

University of Groningen

Social integration in a reversed integration neighbourhood?

Venema, Eleonora

IMPORTANT NOTE: You are advised to consult the publisher's version (publisher's PDF) if you wish to cite from it. Please check the document version below.

Document Version

Publisher's PDF, also known as Version of record

Publication date:

2016

[Link to publication in University of Groningen/UMCG research database](#)

Citation for published version (APA):

Venema, E. (2016). *Social integration in a reversed integration neighbourhood? Perspectives of neighbours, family members, and direct support professionals and the role of formal and informal support.* Rijksuniversiteit Groningen.

Copyright

Other than for strictly personal use, it is not permitted to download or to forward/distribute the text or part of it without the consent of the author(s) and/or copyright holder(s), unless the work is under an open content license (like Creative Commons).

The publication may also be distributed here under the terms of Article 25fa of the Dutch Copyright Act, indicated by the "Taverne" license. More information can be found on the University of Groningen website: <https://www.rug.nl/library/open-access/self-archiving-pure/taverne-amendment>.

Take-down policy

If you believe that this document breaches copyright please contact us providing details, and we will remove access to the work immediately and investigate your claim.

Downloaded from the University of Groningen/UMCG research database (Pure): <http://www.rug.nl/research/portal>. For technical reasons the number of authors shown on this cover page is limited to 10 maximum.

Chapter 5

Volunteers in the support of people with intellectual disabilities:
characteristics, commitment and view

A Dutch version of this chapter is published as:

Venema, E., Vlaskamp, C. & Otten, S. (2016). De vrijwilliger in de zorg voor personen met een verstandelijke beperking: kenmerken, inzet en visie. *Nederlands Tijdschrift voor de Zorg aan mensen met verstandelijke beperkingen*, 42(2), 79-92.

Abstract

Background: Since January 1st 2015, law changes have been implemented in the support of people with intellectual disabilities. This will lead to a change in character, content and duration of support by volunteers. Amongst others, this includes the necessity of the effort of volunteers to take over tasks of direct support professionals that they do not manage to do. To get a better understanding of the actual and potential role of volunteers in the care of people with intellectual disabilities, it is necessary to gain insight in the current volunteer work and in the possibilities concerning the recruitment and role of volunteers in the future. **Method:** This was researched by means of a questionnaire filled in by 117 volunteers and an expert meeting with 17 people involved in the support of people with intellectual disabilities. **Findings:** Results show that volunteers doing volunteer work in the support of people with intellectual disabilities are similar to 'traditional' volunteers: women without a paid job or who are retired, and who have altruistic motives to do the volunteer work. In addition, results from the expert meeting show that not all participants experience volunteer work as a feasible bridge for the social integration, and feel that social integration is not in reach for all people with intellectual disabilities.

5.1 Introduction

Volunteer work is particularly important in our current society, some even call it “the cement of the society” (Plemper, Scholten, Oudenampsen, van Overbeek, Dekker & Visser, 2006). Volunteer work creates, among other things, a more mutual engagement between people and it may offer unconditional support to those who need it. Volunteers can potentially provide a connection to the community to people who need it (Plemper et al., 2006), and they may provide practical and social-emotional support (Devilee, 2008).

Since January 1st 2015, law changes have been implemented in the support of people with intellectual disabilities. The “General Law Extraordinary Health Care Costs” [Algemene Wet Bijzondere Ziektekosten] has been replaced by the “Law Long-Lasting Health Care” [Wet Langdurige Zorg] for people with high support needs, like those with severe or profound intellectual disabilities or intellectual disabilities and behaviour and/or psychiatric problems, and by the “Law Societal Support” [Wet Maatschappelijke Ondersteuning] for the people with mild and moderate intellectual disabilities and other people who need support in being self-reliant and/or in participating in the community (van Rijn, 2013). In both laws it is stated that people with intellectual disabilities should be enabled to get more control over their own lives (van Rijn, 2013a). Moreover, people with intellectual disabilities should appeal more to their social network for support (de Boer & de Klerk, 2013). Therefore, based on the new legislature, family members and volunteers will play a larger role in the lives of people with intellectual disabilities than they did so far (Luijckx, ten Brug & Vlaskamp, 2013). However, it is uncertain how much larger the role of family members can actually be as they are already heavily burdened by the care of their relative (Oudijk, de Boer, Woittiez, Timmermans & de Klerk, 2010). Besides, they often hold a payed job or are elderly (Brouns, Tap & Stam, 2013). This situation makes it even more relevant to find new volunteers outside the family of people with intellectual disabilities.

