

**THE EXPERIENCE OF RURAL VOLUNTEER IN-HOME  
SUPPORT, COMMUNITY-BASED HEALTH CARE:**

**An exploration of the factors that facilitate and/or hinder rural  
volunteer in-home support through urban-based management of  
rural-based volunteers.**

by

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## **ABSTRACT**

There is growing recognition of the benefits and increasing need for volunteers providing in-home support to individuals and families in the community. This is particularly the case in the domains of hospice palliative care, due to the impacts of an ageing population, and supporting families with children, due to the challenges presented in the early years of life especially in rural areas. The development of these services in rural areas often entails urban-based volunteer services extending services to rural communities through urban-based management of local, rural-based volunteers. The limited research in this area suggests that rural communities face distinctive complexities in the provision of volunteer in-home support, which are yet to be fully explored and are likely to be unaccounted for in urban-centric models. This highlights the need for new research to guide the reorientation of urban strategies to meet the particular challenges and opportunities associated with rural volunteer in-home health provision.

The aim of this research study has been to explore the experience of rural volunteer in-home support, through urban-based management of rural-based volunteers, in order to further the understanding of this form of service delivery in rural communities. Specifically, it sought to identify factors that facilitate and/or hinder its provision and how their impact may be fostered or ameliorated. The study focused on the domains of hospice palliative care and supporting families with children through the multiple perspectives of urban-based volunteer coordinators, rural and urban specialist service providers and rural volunteers. A qualitative research study design involving 27 predominantly rural participants was undertaken utilising volunteer demographic information, semi-structured, in-depth interviews, a focus group, and thematic analysis of qualitative data.

The findings identified multiple complex and interrelated factors which may facilitate and/or hinder rural volunteer in-home support. The overriding themes which emerged were the crucial importance of a community development approach which inherently considers the local rural context, and some manner of a locally based coordinating presence in facilitating the development of rural volunteer in-home support services which are appropriate to the specific rural setting. A synthesis of findings from the study and issues identified in the literature led to the development of a table of 'flags' or reference points, which provide insight into discerning and responding to particular rural socioeconomic and cultural factors which may facilitate and/or hinder rural volunteer in-home support: precedence of family support; self-reliance; multiple overlapping relationships; intermittent need; fragmented and under-resourced nature of the rural health system; and rural volunteers' strong sense of connection to their local community and volunteer organisation. This study contributes to an understanding of the nature of volunteer in-home support in the rural context, and how urban-based volunteer services seeking to provide services in rural areas may work with rural communities to meet rural exigencies.

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# CHAPTER ONE

## INTRODUCTION

### Rationale for research

There is some evidence to suggest that volunteers providing in-home support can make substantial contributions towards meeting the needs of individuals, families and communities in the domains of hospice palliative care and supporting families with children. However, the research is limited and particularly so in the rural context<sup>1-3</sup>. There is a pressing need for these services in rural communities that is associated with the ageing population, a preference to be cared for and die at home<sup>4,5</sup> and the increasing recognition of challenges in the early years of life<sup>6</sup>. Black and Kemp's<sup>1 p 19</sup> finding that "rural communities face some unique difficulties in establishing and managing volunteer home visiting programs" highlights the need for new research to support the development of rural-focused volunteer in-home support services, to help address the inequity in health outcomes among rural populations linked, to a large extent, to poor access to services<sup>7</sup>.

The experience of rural volunteer in-home support services in southern Tasmania appears to support the views expressed by Black and Kemp<sup>1</sup>. Community-based services providing volunteer in-home support, in the domains of hospice palliative care and supporting families with children, were first established in an urban context through localised community action by small grassroots, non-government organisations. Their expansion of services into rural communities, with paid urban-based volunteer coordinators providing training and support to local rural volunteers through urban-based management, has had mixed, though often poor, success (personal correspondence, discourse, and professional experience based on the researcher's two positions as a Community Health and Specialist Palliative Care Social Worker in southern Tasmania). It appears that rural communities may not be fully benefiting from the assistance that rural volunteer in-home support services can provide. This may be particularly detrimental in rural areas where Wilson et al.<sup>2</sup> argue there may be a heightened need for end-of-life (EOL, also referred to as hospice palliative care) volunteers as a consequence of the paucity of specialised EOL care programs and specialists. Families with children living in rural environments with a prevalence of high rates of socioeconomic disadvantage (as is the case of rural southern Tasmania), have a strong risk factor for poorer health outcomes for children and may be further disadvantaged by the lack of rural volunteer home visiting support<sup>8,9</sup>. An exploration of the experience of two rural volunteer in-home support services in the chosen domains may potentially provide: a sufficient number of participants in the study (given the limited number of rural volunteers); opportunities for shared learnings through the commonality of the provision of rural volunteer in-home support; and insights into possible collaborative action amongst volunteer services. It may be the case that a deeper understanding of rural place and culture is required to facilitate rural volunteer in-home support<sup>5,10</sup>.