was probably due to the fact that it was made explicit in the initial sessions that the training programme was intended to improve wellbeing, and more so because volunteers were encouraged to build on the concept of their own pathways to wellbeing. Using the wellbeing measures on a regular basis encouraged volunteers to recognize and monitor positive and negative mood changes. Furthermore, regular monitoring of wellbeing provided a signpost to volunteers that museums regarded their wellbeing as a priority.

It is feasible that lack of improvement in volunteer wellbeing could be attributed to differences between initial training sessions, seen as enjoyable due to their novelty value (e.g. behind-the-scenes tours; visits to other organizations) and later sessions that became more demanding (e.g. working on outputs such as resources and exhibitions). In effect, the sessions changed over time from having a content of wellbeing enrichment to one of resource development but, for this change to have affected wellbeing scores, volunteers would have needed to anticipate what they would be doing on a particular day to shape their pre-session response. It is possible though that this anticipation happened as volunteers were provided with timetables for their training. Additionally, volunteers would have needed to recognize the increasingly demanding nature of the activities. Again, this recognition is possible as, when interviewed, volunteers reflected upon the challenges they faced during the sessions and fed back that, although satisfaction from the more difficult sessions contributed to their pride and positivity, it caused them to feel tired, which was reflected in their wellbeing scores. Moreover, some volunteers expressed feelings that, once the training was over, their new volunteering roles would come to an end, and it is likely that these reservations acted to reduce scores further. Furthermore, negative aspects of volunteers' lives outside of the sessions may have impinged upon their wellbeing scores.

To bolster new volunteer support mechanisms, museums implemented direct changes such as routine check-ins with volunteer managers, not normally offered to established volunteers. These findings were consistent with previous research where volunteer managers

exceeded the rules in order to support people in their volunteering roles (Davenport et al. 2021). Establishing longer-term associations between volunteers and staff where beneficial dialogue was maintained established relational associations rather than short-term transactional associations (Moncrieffe 2011). The current study found anecdotally that there were some similar sustained outcomes to the *IF: Volunteering for Wellbeing* study (Garcia and Winn 2016); several volunteers kept in touch with Volunteer Managers while seeking employment and other opportunities. As a result of their experiences, two volunteers started university courses, one initiated a project with their local council on developing a wellbeing resource for their community, and others developed greater self-awareness, for example in recognizing the need for a voluntary position to sustain a social life.

Strengths and limitations

A strength of the project was that its aims were roundly achieved in all three museums in that volunteering populations were diversified, mentoring and training took place, mental health and wellbeing were explored, and the benefits and outcomes were determined. A particular strength demonstrated by the new volunteer demographic was the success in encouraging access and reducing inequity, at least in the short-term through streamlining the recruitment process, with the potential for achieving longer-term parity indicated by the qualitative data, though not the quantitative data. A potential limitation of the research was that, although the wellbeing of museum staff involved in the project was explored qualitatively in interviews, it was not documented using the MWM and SWEMWBS measures; quantitative evaluation of staff wellbeing would have provided a parallel over the same time span to compare with volunteer wellbeing. There were limitations with the use of the measures in that they were completed over training sessions taking place for differing numbers of weeks, and only two of the museums used the SWEMWBS. Furthermore, self-report measures might have been biased due to volunteers giving socially acceptable responses or being unable to assess their own wellbeing accurately. A more general limitation was the relatively small sample size which, though typical of museum interventions, was not ideal for quantitative methods, where around five times the number of participants would have been optimum. Another limitation is that there was no control group experiencing life as usual in the absence of volunteering with which the study could have compared the wellbeing measures scores. A possible finding among published randomized controlled studies is that, although there seems to be little improvement in wellbeing of the intervention group, the control group might show a greater decline in wellbeing over the same time period. A further limitation was that, although the volunteer base was diversified, the nature of diversity varied across the three museums and so did not support direct comparison; similarly with volunteer numbers, the ratio of mentor and volunteer pairings, and the fact that one of the museums recruited 'Buddy pairs' from partner organizations rather than finding Buddies from among their established volunteer base.

Motivations and barriers

Analysis of volunteer interviews showed that motivations for volunteering were to form connections, both with other people and museum objects or collections; learn new information; provide routine; and give time usefully, factors which align with the actions of 'connect', 'keep learning', 'take notice', be active' and 'give' from the *Five Ways to Wellbeing* (Aked et al. 2008) used by the museums in their volunteer training. In keeping with previous research, a unique feature of the museum context was its capacity to promote lifelong learning (Orr 2006), combining leisure with education in an area of interest (Holmes 2003). Enhancing the volunteer learning experience was one of three motivational practices equated with increased performance in volunteer programmes, along with building a community and fostering the self-management of volunteers (Stebbins 1996). Generally, the main reasons for volunteering are to improve things, help others, and be involved with a good cause. The motivation for volunteering in the current study was not so much about being involved with a good cause but due to an intrinsic interest in the museums' local or natural history collections (Metzer 1996). Distinguishing between intrinsic and extrinsic motivation provides insight into the importance of targeted recruitment in terms of diversity policies. In this study new volunteers, though keen to help the public, were motivated by the need to get out of the house on a regular basis and

interact with others. Regularity of the voluntary position gave volunteers a purpose in life and helped them to integrate, develop a sense of belonging and feel valued for their contribution, aligning with the leisure model of volunteering (Orr 2006).