Another change that has taken place in the support of people with intellectual disabilities is the increased attention for enhancing their social integration. Social integration means that people with intellectual disabilities are an accepted and appreciated part of the community (van Alphen, 2011). Physical integration is a precondition for social integration. Only when people with and without intellectual disabilities meet each other, social contacts can arise (Venema, Vlaskamp & Otten,

2016a). However, while many people with intellectual disabilities have been moved to regular neighbourhoods in the past years and some residential facilities were turned into neighbourhoods with reversed integration (Venema et al., 2016a), the aim to enhance social contacts was not (or hardly) met (Chowdhury & Benson, 2011; den Daas, Nakken, Smrkovsky & van der Struik, 2007; van Gennep & Ruigrok, 2002). In literature, the direct support professionals (DSPs) are seen as the connection between people with and without intellectual disabilities (van Alphen, 2011; Chowdhury & Benson 2011; Mansell 2006; Mansell et al., 2002; Overmars-Marx 2011). However, because of the changes in the support of people with intellectual disabilities, they hardly manage to accomplish activities that enhance social integration (Hermsen, Embregts, Hendriks & Frielink, 2011). Volunteers could therefore play an important role in this. Apart from their presence already being a form of social integration, they also could do tasks that enhance the social integration.

Until now, there is little, if any, national and international research done about volunteer work in the support of people with intellectual disabilities. Scholten, Meeuwssen and Berman (2011) found that there are about 50.000 volunteers in the support of people with disabilities. However, in this data no distinction is made between people with intellectual disabilities and people with physical disabilities. Nevertheless, there are several studies about volunteer work in the healthcare, especially elderly care (Wittenberg, Kwekkeboom & de Boer, 2012). These studies give a clear picture about the typical volunteer in the (elderly) care: the majority are women (Plemper & Moll, 2005; van Houwelingen, Hart & Dekker, 2011) between 45 and 75 years old (Devilee, 2008). The tasks of these volunteers are diverse. Most volunteers go on a visit, are helping in transport, or support during trips. Too, they are often doing administrative activities, for example being a curator or they participate in the client council (de Boer & de Klerk, 2013; Plemper et al., 2006). Almost half of the volunteers are doing their volunteer work with moral, religious or political motives (Plemper et al., 2006).

It is unknown whether these results about the type of volunteer and the content and extent of the volunteer work in the (elderly) care also apply to volunteers in the support of people with intellectual disabilities. A similarity is indeed that there is a high degree of dependence in both groups; on the other hand, the group of people with intellectual disabilities is very heterogeneous, both in the severity of the

intellectual disabilities and in the presence of additional disabilities like motor and/or visual disabilities, behaviour and/or psychiatric problems.

This diversity possibly also requires a diverse group of volunteers with different characteristics. Apart from the demographic characteristics, the motivation of the volunteers could be also be subject of change. In volunteer work in general, a shift seems to have taken place in the previous years. Where volunteers used to have primarily altruistic motives, they now often want to learn new skills and acquire work experience (Wardell, Lishman & Whalley, 2000). Hence, volunteer work is seen as a first step to paid work. Possibly associated with this, there is an increasing number of volunteers who are unemployed (Wardell, Lishman & Whalley, 2000). Furthermore, there is a rather new group of volunteers, the so-called 'compulsory' volunteers do their work for example as a social internship, or in the scope of reintegration projects (de Boer, & de Klerk, 2013; Dekker, de Hart & Faulk, 2007).

Concerning the *content of the volunteer work*, the tasks volunteers are asked to do can vary from accompanying people with intellectual disabilities to watch a football game to actually performing care tasks like providing support in eating and drinking. It is unknown in how far volunteers are explicitly performing tasks that enhance social integration, nor whether volunteers are aware of their role in enhancing social integration of people with intellectual disabilities. Also, it is unsure if organisations have embedded this topic in their policy and vision concerning volunteer work.

