Volunteers in health

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Background: The role of volunteers in health has generally been seen as passive, centred on fundraising, advisory boards/committees and other non-service delivery roles. There is, however, an opportunity for volunteers to be much more proactive in their communities and contribute to improving health outcomes by becoming peer educators. In this role, with adequate support from health services and organisations such as the University Department of Rural Health (UDRH)—previously known as the Spencer Gulf Rural Health School—it is possible for them to become leaders in service provision and health education that is predominantly the domain of health professionals.

Methods: Over the last ten years one such organisation in Whyalla, ‘Health In Our Hands’, has been working closely alongside the UDRH in Whyalla, and with local, state and federal health services to achieve just this goal. Volunteers have, over this period, undergone a range of training in providing a variety of health-related programs based on the Stanford Chronic Disease Self-Management Program. This community capacity building commenced during the federally funded Sharing Health Care project in 2002 and has continued to the present time resulting in the volunteers acquiring a vast amount of experience, expertise and qualifications in this field.

Much research has been conducted on the benefits of community peer educators and the results from Health In Our Hands experiences adds to the body of knowledge that this concept works well to increase the capacity of the community to adapt and to self-manage. Volunteers have developed a range of programs all aimed at giving community members the opportunity to make changes to improve their health and increase health literacy. These include education workshops, Tai Chi, exercise classes, social meetings and health-related information. Training for the volunteers has been pivotal to the success so far; and the UDRH has provided the opportunities for volunteers to learn new skills and has continued to provide the valuable support network needed for an enterprise such as this. This training and support has been so successful that some of them are now qualified to train not only other volunteers but health workers too, not just at a local level but nationwide. Not all volunteers wish to work at this level and this has been respected; however, they have always been encouraged to widen their scope and most have risen to the challenges and taken part in areas of their interest. Training has been provided in Tai Chi instruction, exercise instructor, volunteer management, organisational management and public speaking. Over the past ten years the centre has also successfully submitted abstracts and presented at a number of national conferences on a range of topics.

Major findings and lessons learnt: This paper will outline the impact this capacity building has had on the community, specifically the volunteers and the participants in the activities they deliver, as well as how the collaborative relationship between the volunteer group and the UDRH as part of the University of South Australia have strengthened the resilience of the community as a whole.