

DOING AND BEING: THE EXPERIENCE OF ISRAELI VOLUNTEERS DURING  
THE SECOND LEBANON WAR

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"וכתתו חרבותם לאיתים וחניתותיהם למזמרות,  
לא ישא גוי אל גוי חרב, ולא ילמדו עוד מלחמה"  
ישעיה: פרק ב' פסוק ד'

*"And they shall beat their swords  
into plowshares and their spears into  
pruning hooks, nation shall not lift  
up sword against nation, neither  
shall they learn war any more."  
ISAIAH 2: 4*

## ABSTRACT

This study explored the experiences of a small group of Israeli volunteers who responded to a short-term armed conflict affecting civilians. The participants were volunteers during the Second Lebanon War in northern Israel in the summer of 2006. Community-based crises are typically marked by many civilians offering to volunteer in order to meet emerging community needs. The research on community-related crisis intervention tends to focus primarily on first responders and often overlooks other types of volunteers who take part in responding to crises. Additionally, the current literature addresses volunteers' participation in certain types of crises such as the events of 9/11 and Hurricane Katrina. Less is known about volunteers who respond to an ongoing community-crisis caused by an armed conflict. The participants were interviewed two years later about their experiences during the armed conflict. The interview narratives were analyzed using a Grounded Theory approach. The primary themes that arose from these participants' narratives suggested that volunteers' experiences are rich and complex with several factors forming them. These factors, which are associated with and reflect the main ideas of the themes were incorporated into two core categories named "protective and risk factors in volunteers' experience". These categories were further divided into three domains: "the individual", "the work", and "the context", with each domain containing its own protective and risk factors. This suggested framework reflects the idea that individuals who volunteer during a war are affected by both their interactions with the community they serve and the leadership's style of handling the crisis. Some of the protective and risk factors identified in this study reflect familiar themes in the larger context of the literature on crisis intervention while others are less developed and require

further study particularly in the specific context of volunteers responding to a crisis situation. This framework should prove useful for testing individual hypotheses in future studies, for designing quantitative studies to help determine the importance of the different factors and how they interact, and for designing and implementing protective measures that can assist volunteers and contribute to a positive outcome for their experience, and for those they serve.

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## CHAPTER I

### INTRODUCTION

#### **Purpose of Study**

This exploratory study examined the experience of Israeli civilians who were enrolled as volunteers in various roles of aiding fellow citizens under ongoing missile attacks during the second Lebanon war in July-August of 2006. While there is extensive literature on volunteering (e.g. Musick & Wilson, 2008; Omoto & Snyder, 2002), not much is known about volunteers who respond to the specific situation of an ongoing community-crisis. Further, research related to crisis intervention tends to focus on first responders (e.g. Fullerton, Ursano, & Wang, 2004; North et al., 2002), often neglecting other groups of responders who take part in the efforts towards restoring and maintaining community's resilience. Grounded theory (Glaser & Strauss, 1967) was chosen as a basis for this study of volunteers' experiences because it is "a method for discovering theories, concepts, hypotheses, and propositions directly from data, rather than from a priori assumptions, other research, or existing theoretical frameworks." (Taylor & Bogdan, 1998, p. 137). This approach was deemed most suitable to this type of study, in which data emerged directly from a real-life situation minimally addressed in the current literature. The goal of this study was to explore volunteers' first-hand experiences through in-depth individual interviews in order to 1) contribute to the existing literature on volunteers responding to a community-based crisis 2) provide volunteer-based agencies and policy makers with narratives to promote a better understanding of the overall experience of these volunteers

and 3) highlight important issues related to volunteers' well-being to mental-health providers working with this population.

## **Background**

### **The Second Lebanon War.**

The 2006 War, known in Israel as the Second Lebanon War, was a military armed conflict between Hezbollah paramilitary forces and the Israeli Defense Force (IDF). It took place in Lebanon and the north of Israel. The war lasted a total of 34 days, ending with a cease-fire which went into effect in August 14, 2006 (Winograd Commission Report, 2007). According to the Israel Ministry of Foreign Affairs' website, during the war 43 Israeli civilians and 117 IDF soldiers were killed, and thousands were injured with various degrees of severity. Further, during the days of fighting:

3,970 rockets landed on Israel, 901 of them in urban areas... 4,262 civilians were treated in hospitals for injuries. Of these, 33 were seriously wounded, 68 moderately and 1,388 lightly. Another 2,773 were treated for shock and anxiety... 6,000 homes were hit, 300,000 residents displaced and more than a million were forced to live in shelters. Almost a third of Israel's population - over two million people - were directly exposed to the missile threat.