Concerning the *extent of the volunteer work*, the number of volunteers in health care turns out to have decreased. One of the reasons is that women nowadays often have paid work, thus leaving less time for volunteer work. Another reason is the ageing of the current group of volunteers (Scholten, Meeuwssen & Berman, 2011). Other changes and shifts that have been identified over the previous years are that many people want to have less obligations, they do not want to be bound by volunteer work (Dekker, de Hart & Faulk, 2007), and they just want to be a volunteer for a short period (Hustinx, 2011). This especially applies to young people (Scholten, Meeuwssen & Berman, 2011). The decrease in volunteers, but also the changes and shifts requires continual recruitment of new volunteers. It is unknown in how far these changes and shifts are also taking place in the support of people with intellectual disabilities and how organisations are dealing with this. Corresponding questions are related to the eligibility of potential new volunteers and the content of the tasks they are asked to do.

Moreover, the location where the volunteer work in the support for people with intellectual disabilities takes place, could influence the volunteer work. The location characteristics (more segregated versus open, integrated in the neighbourhood), the different target groups, but also the differences in the attitudes of DSPs about the role of volunteers can result in differences in the type of volunteer, as well as the content and extent of the volunteer work.

To determine which role volunteers could fulfil in the support of people with intellectual disabilities, especially in enhancing the social integration, it is important to match as good as possible with the current needs in support of people with intellectual disabilities. Therefore, it is important to first investigate how the current situation is concerning the volunteer work and what the experiences and visions are of the people involved in the support of people with intellectual disabilities. The research question is therefore two-fold: (1) what are the characteristics of volunteers and the content of current volunteer work in the support of people with intellectual disabilities, and (2) what is the view of the people involved in the current volunteer work, especially regarding the possibilities of social integration. To answer the first question a questionnaire was distributed among volunteers, for the second question an expert meeting was organised.

5.2 Methods

Participants and setting

The research took place in an organisation that offers support to people with intellectual disabilities in the Northern part of the Netherlands. This organisation provides care and support to approximately 1500 people with intellectual disabilities. A total of 1038 volunteers were working in several different types of locations of this organisation: residential facilities, a reversed integration neighbourhood and community housing. To answer the first research question, volunteers from all three types of location were selected. In the selected locations, a total of 238 volunteers were doing volunteer work. All of them were requested to fill in a questionnaire about the volunteer work they were doing. Of these 238 volunteers, nearly 50% (i.e., N=117) filled in the questionnaire (see table 5.1).

Table 5.1. Number of participant per location

Location	Number of participants that were approached	Number of completed questionnaires	Percentage
Residential facility	84	44	52,4
Reversed integration	52	29	55,8
Community housing	92	44	47,8
Total	238	117	49,2

For the second part of the study, three groups of experts took part in the expert meeting: members of the organisational management, professionals (team leaders, DSPs and volunteer coordinator) and other stakeholders (family members and volunteers). There was an equal division between the three groups and the three types of locations in order to represent all stakeholders and all locations proportionally. Eventually 17 people took part in the expert meeting. The participants were recruited on nomination by the organisation.

Instrument

For the first part of the study, a structured questionnaire was developed for the volunteers. Herein, we strongly built on a literature review by Van der Steen-Kuiphof and De Boer (2014), who found that motivation for volunteer work can be divided in three main categories: (1) altruistic and normative motivation, (2) pleasure and challenges, and (3) personal benefit. Within these three broader categories eleven specific motives were listed. These were included in the questionnaire in the form of statements. An example is: "I am doing volunteer work because I want to increase my work experience". People could rate on a five point scale how relevant these statements were for themselves. Herein was 1 'totally not relevant' and 5 'totally relevant'. Moreover, they had the opportunity to supplement the list with possible additional motives they might consider relevant. The remainder of the questionnaire consisted of questions about demographic characteristics of the volunteers, their tasks, frequency and duration of their volunteer work and the locations where they did it. The possible tasks were presented in a list, in which the participants could mark which tasks they did as a volunteer. They also had the opportunity to add tasks that were not on the list and could indicate which other tasks they wanted to do.

Concerning the expert meeting, three themes were discussed. Regarding the first theme, 'new volunteers', the central question was: which types of volunteers could play a role in the support of people with intellectual disabilities, and what should this role imply? Central theme during the second round was 'volunteer work and social integration'. The question was how social integration should be best embedded in policies regarding volunteer work. The third and final theme was 'the optimal environment in which volunteers could excel at their work' .