In addition to motivations, the current project interrogated barriers perceived by the targeted volunteer population and the organization. As few studies have been conducted to determine the effects of increasing volunteer diversity in museums, little consideration has been given to specific actions to combat institutional barriers, such as offering training and mentoring. For the current study, one barrier to volunteering was not having information about or knowing where to look for volunteering opportunities that would fit flexibly around other commitments, such as hospital appointments. This barrier was overcome by working with local third sector and volunteering agencies and placing recruitment advertisements where they would be seen by a diversity of potential volunteers such as general practices and local shops. Although this recruitment process might appear more onerous on the part of museum staff, the approach of forming partnerships with third sector organizations in particular may be more sustainable as potential volunteers can be supported at no additional cost to the museum. A further barrier that emerged was the possibility of volunteers being unable to maintain their voluntary positions after the study, due to economic and time constraints of the museum and museum staff. Helping volunteers feel valued, recognized and looked after was an essential part of overcoming this barrier, which led to feelings of role satisfaction and goodwill for the organization (Tlili 2008). Furthermore, working in partnership with third sector and volunteering agencies meant that volunteers could be offered other local opportunities.

Given that learning was a fundamental characteristic of the public-facing voluntary roles in the current project, training in the necessary information to impart to visitors was essential. Training appeared to increase feelings of being valued because volunteers were supported in their role to build relational, rather than transactional interactions in discussing information learnt about the collections in engagement with museum audiences from the local community (Moncrieffe 2011). To remove barriers preventing increased diversification, museums are well placed to offer training for their voluntary positions which would theoretically produce a cyclic effect of bolstering confidence, offering agency, and supporting the ability to learn and inform, thereby connecting with museum visitors. In this way, the six main themes revealed by the research (social interaction and forming connections; support; learning and training; diversifying volunteering; giving time and sharing; and routine) would interact to improve wellbeing, with the predominant benefit of increasing social interactions and forming connections.

Conclusions

Examination of the six main themes brought together a broader picture of the factors that underpinned and supported volunteer wellbeing outcomes. The project increased the ability of museums involved to promote diversity of volunteering populations by reforming their recruitment to enhance and enrich training, and offering mentoring programmes. Importantly, the project demonstrated that museums can be highly effective in providing volunteering opportunities for disadvantaged adults, roles which support and enhance the lives of local people and assist communities in realising their full potential (Silverman 2010). If the current project could be scaled up, museums around the UK might become places of equality (Pearce et al. 2002; Sandell and Nightingale 2012) that help to address psychosocial wellbeing inequities of the population as a whole (Abel 2008).

Building upon their capacity for training staff and volunteers, museums established enhanced feelings of psychosocial wellbeing within and between both groups (Fancourt and Finn 2019). Many museums have social inclusion targets in their strategic planning and aim to enact this through diversification of their volunteer base. If a museum aims to diversify its volunteer base to include people facing health inequalities from the local community, as achieved in the current project, it is essential to provide adequate training of new volunteers to fulfil their roles in the organization (Edwards 2005), and for museum staff to support these vulnerable adults through specific training and safeguarding measures. In the future, it is recommended that suitable training should be provided to support diversification within volunteering. There

is a question, however, as to whether museums might offer the wellbeing-focused training to new volunteers regardless of their mental or physical health status and, if so, whether this would act to maintain a disparity between volunteering through the standard route and the new route involving third sector organizations. As the basis of a future study, a wellbeing induction training intervention could be compared with a control group receiving standard induction training, to demonstrate whether there is potential for programmes to address inequalities. Achieving diversity goals should increase the confidence of those working in the museum and strategically embed wellbeing across all levels of the organization. Overall, the project produced themes and understandings warranting further study, particularly those concerned with enhancing diversity and sustainability, and addressing social responsibility for health inequality.

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Notes

- ¹ Maurice Davies, 'Increasing Cultural Capital: Museums Need to Do More to Engage With the Poorest in Society', Museums Association Blog 2013. <https://www.museumsassociation.org/comment/maurice-davies-blog/29102013-increasing-cultural-capital-engage-with-poorest-in-society>, accessed 10 December 2019.
- ² National Council for Voluntary Organisations, 'UK Civil Society Almanac', 2019. <https://data.ncvo.org.uk/>, accessed 6 December 2022.

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