(Israel Ministry of Foreign Affairs, 2009)

### **The effects of the war on daily life in Israel.**

The Northern region of Israel contains a number of cities such as Haifa, Safed, Tiberius, and Nazareth, as well as smaller towns and villages occupied by both Jewish and Arab civilians who affiliate themselves with Jewish, Muslim, Christian, Druze, and other religion groups. During the days of the war missiles launched from Lebanon fell in

most northern areas on a daily basis. Particularly suffering were those areas closer to the Lebanese border, where the attacks were significantly higher in frequency. Typically, when missiles were launched and detected by the IDF radar, a siren would then sound and civilians were instructed to seek immediate shelter. Civilians remained in bomb shelters for varying periods of time ranging from moments to hours and in some cases even days, depending on the intensity of the attacks. This, of course, resulted in major disruption to daily life in the entire region (Gidron, Peleg, Jaffe, & Shenhar, 2010): the war erupted in July, when most children were on their summer vacation from school. Many civilians ceased to go to work and stayed at home with their children. Food supply, public transportation, and similar services were interrupted. Nevertheless, the Israeli government at the time, for various reasons, although it announced a “special state” in the northern region - has never declared a “state of emergency” and wartime administrative and legal powers were not utilized (Winograd Commission Report, 2007). The military leadership failed to realize that it faced a war, causing delays in mobilization of reserve forces. There was no formal decision to order evacuation of civilians living under the attacks (Winograd Commission Report, 2007). As a result, many civilians decided, on their own, to temporarily leave and relocate to hotels or private homes in other regions of Israel who spontaneously offered them accommodation, yet many others, particularly those who were less resourceful, remained in the attacked areas (Gidron et al., 2010).

## **Researcher's Experience**

This study was inspired by my very own experience during the war. I am an Israeli female enrolled in a doctoral clinical psychology program in the United States. On July 12, 2006, when the conflict emerged, I was in the United States. Within a few days it became clear that this conflict was escalating into a war. I was watching CNN, distressed by the scenes of missiles falling and civilians getting killed and injured. The attacks expanded to the city of Haifa, my hometown, where my sister and her family still reside. Having former training and experience in crisis intervention work, I felt that there was much that I could probably do to assist civilians in Israel. A few days later I was on my way to Israel, not quite sure what to expect. I arrived in Israel on the sixth day of the war and headed to Haifa. I arrived there in the early evening hours. On those first days of the war, Haifa seemed like a city of ghosts; there was nobody in the streets, public transportation was barely running, and most stores and restaurants were closed. The next morning, determined to make myself useful by becoming a volunteer, I began to make some phone calls. I tried my luck with a few organizations such as the Psychological Services Helpline and the Office of Social Services in Haifa. They all took my name and number and said they would contact me if they needed help. 'Eran' – the national crisis helpline was among the organizations I called. Eran has a number of branches in different cities in Israel, including Haifa. As a former long-term volunteer in this organization in another city, I thought I would be able to join the local volunteers in their work. To my disappointment, I was told that the City Hall took over the public shelter from which Eran had been operating. As a result, volunteers were left out of work.

Within a few days, a couple of organizations that I had previously contacted called me back, referring me to civilians who needed help, and I finally became engaged in the work. Soon enough I became overwhelmed by the workload. In addition, there were some logistic difficulties in my ability to attend to some tasks. For example, some of the work required driving and I did not have a car, and public transportation was not running regularly. Also, some tasks required at least two people to do the work efficiently. According to the media there were many other volunteers in the city, but I had no contact with them. It was then when I had the idea of contacting other volunteers and creating an 'arsenal' of volunteers who would collaborate and cover as much work as possible. The volunteers of 'Eran' in Haifa seemed like an ideal choice for this purpose since they were already listed under a known organization and therefore could be easily recruited, they were forced out of their regular volunteer work, and they were likely to be motivated to get involved in some other type of volunteering.

I suggested this idea to the leaders of Eran. They were supportive and connected me with a local volunteer who responded to my idea with enthusiasm and recruited other volunteers. Within a few days we had a group of seven volunteers. The list continued to grow as these volunteers brought in their friends and relatives who were seeking for a way "to do something". As the number increased, my listings became more efficient. I created a database of volunteers according to their age, profession, special skills, availability, preferred volunteering activities, and means of transportation. The volunteers were referred to an administrative coordinator at the Municipal Volunteer Department to register and receive volunteer insurance coverage.