Procedure

For the first part of the study, volunteers were approached by regular mail, and were invited to participate after providing information about the study. They were asked to fill in the questionnaire within a month and to send it back in the return envelope.

Concerning the second part of the study, the expert meeting began with a presentation in which volunteer work in the support of people with intellectual disabilities was introduced. After that, three themes were discussed to get a better understanding of the views of stakeholders regarding volunteer work and the possibilities of volunteer work in the support of people with intellectual disabilities, especially concerning the social integration of people with intellectual disabilities. Each discussion session lasted 25 minutes after which breaks of 10 minutes were held. The discussions were lead by an experienced and independent panel chairman who was not involved in the organisation or in the research.

Analysis

For the first part of the study, the demographic characteristics and the motives of volunteers, frequencies and means were calculated. Differences between the locations concerning the demographic characteristics and motivation were analysed using a multivariate analysis of variance, with location as an independent variable with three levels. For the analysis of typical tasks for volunteers, percentages were calculated. The tasks were divided in sporting tasks, trips, tasks inside the residence of people with intellectual disabilities, other tasks not committed to a specific client, and other tasks which were committed to a specific client. Examples of other tasks, not committed to a specific client, were gardening, cleaning and transport. Other tasks committed to a client included care tasks and accompanying to the dentist,

doctor or hospital. The differences between locations were tested with Chi-square-tests.

The expert meeting was recorded on video and afterwards the conversations were written verbatim. These qualitative data was analysed using open coding. First, all the discussed topics were coded. Second, the codes were brought together in one of the three themes. For every theme a summary was written about the discussed topics. The inter-rater reliability was measured by two researchers, the first author of this article and a researcher who was not involved in this study, based on 10 percent of the verbatim written text using Cohen's Kappa. Both raters independently coded the topics of the discussions. A inter-rater reliability of 78 percent was found.

5.3 Results

5.3.1 Results questionnaire

Demographic characteristics

The analysis of the demographic characteristics shows the following: The majority of the group of volunteers are women (65,8%) with an average age of 55.45 years (SD=14.05). Most of the volunteers do not have a family member with intellectual disabilities (74.1%). Their education level is primarily intermediate vocational education (51.2%). 18.8 Percent of the volunteers has finished higher vocational education or university (respectively 15,4% and 3.4%). Of all volunteers, 66.3 percent does not have a paid job or is retired (respectively 32.5% and 30.8%).

We also looked for differences between the three locations (residential facility, reversed integration facility, community houses) regarding the demographic characteristics of the volunteers. Fisher's LSD test revealed no significant differences between the locations.

Motivation

Participants' responses to the questions about their motivation show that they are primarily driven to do volunteer work because they like the work, they want to help other people and because they think that the client needs it (see table 5.2). The other possible motives were rated of little if any relevance.

Some differences are found between the volunteers of the different locations concerning their motivation. In the residential facility, but not on the other two locations, religion or philosophy are also relevant incentives for performing the

volunteer work (mean=3.00; SD=1.78). Moreover, in the reversed integration facility, but not on the other two locations, volunteers indicate that they do their work because it matches their own interests (mean=3.21; SD=1.84).

Table 5.2 Motivation of volunteers

Motivation	Total	
	Mean	SD
Religion/philosophy	2.62	1.68
Nice work	3.86	1.57
Challenge	2.50	1.60
Like to help people	3.87	1.49
Client needs it	3.25	1.64
Increasing own social network	1.96	1.40
Work experiences	1.68	1.26
Developing themselves	2.00	1.38
Looks well on the cv	1.44	1.05
Matches my interests	2.54	1.67
Obligated by an authority	1.14	.64

Extent and content of volunteer work

On average, the participating volunteers have been doing their work since 7.9 years (SD=8.70; <1 year-40 years). On average the volunteers do volunteer work for 9.7 hours per month (SD=10.49; 1-60 hours). The activities that volunteers perform are displayed in table 5.3.

The most often mentioned activity is accompanying people with intellectual disabilities on trips. Moreover, helping with activities is done by almost half of the volunteers. Other tasks that are connected with a specific client, for example care tasks and accompanying to the doctor or hospital, are hardly performed.

