

Issues in Implementing the Polish Association of Suicidology Volunteer Programs

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Abstract

Volunteers, carrying out their work without pay and of their own accord under constantly changing societal conditions, serve as a bridge between individuals in a suicidal crisis and professionals providing expert support. The concept of volunteering to help people in a suicidal crisis has existed and developed for several decades in Western European countries.

The aim of this article is to discuss the issues of volunteer work for the Polish Association of Suicidology. These challenges cannot be fully understood without considering the issue of motivation in volunteer work. The implementation of volunteer work for the Polish Association of Suicidology requires the development of many procedures designed to encourage volunteers to achieve the goals.

Keywords: volunteering, prevention of suicidal behavior, Polish Association of Suicidology

Introduction

Volunteering, a word derived from the Latin term *voluntarius* and meaning a willingness to act, is an important element of modern society. Its current form gained prominence through the efforts of Pierre Cérésolle, who in 1920 established the *Service Civil Volontaire* – a pacifistic response to the destruction of the First World War (Bogdańska, 2011). Volunteer work covers a range of efforts aiming to help those in need.

One particularly important topic is supporting those who find themselves in a suicidal crisis. The key is establishing communication between a person thinking about taking their own life and individuals who can offer professional help (psychologists, psychotherapists, psychiatrists, and suicidologists). It is equally important for people who may

know someone experiencing a suicidal crisis to know how to react in such situations, and perhaps also take specific actions to guide their loved one to the care of professionals. The idea of volunteering resonates with individuals who possess the appropriate sensitivity, as well as the desire and ability to help people in a suicidal crisis. This includes extending support to people who have been affected by a suicide (Czabański, 2016).

In Poland, volunteer work is regulated by the Act of April 24, 2003 on Public Benefit and Volunteer Work, which specifies the rules governing volunteers' activities. Any adult may become a volunteer, except in situations where age restrictions are in place, such as in care and educational facilities. Volunteering entails a wide range of activities for the benefit of non-governmental organizations, public administration bodies, and individuals and its importance in Poland is steadily increasing. According to the above-mentioned Act, a volunteer is defined as a natural person who, of their own accord and without pay, performs the services specified in Art. 2(3) of the Act (Journal of Laws of 2024, item 1491).

A key element is understanding the motivations that drive individuals to engage in volunteer work, a topic which requires further exploration.

Motivation in Volunteer Work

When examining volunteer work, the main focus is often on analyzing the motivations that impel a person to take on such roles. From a psychological perspective, motivation for volunteerism is connected with the concepts of altruism, helping, and prosocial behavior (Kroplewski et al., 2015).

The literature on the subject of volunteering distinguishes between internal and external sources of motivation (Kroplewski et al., 2015). Internal motivation stems from the personal needs of the individual, such as fulfilling their values, experiencing personal growth, or reinforcing a positive self-image. In turn, external motivation arises from the social environment, including the opinions of others or social recognition (Grabowski, 2014). Psychologically speaking, motivation may also be categorized as either egoistic or altruistic. Egoistic motivation entails the satisfaction of one's needs, e.g., improving one's well-being, whereas altruistic motivation is focused on the needs of others. These two forms of motivation often complement each other, creating a multifaceted picture of a volunteer's motivation.

Volunteers derive energy from their work and from the opportunity to take on a new social role, test their abilities, and engage with others (Zaluska & Boczoń, 1998).

In modern societies, people with mental disorders are still approached with reserve. This raises questions about the motives that guide volunteers who choose to work with people in a mental crisis (Hallet et al., 2012). Authors have identified two main motives: giving and getting. The former reflects a desire to help out of a sense of social

responsibility, while the latter pertains to personal benefits, such as learning or developing skills or gaining a sense of belonging (Zadrożna, 2021).

The theory of human resources management suggests that motivation to work is based primarily on financial rewards, which limits its application to volunteers. However, elements of Maslow's hierarchy of needs – such as the need for recognition, respect, or self-fulfillment – and Alderfer's theory of needs – belonging and development – can be applied to volunteering (Piechota, 2014).

The above leads to an apparent contradiction: although volunteering is defined as a selfless activity, it can also be motivated by self-serving benefits. This phenomenon has been observed by other researchers, who have identified personal benefits as significant motivators of prosocial behavior (Esmond & Dunlop, 2004). Cialdini (as cited in Basińska & Nowak, 2010), on the other hand, distinguished the key motives for such actions: improving one's social position, gaining approval, managing one's self-image, and dealing with emotions.

