



5 Ways to Engage and Support Volunteers with Mental Health Conditions

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☑ Educate your staff, educate yourself!

- ***In Our Own Voice:*** Free 60-90 minute presentation in which two individuals share their personal stories about their experience with mental illness, with time for questions/discussion at the end. Contact your local NAMI to schedule a presentation.
- **NAMI Seattle staff trainings:** Free 60-90 minute presentation on recognizing symptoms, communication best practices, and crisis management. Contact katiem@namiseattle.org to schedule a training.

☑ Be explicit about mental health issues in conversation and policies

- Discuss them openly and matter-of-factly, as you would if someone had the flu or an injury
- Include them as part of volunteer handbooks. From NAMI Seattle's volunteer policies:

Behavioral Health Changes: *Volunteers are encouraged to discuss behavioral health changes with their supervisor and voice any needs for accommodation or support. If a supervisor notices a change in a volunteer's behavior that impacts his or her work or working relationships, the supervisor will initiate a conversation with the volunteer about their observations and discuss next steps. Next steps may include finding a more suitable task for the volunteer or suggesting they go home for the day.*

Suggested Leave of Absence: *If the volunteer is not willing or able to adequately fulfill his or her responsibilities, the helpline supervisor may ask the volunteer to take a 2-6 week leave of absence.*

Dismissal: *A volunteer may be dismissed from the helpline if he or she is irresponsible, disruptive, demonstrates inappropriate behavior, or fails to adhere to the policies and procedures of NAMI Seattle.*

Alcohol/Drug Free Workplace Statement: *In compliance with the Drug-Free Workplace Act of 1988, the following is NAMI Seattle's policy regarding the work-related effects of alcohol and drug use and the unlawful possession of controlled substances on the agency premises: The unlawful manufacture, distribution, dispensation, possession or use of a controlled substance on agency premises, or while conducting agency business off-site is absolutely prohibited. The agency recognizes alcohol and drug abuse as a potential health, safety and security problem. Volunteers needing help in dealing with such problems are encouraged to use available health resources as appropriate. Conscientious efforts to seek such help will not jeopardize future volunteering opportunities.*

☑ Initiate supportive contact with volunteers after unexpected absences or periods of noncommunication

Quotes from nonprofit volunteers in Seattle:

"I was supposed to volunteer for a local nonprofit function on Monday from 6 a.m. to 9 a.m. I overslept and woke up at 7:45 a.m. The event technically already started. I didn't end up going and I don't know how to approach them about it, because it has everything to do with my mental health and symptoms. But I feel like I can't be transparent or that they'll understand that... If I tell them I had a medical condition plus my delayed response (aka not answering phone calls or texts) about what happened. Basically I worry they'll just write me off as irresponsible, inconsiderate/rude, unprofessional, or excuse-laden."

"I had been volunteering for a non-profit for a month or so and had been consistently going and doing work for them and meeting with the person overseeing my duties. After that first month, my mental health started to worsen and I missed one shift, then another, then another... After missing so many shifts without contacting the person overseeing me, I decided to stop going. It's been over a year since I stopped showing up and haven't explained that it was due to my mental health worsening. I still feel really bad and I don't know how the organization sees me... and I feel like reaching out after all this time might show them that I don't really care since it took me so long. So I'd rather just not say anything, even though I really want to have a relationship with this organization."

☑ Notice and eliminate stigmatizing language

Don't use mental health conditions as adjectives:

- "I've been changing my mind so much, I feel bipolar"
- "My manager has been really OCD this week about how I complete my paperwork"
- "I almost had a panic attack when I thought they were going to ask me to have that ready by Friday!"

☑ Consider if there are ways to make volunteer opportunities more accessible

- Not scheduling early in the morning
- Offering a variety of different tasks (independent vs. group, organizational vs. physical, remote vs. in-person)
- Provide written instructions/reminders