Table 5.3 Tasks and activities of the volunteers

Tasks/activities	Total		Residential facility		Reversed integration		Community houses	
	N	%	N	%	N	%	N	%
Trips	78	66.7	32	72.7	21	72.4	25	56.8
Sporting activities	52	44.1	22	50.0	10	34.5	20	45.5
Activities inside the residence	30	25.8	4	9.1 ^a	4	13.8 ^a	22	50.0 ^b
Other tasks, not connected with a specific client	24	20.5	3	6.8 ^a	9	31.0 ^b	12	27.3 ^b
Other tasks, connected with a specific client	6	5.1	2	4.5	1	3.4	3	6.8

* Means with different superscripts are significantly different: $p < 0.05$

Again we found some significant differences between the three locations. In the community houses the volunteers do significantly more tasks inside the residence of the people with intellectual disabilities compared to the other two locations. The volunteers in the residential facility perform significantly less tasks that are not connected with a specific client.

Volunteers were asked if they potentially want to do other or more extended tasks and activities. 35.0% of the respondents gave an affirmative answer to this question. The tasks they would like to do or to extend are particularly tasks inside the residence of people with intellectual disabilities (41.5%) and accompanying on trips (36.6%).

5.3.2 Results expert meeting

To investigate the data of the expert meeting the discussed topics of each of the three themes were coded. The relevant code in the first theme is: new types of volunteers. In the second theme the codes are: tasks, social integration, role of DSPs, recruitment, and training. Finally, regarding the third theme the codes are: general policy of organisation, communication, appreciation, and providing information. For each theme the coded data will be summarized.

New volunteers

According to the management, the organisation was still focusing on the traditional volunteers; however they expected that in the future there would be more differentiation in the volunteers' characteristics like former employees, trainees, elderly people and clients with intellectual disabilities. In some cases clients had already been recruited as volunteers. According to the DSPs, these client-volunteers felt that they were important because of what they could mean for others.

Also two other, new types of volunteers were mentioned: volunteers who receive a structural fee, and family members as volunteers. While management, family members and volunteers saw possibilities for both groups of volunteers, DSPs were sceptical. People who receive a structural fee were not considered volunteers by all DSPs. Moreover, they believed that family members did not have time or the desire to execute volunteer work with other people with intellectual disabilities in addition to what family members were doing for their relative. Currently, there were no conversations with family members about this subject.

“Personally, as a DSP I find it bothersome to ask a family member to do something voluntary, because I notice that some people with intellectual disabilities do not get any visits of their parents. The parents do not have time for it or they do not want to. We are already happy when parents visit, so we do not dare to ask about volunteer work.” (Professional D)

Volunteer work and social integration

Regarding the question to what extent volunteer work could contribute to the social integration, all participants agreed that volunteer work asks for an individual approach, also regarding the enhancement of the social integration. It depended on the person with intellectual disabilities if stimulating the social integration was considered an added value and a relevant need. People from the management of the organisation emphasised that social integration was an essential part of their policy; however, they did not want to enforce this policy on DSPs and volunteers.

While all participants agreed that volunteers could play an important role in the social integration of people with intellectual disabilities, they also stated that currently this was typically not a strong motivation for volunteers to do their work.

“What is more beautiful than that the boy with whom I have done odd jobs, comes to me at the end of the day, at 4 o'clock and says 'I had a beautiful day'. Why would I do something with the other topic [social integration].”
(volunteer B).

According to the participants in the expert meeting, DSPs could play a crucial role in enhancing volunteers' contribution to social integration. For example, they should look at the possibilities.

“When you organise an activity, it does not have to be huge at all, but when at that moment the DSP does not stand up and helps to facilitate, nothing will happen. Because a client does not read news papers or flyers. The average client in the organisation is depending on people who help to connect. “
(Professional A)

In addition, the DSPs could play a relevant role in the demand-orientated recruitment of volunteers, for example, DSPs should recognise the need for a volunteer and initiate the recruitment. Not all DSPs were aware of this and also guidelines were missing about how they could deal with this aspect. Moreover, DSPs found many tasks not suitable for volunteer work, especially with people with complex problems, because of the consequences of possibly developed problems concerning the responsibility.