I informed some agencies about our group, among them the office of Social Services and the Psychological Services of the city of Haifa, and 'Amchah' – an agency that provides counseling for holocaust survivors and their families. These agencies (who had their own arsenal of volunteers but were happy to receive additional help) provided me with names of civilians in need for help. Based on the information received from them, I matched volunteers and "clients" based on personal characteristics, needs, availability, and type of volunteers' work preference. For example, volunteers were matched to clients of the same age or gender; those who had experience working with children were assigned to bomb shelters occupied by many families, etc. I personally worked with civilians requiring more clinical experience and knowledge (i.e. when there was a need to assess for further psychological intervention). Two examples that come to mind are a woman with a history of mental illnesses who threatened to commit suicide if not evacuated to a hotel, or a woman who was shaken after witnessing a missile falling nearby. I referred volunteers to work with other civilians, mostly with those who needed emotional support or help with different challenges (e.g. individuals who were distressed and needed company, single parents who needed help with their children, elderly or handicapped people whose caregivers left and were immobile).

Most of our work was done in clients' homes or in bomb shelters in Haifa and other towns throughout the Northern region of Israel. I functioned as a moderator between volunteers and the referring agencies: the volunteers reported to me, and I touched base with the referring agencies and consulted with them when issues emerged. I arranged to be supervised by phone by a clinical psychologist residing in Central Israel who helped me with my cases as well as with managing and supporting the volunteers on

their work. I was also in touch with a psychologist from 'Natal' – Israel's Trauma Center for Victims of Terror and War, Mainly to maintain my own well-being and prevent myself from experiencing fatigue and burnout.

Overall, our small group has managed to respond to a fair amount of requests, by far more than we would have done had we worked alone. More so, the agencies that we worked with helped us connect with other volunteers and our collaboration with them enabled us to significantly expand our work. For example, I teamed up with a couple of volunteers who were on their way to work with children in bomb shelters in Kiriath-Shemonah – a northern town on the Israeli-Lebanese border that was heavily hit by missiles and its residents were forced to stay in bomb shelters for many days. Once we got there, we touched base with the local psychological services who referred us to shelters. While those volunteers worked with the children in the shelters, I was talking to the parents who were in much need for an empathetic listener. This type of collaboration occurred on several other occasions.

We were, of course, a few of many other volunteers who were working in Haifa and the region during the war. The Volunteer Department in Haifa Municipality, perhaps the largest agency dealing with volunteers in the northern region, had approximately 3000 volunteers registered with them according to their subsequent publications (Kaduri, 2006). From my own perspective, the experience of being a volunteer myself, while managing a small group of other volunteers, provided me with a unique opportunity to closely examine the experiences and the challenges of volunteers responding to an ongoing community crisis. This work, while fulfilling in many respects, also led to various dilemmas derived from the absence of formal guidelines addressing some



situations that emerged. For example, were we, as volunteers, putting ourselves in too much danger in some situations? What kind of training and supervision do volunteers need, and by whom? Who is to determine which volunteers are qualified and suitable to perform certain tasks, and who should monitor their work? What kind of interaction should be encouraged between volunteers and civilians, and what boundaries should be kept? What expectations do agencies and clients have from volunteers? How are issues of fatigue and burnout among volunteers being dealt with? What support system is available to volunteers with regards to their own distress?

These questions, and many others, stemmed from our experiences. Shortly after the war ended, I attended a couple of different meetings arranged for mental health workers who were involved in crisis intervention work during the war. We exchanged stories about our own experiences and shared our dilemmas. Many participants expressed concerns similar to those of mine and my peers. The adrenaline rush that we experienced during the war was slowly fading away, making room for a more comprehensive view of what just happened. We transformed from being mainly engaged in immediate problem-solving behavior into becoming more attuned to reflecting on, and thinking critically about our work. In this context, I have come to realize that a systematic data collection of volunteers' experiences will be valuable in order to promote a better understanding of the special challenges that volunteers face during wartime.

This conclusion was at the core of my motivation to conduct this study. Several days after the war ended, I arranged a meeting for our core group of Eran volunteers<sup>1</sup> (see footnote on next page). The purpose of the meeting was to reflect on our work during the war and provide a closure. At that meeting, I shared my thoughts about designing a future

study to learn more about the experiences of volunteers during the war, and the volunteers responded with enthusiasm and support. During the meeting they talked about their experiences and shared their insights. I also met with each volunteer individually during the following days to learn more about their experiences. I documented the information gathered during the group and the individual meetings in order to report back to the organizations that used our services and referred civilians in need to us during the war. These notes, as well as my own experience as a volunteer, served me later as the grounds for designing the questionnaire which was eventually used for this study. I left Israel and returned to the United States several weeks after the war ended, and came back to conduct the study two years later.