It seems that the issues of motivation for volunteering are essential for implementing volunteer initiatives for the Polish Association of Suicidology.

Volunteer Work for the Prevention of Suicidal Behavior at the Polish Association of Suicidology

Volunteers complement the professional care providers. As Brunon Hołyst explains, “volunteers reach people in need of help who are unable to contact a professional clinician or are reluctant to seek one. Volunteers bridge the gap between receiving professional care and no care at all” (Hołyst, 2024).

A volunteering plan was developed according to the assumption that suicide prevention efforts involving specialists and experts should be supplemented with the work of volunteers – people who are close to those at risk of suicide (Czabański & Pryba, 2022). The idea was based on the belief that any sensitive person, after the relevant preparation, can act to save people in a suicidal crisis. Examples of such actions would be referring someone in a suicidal crisis to an institution for professional help or providing appropriate support to people bereaved by a suicide (Czabański, 2016). The starting point for this concept is volunteers acting as a bridge between people at risk of suicide and professionals working in the field (psychologists, psychotherapists, psychiatrists, and suicidologists).

Indeed, this type of volunteering typically involves pastors and lay people working in Caritas, but other people may also participate in it: employees of Social Welfare Centers (social workers), school employees (teachers and pedagogues), graduates of Postgraduate Suicidology Studies (Warsaw Management University), and – after proper preparation – students of pedagogy, psychology, sociology, social work, public health, emergency medical services, medicine, nursing, social dialogue, and counseling.

The goal of the project is to establish a support network for people in a suicidal crisis and the loved ones of people who have committed suicide, as well as to disseminate knowledge, especially among adolescents, about supporting peers and helping them in the event of a suicidal crisis.

The beneficiaries of this initiative are

1. people at risk of suicide
2. loved ones of those who have died by suicide
3. adolescents, who can direct their at-risk peers to psychologists, psychotherapists, psychiatrists, and suicidologists.

The duties of PTS volunteers include

- supporting people in finding professional assistance for a suicidal crisis
- helping those affected by suicide with everyday tasks (i.e., shopping, cooking, caring for children, handling administrative matters, and accessing healthcare)
- facilitating the assessment of financial needs and the receipt of financial assistance (e.g., if the breadwinner in the family has taken their own life)
- reaching out to young people with information on how to help a peer in a suicidal crisis
- mobilizing a support network (extended family, neighbors, and friends)
- providing information on the available forms of psychological, psychiatric, social, legal, and medical support (addresses of institutions and organizations, contact information of specialists, and phone numbers of helplines)
- creating and running a support webpage (under the patronage of the Polish Association of Suicidology):
 - a) informative/promotional tasks (providing people in crisis with information about the volunteer initiative and the terms for applying for help)
 - b) knowledge base (offering resources for volunteers and people in crisis on how to cope with crises)
- participating in social campaigns, such as “Life is Worth Talking About” [*Życie warte jest rozmowy*] (www.zwj.r.pl)
- assisting in the organization of open lectures and conferences on preventing suicidal behavior
- reporting on one’s efforts to the designated person within a given branch of the Polish Association of Suicidology, with data regarding how many cases were taken up, how many people received help, what kind of help it was, and any problems or proposals for further training.

More information can be found in the Regulations for Volunteering at PTS. The most important factor, however, is a desire to help those in a suicidal crisis. How can such people be reached?

1. The first path, which offers an opportunity to mobilize social capital within individual local communities, is through parish communities of various denominations: a parish priest at a parish branch of Caritas, and then a trained volunteer from Caritas.
2. The second path is through the police force, who file reports with the Municipal (City) Office. They inform OPS, MOPS or MOPR, who in turn inform volunteers.
3. By reaching out to adolescents in secondary schools and grades 7 and 8 of elementary schools, the idea of helping peers in a suicidal crisis can be popularized and those who are at risk can be identified.

Tasks at various stages of the project include

- developing the Regulations for Volunteering at the Polish Association of Suicidology
- conducting phased recruitment of volunteers (interviews to verify the candidates' motivation and suitability before referring them for training)
- appointing a team of experts from the Polish Association of Suicidology to provide support and consult in suicidal crises (especially for difficult cases)
- providing safety measures and supervisory support for volunteers
- developing a training framework and materials for volunteers (Guide for Volunteers Helping People in a Suicidal Crisis).

The main problem in organizing PTS' volunteering activities involve coordinating activities and developing document templates: the regulations for PTS volunteers, contracts, certificates for completing PTS volunteer training, ID badges, etc. Other challenges related to volunteering at the Polish Association of Suicidology deserve separate treatment. Additionally, the issue of onboarding candidates for volunteer roles within the Polish Association of Suicidology also merits focused attention.