“I work with people with intellectual disabilities and behaviour and/or psychiatric problems, sometimes you have to deal with physical and verbal aggression. It is very bothersome when a volunteer leaves with a client, for example to go shopping, and that the client shows this behaviour because he or she wants something but can not have it because of some reason. It is especially difficult when you are in a public area.” (Professional D).

According to the DSPs, with a proper training, volunteers could take over more tasks. According to a family member the family members should also be involved in deciding, which activities are suitable for volunteers. This also applied to activities enhancing the social integration.

Optimal environment for volunteers

Management stated that volunteers were very important for the organisation. The content and extent could not be written down in protocols, but it should be based on the reciprocal agreement between the volunteer and the client. The coordinator of the volunteer work, who took part in the expert meeting, held the opinion that volunteers should get a clear position in the organisation. In the triangle; client, family member and DSP, the volunteer should also have a place.

According to the participants, an optimal environment for volunteer was characterized by clear appreciation of and good communication with the volunteers, and by providing them with sufficient information about the requirements of their tasks and with the necessary background information about the person with intellectual disabilities. In the organisation clear guidelines are required concerning the appreciation of volunteers.

“I think that it is important that the organisation constantly gives the message about how important it is to express it [appreciation]. A change in behaviour is necessary, because we have stayed attached to the protocols for too long. People should just dare to take the freedom to give flowers in stead of 'is it allowed to buy flowers?'. (Professional A)

Volunteers experienced appreciation in different ways: through the pleasure that clients had, but also through compliments and little gifts, such as flowers or a card. All participants agreed that in addition to appreciation, it is crucial that the communication is good. Volunteers, DSPs and clients should know each other. Thereby it was necessary that the volunteer got all the information he or she needed to do the job well. Moreover, the professionals acknowledged that currently they were often (and maybe too) rigid on the matters of privacy and responsibility. This obstructed the volunteer work, especially in the community.

“As a DSP you are responsible. What if something goes wrong?”
(Professional C)

They made clear that they needed more guidelines about how to deal with this in practice. Interestingly, with the exception of one family member, all other participants had no reservations about sharing information regarding the respective clients.

5.4 Discussion

The aim of the present study was to form a better picture of the typical characteristics of the volunteers and the current volunteer work in the support of people with intellectual disabilities. Moreover, we strived to investigate the perspectives of management, professionals, family members and volunteers on the current volunteer work and its possibilities, especially regarding social integration.

The present findings show that mainly 'traditional volunteers' perform the volunteer work: primarily women who do not have a paid job or are retired, and who have altruistic motives. Moreover, the organisation still focusses on traditional volunteers. The shifts in volunteer work in other sectors, like from long-term to short-term volunteer work (Hustinx, 2011), and from volunteers with altruistic motives to volunteers who want to increase their work experiences (Wardell, Lishman & Whalley, 2000), seems not (yet) have taken place in the support of people with intellectual disabilities (de Boer, & de Klerk, 2013; Dekker, de Hart & Faulk, 2007).

Another striking outcome is that for the motivation of the volunteers as well as the content of the volunteer work, the location seems to be a determining factor. In residential facilities the volunteers are more 'traditional' and are performing more activities outside, compared to the other locations. The differences in tasks could be explained by the fact that a residential facility is a relatively protected environment for people with intellectual disabilities, while in community houses they have to deal with an unpredictable environment with several potential dangers like traffic and strangers. McConkey and Collins (2010), but also Venema, Vlaskamp and Otten (2016a) found that safety is an important topic for DSPs. That volunteers are doing more activities inside the residences of people with intellectual disabilities, could have to do with DSPs who try at all times to guarantee the safety of the volunteers as well as the people with intellectual disabilities and therefore only search for and encourage volunteer work inside the facilities. However, given the long relationship that volunteers in general have with the person with intellectual disabilities, it seems safe to assume that the volunteer knows the person with intellectual disabilities well enough to also undertake activities in the community.