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<sup>1</sup>There was much debate on my part whether or not to invite *all* the volunteers who worked with us to this meeting, as I initially intended, or volunteers affiliated with Eran only. Although I thought everyone should be invited, there was an issue of breaking confidentiality – Eran volunteers are required to remain anonymous, and inviting outside volunteers would have revealed their affiliation with Eran. After consulting with the leaders of Eran on this issue we decided to constrict the meeting to Eran volunteers.

## CHAPTER II

### LITERATURE REVIEW

#### Introduction

The purpose of this chapter is to provide an overview of the current and relevant literature on volunteers responding to community-based crisis situations. It contains three sections: the first section reviews some of the key issues related to *Volunteering*: definition, motivations, and benefits of volunteering. The second section describes the literature on *Crisis, Crisis-intervention and Communities* – the history of crisis intervention, and how disasters affect communities from a mental health point of view. The last section focuses on what is known about *Responders to Crises and Disasters*.

#### Volunteering

##### Definition.

Although used on a day-to-day basis, the term “volunteer” requires clarification for the purpose of this dissertation. While volunteering may be simply defined as unpaid work, such definition is too broad and often misleading as it includes ambiguous situations; for example, do unpaid internships or mandatory unpaid work provided by students to fulfill school requirements qualify as volunteering? Does working in exchange for another form of benefit other than monetary count as volunteering? And, professionals providing services for reduced fees, - are they considered volunteers?

Attempts to answer these questions resulted in a number of definitions to volunteerism over the years. For example, Gidron (1983) believed that volunteers should not receive monetary compensation. Similarly, Omoto and Snyder (2010) defined volunteerism as any form of social action, in which “individuals willingly give time and effort for the good or welfare of others without expectations of compensation or reward” regardless of it being done spontaneously, like helping a neighbor, or formally, through an agency or an organization. Others called for more flexibility on the issue of compensation: D. Smith (1982) suggested that people who choose to become engaged in poorly-paid jobs over highly-paid careers with the intention to serve the disadvantaged should be considered at least “quasi-volunteers”. This is in contrary to “pure volunteers” who do not receive any payment for their work. A volunteer, according to Smith, is:

an individual engaging in behavior that is not bio-socially determined (e.g., eating, sleeping), nor economically necessitated (e.g., paid work, housework, home repair), nor sociopolitically compelled (e.g., paying one’s taxes, clothing oneself before appearing in public), but rather that is essentially (primarily) motivated by the expectation of psychic benefits of some kind as a result of activities that have a market value greater than any remuneration received for such activities. (p. 25)

Wilson (2000) defined volunteering more broadly, as “any activity in which time is given freely to benefit another person, group, or organization” (p. 215). According to Wilson, volunteers can benefit from their work, including receiving material rewards. Wilson posited that the underlining intention and motivation are not crucial for defining volunteering, as it can be “simply defined as an activity that produces goods and services at below market rate” (p. 216). The emphasis is on being *proactive*, namely, volunteering involves a commitment of time and effort rather than a spontaneous reaction to an immediate situation such as assisting an assault victim on the street.

Finally, the United Nations (1999) introduced a comprehensive definition for volunteering, addressing the above controversies while acknowledging the ambiguity and vagueness that some situations may carry:

There are three key defining characteristics of volunteering. First the activity should not be undertaken primarily for financial reward, although the reimbursement of expenses and some token payment may be allowed. Second, the activity should be undertaken voluntarily, according to an individual's own free-will, although there are grey areas here too, such as school community service schemes which encourage, and sometimes require, students to get involved in voluntary work and Food for Work programmes [*sic*], where there is an explicit exchange between community involvement and food assistance. Third, the activity should be of benefit to someone other than the volunteer, or to society at large, although it is recognized that volunteering brings significant benefit to the volunteer as well.