Other Challenges in Preparing Candidates for Volunteer Work with the Polish Association of Suicidology

The challenges of getting started as a volunteer result from the nature of the work, which can lead to an excessive emotional burden and contribute to a sense of helplessness. It appears that some of the people applying to become volunteers of the Polish Association of Suicidology are unable to assess their strengths against their intentions and the demands of working with people in a suicidal crisis. Many people initially express a willingness to volunteer but conclude (even before working directly with people in a suicidal crisis) that they lack the necessary skills. Moreover, many cannot imagine the actual work necessary for

people at risk of suicide. As a result, a significant number of candidates for PTS volunteers ultimately decide not to complete the final training, which is a prerequisite for taking up volunteer work. Observations from the last two years seem to confirm this.

Another problem hindering the development of the PTS volunteer program is the complicated process of finding candidates who meet the specific criteria needed for volunteer work. Volunteers should be empathetic, selfless, committed, creative, ready for action, honest, discreet, responsible, and law-abiding. They should also be open, sensitive, selfless, professional, strongly motivated to help others, tolerant, and able to cooperate with others (Limański & Drabik, 2007). The selection of volunteers prioritizes these character traits over their formal qualifications alone (Scott & Armson, 2000). However, such a wide list of expectations may intimidate some potential volunteers and discourage them from pursuing the role further. These problems are also compounded by constantly communicating with and being around people in a suicidal crisis. Education and regular training are strategies that can combat compassion fatigue and prevent volunteers from resigning (Kinzel & Armson, 2000). Meanwhile, many volunteers complain about time constraints and express a willingness to continuously improve their qualifications.

As Brunon Hołyst states, a volunteer focuses on the person and not the problem. They must listen in an active, empathetic, and non-judgmental way. However, they should be able to assess the risk of suicide in those seeking help (Hołyst, 2024).

It is also worth noting that volunteer work involves stressful situations. Volunteers trained in suicide prevention must also develop their coping skills in difficult situations so as to avoid secondary traumatic stress during their work (Kinzel & Nanson, 2000). Experience from other countries shows that 77% of volunteers have experienced adverse effects from working on a crisis hotline and that it has affected their mental health and well-being (Willems et al., 2020). There are studies describing professional burnout among crisis hotline volunteers (Cyr & Dowrick, 1991; Roche & Ogden, 2017). A high level of stress and professional burnout often occur when a volunteer becomes emotionally involved in the problems of another person (Ogińska-Bulik, 2006; Kozak, 2009). This may result in what is known as the “empathy trap” (Bogdańska, 2011), a condition in which the effort of compassion is compounded by a high level of stress. This can occur when volunteers are faced with another person’s pain or the experience of death (Szymankiewicz, 2013). All of these cases can potentially occur during the work of volunteers of the Polish Association of Suicidology or others who may repeatedly face the deaths of those they assist (Stawiarska, 2011). An awareness of the exhausting nature of this work and the risk of long-term professional burnout (Szymankiewicz, 2013) can discourage some people from fully committing to volunteer activities for people in a suicidal crisis.

During the recruitment process, it is important to suggest to undecided candidates, or those who are uncertain about their communication skills, alternative tasks which will not bring them into contact with people in a suicidal crisis. Such candidates can perform various other tasks, such as helping to organize webinars, scientific conferences, and lectures

on the topic of preventing suicidal behavior. They can also take part in short presentations for broader youth groups, not only for people currently struggling with suicidal crises.

At times, volunteers may encounter people with severe mental disorders, addictions, behavioral issues, or aggression. Under such circumstances, they may feel unable to meet the expectations of the people they are helping. For these reasons and others, it is necessary to ensure the safety of the volunteers. The Polish Association of Suicidology should therefore provide its volunteers with access to experts who can offer substantive assistance, depending on their needs, when they face crisis situations.

Conclusions

The concept of volunteering to help individuals in a suicidal crisis is relatively new in Poland, but this initiative is necessary. Every year, hundreds of thousands of people in Poland experience suicidal crises and require preventive intervention. It seems that these efforts should be carried out not only by professionals – doctors, psychiatrists, psychotherapists, psychologists, educators, employees of crisis assistance centers, helpline operators, and suicidologists – but also by people with the appropriate skills to redirect people at risk of suicide toward specialists. This is a significant task, but one that can be addressed with properly trained volunteers.

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