Nevertheless, many activities are already performed outside. During these activities social contacts can arise. Simple forms of contact, like greeting, can enhance the social integration, because people with and without intellectual disabilities can get in contact with each other's world in a restricted and thereby safe way (Bredewold, 2014). However, comparable with DSPs (Venema, 2014), most volunteers do not seem to be aware of the possibilities for social integration by simply taking the people with intellectual disabilities outside. Therefore, despite the many opportunities in volunteer work to enhance social integration, they currently do not seem to be utilized for enhancing social contacts. The organisation may play a role in this by providing information about the positive effect of having (more) social contacts for people with intellectual disabilities. Moreover, raising this awareness may also be an important task for DSPs. They could stimulate the volunteers and give them instructions, so that the volunteers know how they can create social contacts while taking the disabilities of the people with intellectual disabilities into account. This presumes that the DSPs have a positive attitude towards the possibilities of social integration. Unfortunately, this is exactly what seems to be missing (Clement & Bigby, 2009; Venema, Otten & Vlaskamp, 2015). A sceptical attitude towards social integration seems to be present in all layers of the organisation. Social integration is not expected to be achievable for every person with intellectual disabilities. Such attitude has also been found in other studies, especially concerning the social integration of people with severe or profound intellectual disabilities and/or with a high degree of challenging behaviour (Bigby, Clement, Mansell & Beadle-Brown, 2009; Venema, Otten & Vlaskamp, 2016). As long as the people involved in the lives of people with intellectual disabilities do not realise the value of social integration for people with intellectual disabilities, they probably will not enhance it. For the organisation it is therefore important to have a clear policy on the integration of people with intellectual disabilities and furthermore to complement that policy. This also applies for the policy concerning the volunteer work.

Regarding the extent of the volunteer work, more attention should be paid to other kinds of volunteers to prevent a shortage of volunteers, because volunteers nowadays have different goals in performing volunteer work. The organisation may in their recruitment pay more attention to, for example, short term volunteer work, volunteers who want work experiences and compulsory volunteer work. In addition, in the expert meeting new groups of volunteers were mentioned, such as client and

family members as volunteers. Mind that family members as volunteers means that they perform volunteer work with other people with intellectual disabilities than their own relative. It could be interesting for the organisation to investigate how volunteer work with these kind of volunteers is currently set up elsewhere and what the success factors are. The DSPs once more could play an important role herein. They could recognise the need for a volunteer and take the initiative to search for him or her. Finally, for an organisation to make optimal use of volunteer work, it should offer guidelines about the role of DSPs in the volunteer work and about how DSPs should involve and facilitate the volunteers in the support of people with intellectual disabilities.

Of course, the present study is not without limitations. In order to make responding to the questionnaire as accessible as possible it was sent to the volunteers by regular mail, together with a return envelope. This way, we tried to avoid that people without internet were excluded from responding to the questionnaire. Nevertheless, there could still be a selection bias. It is possible that only the volunteers who were very positive or very negative about their volunteer work filled in the questionnaire. However, a large group of volunteers (more than 50% of those contacted), and quite evenly distributed across the three different locations, responded to the questionnaire. Moreover, the study has been executed in only one organisation in the Netherlands. It is a large organisation without a specific religious or philosophical orientation. Yet, to enhance the generalisability of our findings it would be desirable to execute a similar study at multiple organisations supporting people with intellectual disabilities within the Netherlands (and, as a possible next step, also in other countries).

The current study intended to give a clearer picture of the content, extent, and type of volunteer work in the support of people with intellectual disabilities, and of the role of volunteers in the enhancement of the social integration of this group. The results offer a good foundation to do more research about the content of the volunteer work, especially regarding enhancing the social integration of people with intellectual disabilities. Using this information, organisations could specify their policy with respect to their volunteer work, and hereby also offer the DSPs more concrete guidelines on how to support and encourage volunteers in their work. Moreover, it seems desirable to bring the importance and possibilities of social integration of the clients more to the attention of all relevant stakeholders (i.e., the organisation, DSPs,

volunteers, family members). Furthermore, the present findings provide information that may help to improve the recruitment of volunteers who can contribute to enhancing the social integration of people with intellectual disabilities. Moreover, the organisation can already take action by placing volunteer work high on the agenda and by bringing it to the attention of DSPs. The present results suggest that it is highly relevant that organisations provide their volunteers with sufficient support, appreciation and communication/information, but also that they consider new forms of volunteer work, and new types of volunteers. With a clear vision, the volunteer work can be further improved and a policy can be established in which the needs and possibilities of the clients, volunteers and DSPs will be optimally supported.