Within this broad conceptual framework it is possible to identify at least four different types of volunteer activity: mutual aid or self-help; philanthropy or service to others; participation or civic engagement; and advocacy or campaigning. Each of these types occurs in all parts of the world. However, the form each type takes and the balance or mix between different types differs markedly from country to country. Factors influencing the nature of volunteering include the economic, social and political make up of the country and its stage of development. (p. 4)

### **Motivations.**

What motivates people to volunteer? One known psychological approach to understanding volunteer motivations is based on functional theory of psychology, whose elements were formalized in the middle of the last century (Katz, 1960; Smith, M. B., Bruner, & White, 1956) and which attempts to explain the motivational functions that underlie and generate beliefs and actions. This approach has become central in understanding and explaining motivations for volunteering (Clary et al., 1998). According to functionalists, people's attitudes and actions serve important psychological functions for them. Similar attitudes and behaviors can serve different functions for different people, and observing a behavior does not indicate what need it is intended to

meet. Further, the same act can serve more than one motivation for the same individual. Based on the functional approach, six reasons are recognized and widely believed to be related to the act of volunteering. In a review of the existing literature, Musick and Wilson (2008) described these reasons:

1. *Values*: volunteering offers people the opportunity to express values that are important to them. Altruistic and humanitarian concerns appear to be most frequently associated with volunteering.
2. *Enhancement*: volunteering provides opportunities for new learning experiences and exercising knowledge, skills, and abilities that might otherwise go unpracticed. This includes learning new skills, achieving a better understanding about a personal situation (e.g. a person diagnosed with cancer helping other cancer patients in order to learn more about his/her disease), or experiencing excitement and thrill (e.g. participating in rescue or firefighting efforts).
3. *Social*: volunteering provides a chance to meet new people, form, and strengthen friendships. It also fulfills the desire to meet others who share similar values and ideas.
4. *Career*: volunteering has career-related benefits, namely, it provides volunteers with an opportunity to learn new work-related skills and acquire professional experience that helps them to progress in their current career or explore a new career. Many volunteer to increase their chances to get into a prestigious college or university.

5. *Protective*: volunteering can protect the ego from negative features of the self or to avoid inner conflict; for instance – people volunteer to reduce guilt feelings about being luckier than others, or to avoid feelings of isolation, uselessness, or hopelessness.
6. *Understanding*: in contrast of eliminating negative feelings about the self, people may also volunteer in order to achieve self-growth and to improve their sense of self-worth such as a way of maintaining their mental health and increasing their self-esteem and self-confidence.

### **Benefits of volunteering.**

The literature on volunteering is concerned not only with people's motivation to volunteer, but also with the outcomes of volunteering and the causes for volunteers to maintain their work (Sherr, 2008). It is assumed that volunteers must benefit from their work in some way, or they would be inclined to leave. This is, indeed, a concern of volunteer-based agencies who want to avoid frequent turnover of manpower (Sherr, 2008). Daily (1986) listed job satisfaction as the strongest predictor for volunteers' commitment to their organization. Gidron (1983) found that in order to be satisfied with their work, volunteers need, above all, to do work that they consider interesting and challenging, allows them to express their skills and talents, provides a sense of independency and responsibility, is convenient in terms of location and hours, does not carry stressors such as ambiguity about role, that can yield achievements. The importance of matching the type of work to the specific characteristics of the individual performing was also emphasized by Oman and Thoresen (2000) who noted that gains are optimal

when volunteering is complemented by activities that match personal goals for meeting important life tasks, for example - assigning tasks that encourage independence to adolescents, or engaging older people in activities that allow them to share their life experience and gained wisdom.

In a more recent summary of the existing literature, Sherr (2008) reviewed five factors that are believed to play an important role in maintaining volunteers' work (1) Good communication: informal recognition and feedback (2) Convenient and interesting work assignments (3) Sense of efficacy- visualize and feel that one's work is effecting change (4) Quality of support - two types: training support (providing training to volunteers), and emotional support (e.g. openness to volunteers' ideas, collaboration with paid staff) and (5) Sense of group integration (enhancing a sense of belonging through mutual leisure activities such as holiday parties with paid staff and other volunteers).

Finally, having a sense of community is found to be an important predictor of engaging in volunteer work according to Omoto and Snyder (2010) who argued that "community concern, community connections, and psychological sense of community are clearly, consistently, and powerfully related to the many and varied ways that individuals involve and invest themselves in society and work for common good" (p. 242). A sense of community and social responsibility are not only motivations for volunteering, but also carry significant gains as the volunteer is also a potential receiver of services. The authors posited that "a psychological sense of community should also increase an individual's confidence that support is available to those with problems and that he or she is surrounded by a community of caring and compassionate others. This knowledge should empower individuals and make it easier for them to seek out assistance



when they need it, including being receptive to the services offered by volunteers and community based organizations, and ultimately to derive greater benefit from working with volunteers and volunteer organizations” (p. 229).

### **Crisis, Crisis-intervention, and the Community**

Volunteers do not operate in a vacuum. Volunteers, volunteer efforts, and volunteer organizations are embedded in a community context (Omoto & Snyder, 2002, 2010). Hence, it is important to examine relevant literature on crisis theory and intervention and on the impact of disasters on the community.

#### **The history of crisis theory and intervention.**

Crises and disasters have been present since the history of mankind, but it was not until the 1940's when literature on crisis and crisis-intervention began to emerge. The first appearance is often attributed to Erich Lindemann (1944), who, in collaboration with his colleagues from Massachusetts General Hospital studied the reactions of survivors of the Boston Coconut Grove Nightclub fire in 1942, an event that took a toll of 493 lives. Later, Lindemann collaborated with Gerald Caplan, and they both proceeded to establish a community-based mental health program known as the Wellesley Project, where they studied peoples' reactions to traumatic events and their bereavement process. Their work emphasized the importance of allowing 'grief-work' to occur in order to prevent the development of further psychopathology. Their experience was later used, among other things, to assist returning World War II soldiers suffering from traumatic reactions to the war. Over the next decades, Caplan continued this work and further developed the

concept of crisis and crisis theory. He defined a state of crisis as occurring when one faces an obstacle to important personal goals in which he/she is temporarily unable to resolve simply by using previously acquired problem-solving methods. This causes disruption in homeostasis and a need to restore equilibrium (Caplan, 1961). Several other definitions to crisis and crisis intervention were suggested over the following years (e.g. Golan, 1978) but Caplan's ideas and concepts remained at the heart of most writings in this field (Wiger & Harowski, 2003). Roberts (2000) later summarized what is considered to be a general consensus among mental health clinicians of the main characteristics of a person experiencing crisis. Such a person would be typically:

- (1) Perceiving a precipitating event as being meaningful and threatening; (2) Appearing unable to modify or lessen the impact of stressful events with traditional coping methods; (3) Experiencing increased fear, tension, and/or confusion; (4) Exhibiting a high level of subjective discomfort; (5) Proceeding rapidly into an active state of crisis-a state of disequilibrium. (p. 9)

The field of crisis intervention continued to develop and expand in the 1960's with the establishment of the suicide prevention movement and the community mental health centers (CMHC). In 1963, under the Community Mental Health Centers Act of that year, these centers were now required to provide 24-hour crisis intervention and emergency services to those in need in order to receive federal funding (Roberts, 2000). The need to meet community demands significantly increased the use of nonprofessional and paraprofessional workers, along with professional mental health providers. In a book on psychiatric prevention, Caplan (1964) called for the use of community resources and incorporation of community practitioners such as clergy, nurses, and teachers in crisis work. This trend of engaging paraprofessionals in crisis work somewhat decreased in the late 70's and early 80's with the flourish of long-term psychotherapy treatments available to the public which became popular and were carried by certified counselors and

therapists who received many years of training. A substantial shift back occurred in the mid 80's when the financial burden on insurance companies (who had previously covered these treatments) provided an incentive to create the managed care model which took over the medical and mental health field. During this period, healthcare maintenance organizations (HMO's) and other insurance carriers demanded short-term therapy models of treatment, which typically consisted of 5-10 sessions and were often facilitated by personnel requiring less training and expertise. These treatments in some ways resemble crisis intervention models because of their short-term nature. These treatments were widely adopted in counseling centers, community mental health centers and non-profit organizations, and are still the main form of treatment in most institutes (Kanel, 2003).

An important contribution to the field of community-based crisis prevention and intervention also came in the mid 60's with the rising of Community Psychology (CP) as a discipline. CP is concerned with ecological issues beyond the individual level. Along with Caplan's ideas and tenets, CP has moved itself from the medical model of clinical psychology which views crisis and crisis intervention in terms of illness, treatment, and recovery, and instead offered a model of prevention, community involvement, and community strengthening as the solution towards healing. CP has introduced the concepts of empowerment, social support, social justice, citizen participation, collaboration, and cycling of resources as principals and strategies geared towards building community and individual resilience (Rappaport & Seidman, 2000). CP views the individual in the context of the community and emphasizes the importance of involvement in community-based organizations that allow the individual to have an input through decision making and problem solving as ways to empowerment (Zimmerman, 2000). These concepts are

of particular importance when reviewing the literature on disasters affecting communities.

### **Community-based crises and disasters.**

Disasters result from various forces over which a community or system has minimum or no control. They could be natural or manmade, volitional or accidental. Disasters have typically a sudden onset, overwhelming severity, leading to mass destruction and loss of resources (Norris, Friedman, Watson, Byrne, Diaz, & Kaniasty, 2002). Due to their frequent occurrence, the body of knowledge on different types of disasters and their impact on individuals and communities is continuously growing (Gard & Ruzek, 2006).

One of the major challenges often mentioned in the literature on disasters stems in making generalizations and drawing conclusions based on comparison of studies which tend to be esoteric and anecdotal in nature. In the light of this, perhaps the most comprehensive review in this field up-to-date was conducted by Norris et al. (2002), and Norris, Friedman, and Watson (2002) who analyzed findings from 250 studies and articles concerning the effects of natural and manmade disasters on mental health. Specifically, these authors described and analyzed the outcome of 102 different types of community-based disastrous events around the world occurring in 29 different countries between 1981 and 2001. This seminal review encompasses most of the literature on communities' mental health in the wake of disasters and it is worth elaborating its main findings and conclusions:

First, the impact of disasters on individuals and communities' mental health stems from cumulative effects of feelings of helplessness, arousal, difficulties in comprehending and making sense of the world, and losses of perceived safety and social support. This is particularly true for manmade disasters when compared with natural disasters, as these elements, specifically those of making sense of the world and loss of perceived safety - are severely compromised. Therefore, victims of manmade disasters such as terror activities are overall more prone to suffer from psychological consequences. Regarding location, countries out of the United States show more risk for developing psychological distress, with the highest risks found among developing countries.

Second, most of the current focus of many studies is on Acute Stress Disorder (ASD) and Post Traumatic Stress Disorder (PTSD), however, there are other needs which are unattended to or receive less attention in studies and should be addressed: depression, physiological health problems, interpersonal problems, and deteriorating social resources require attention as well. On the practical side – from an intervention perspective - a more comprehensive system is needed to address not only psychiatric problems but also individual, family, and community needs.

Third – concerning individual risk factors for adverse outcomes: various factors were identified as influencing the development and severity of psychological problems following disasters, among them are age, gender, socioeconomic class, severity of exposure, personal history, prior exposure to traumatic events - all these play a role in determining the outcome. However, it is hard to determine which factors present more

risk as they often interact together. It makes more sense to think of them in terms of vulnerability or protective factors that increase or decrease the risk when accumulated.

Finally, in regard to prevention, the authors recommended early intervention addressed to the community at large following disasters (an example of a widely used early intervention, Psychological First Aid, will be described later in this chapter). Clinical intervention and treatment should be provided only to those most in need. The important message to convey to the community is that experiencing some distress and discomfort are normal reactions to an abnormal situation.

In order to maintain and restore resilience, the goal of intervention is to replace lost psychological resources. This involves reassuring survivors that they have what it takes to overcome the events. The emphasis should be put on empowerment; that is, building strengths, capabilities, and self-sufficiency. It is important to keep people in their natural groups if they must be relocated. Also important is restoring a sense of continuity by returning to normal activities as soon as possible. Additionally, professionals and outsiders need to respect and be careful not to undermine natural helping networks. Providing these networks with the help they need to assist their own community should be the primary goal of mental health policy.

### **Responders to Crises and Disasters**

Volunteers who respond to crises and disasters potentially come from any of the following groups of responders: (1) *first responders*, i.e. fire fighters, law enforcement officers, emergency medical providers, and rescue personnel (e.g. North et al., 2002) (2)

*mental health providers* i.e. psychiatrists, psychologists, social workers, and counselors (e.g. Seely, 2008) (3) *organized, agency-based volunteers*, e.g. American Red Cross volunteers (e.g. Long, Meyer, & Jacobs, 2007) and (4) *unaffiliated volunteers*, also referred to as “spontaneous” or “walk-in” volunteers (e.g. Lowe, & Fothergill, 2003).

While first responders receive the majority of attention in the literature, in recent years there is also a growing body of research related to other responders as it becomes clear that many of them are also exposed to risks and stressors and may share similar issues with these former groups (Perrin et al., 2007; Thormar et al., 2010). From a mental health perspective, the main issues addressed in the literature regarding responders to crises and disasters are typically related to psychological risks involved in the work (e.g. Fullerton, Ursano, & Wang, 2004; LaFauci Schutt & Marotta, 2011) and ways to prevent them (e.g. Everly, Flannery, & Mitchell, J. T., 2000; Mitchell, J. T., 1983). The following sections review the current literature on these issues:

### **Psychological risks.**

There are two kinds of potential risks in crisis situations: physical and psychological (Norris, Friedman, & Watson 2002; Perrin et al., 2007; Thormar et al., 2010). Responders are exposed, in various degrees, to at least one of them (e.g. Long et al., 2007; Perrin et al., 2007). This may result in acute (Weiss, Marmar, Metzler, & Ronfeldt, 1995), as well as long-term effects on mental health (Marmar et al., 1999). Among the most prevalent psychological risks to responders are the development of stress related disorders such as Acute Stress Disorder (ASD) and Post Traumatic Stress Disorder (PTSD) (Fullerton et al., 2004). Additionally, responders may suffer from other, post-disaster disorders such as depression, anxiety disorders, drug and alcohol use and

abuse, somatic complaints, and interpersonal and adjustment issues (e.g. Fullerton et al., 2004; Thormar et al., 2010). Evidence for the prevalence of these disorders among responders has emerged from substantive studies across occupations, geographic locations, and types of crisis (e.g. on a plane crash: Mitchell, T. L., Walters, & Stewart, 2006; on a terror attack: Long et al., 2007; North et al., 2002; on a natural disaster: Benedek, Fullerton, & Ursano, 2007).

Another set of psychological risks to responders originates from the field of mental health providers working with trauma victims (Figley, 1995). Four concepts are widely used to describe the PTSD-like symptoms and other distressing reactions prevalent among trauma therapists, but can also be more generally applied to any responders working in crisis situations: compassion fatigue (CF), vicarious trauma (VT), secondary traumatic stress (STS), and burnout. Compassion fatigue (Figley, 1995) results from the strain that comes from empathizing with people who are experiencing pain and suffering. Vicarious trauma (McCann & Pearlman, 1990; Pearlman & Saakvitne, 1995) is a term used to describe the shift of the traumatic stress and the distortions that occur in the caregiver's perceptual and cognitive systems through observing and/or hearing survivors' stories of traumatic events. Secondary traumatic stress (Figley & Kleber, 1995) refers to the exposure to extreme events experienced by another and becoming overwhelmed by this secondary exposure to trauma. Finally, burnout is a term normally used to describe one's work environment, referring to symptoms of emotional exhaustion, disconnection, and lack of a sense of accomplishment (Maslach, 1982). In relation to therapy, emotional exhaustion represents depletion of emotional resources in



the therapist, resulting in reduced ability to care for the patient or become engaged with him or her (Larsen & Stamm, 2008).

Among the psychological risks to responders, PTSD is perhaps the most severe outcome, and it has received much attention in the literature. Several studies address predictors of PTSD and other disorders in first responders and helping professions (e.g. LaFauci Schutt & Marotta, 2011; Perrin et al., 2007); some variables, such as greater exposure frequency (Eriksson, Vande Kemp, Gorsuch, Hoke, & Foy, 2001) previous exposure to trauma or disasters (e.g. Fullerton et al., 2004) and greater degree of exposure to a critical incident (i.e. type of incident and nature of work involved) (e.g. Perrin et al., 2007) are often associated with increased symptoms or risk for PTSD. However, generally speaking, the findings from studies are mixed, with many factors such as occupation, level of training, personal characteristics, coping skills, and available support system - all interacting to determine the presence and extent of PTSD and other symptoms of distress.

For example, Fullerton et al., (2004) found that disaster workers who responded to a plane crash showed significantly higher rates of depression, acute stress disorder, and PTSD compared to their peers who were not exposed to this high-impact incident. Mitchell, T. L., et al. (2006) interviewed rescue volunteers who responded to the Swiss Air flight 111 crash, in which there were no survivors. These volunteers reported severe distress and PTSD symptoms after being exposed to human remains for an extended period of time, leading to a variety of behavioral, cognitive, emotional, and physiological impacts on them (e.g. sleep problems, relational and vocational issues, fear, and physical and emotional exhaustion). The authors concluded that such an intense exposure is likely

to cause high levels of post-disaster distress that needs to be acknowledged and addressed by policy makers. On the other hand, North et al. (2002) found relatively low rates of PTSD in firefighters who served in rescue and recovery roles and were similarly exposed to human remains during the Oklahoma City Bombings in 1995. It was suggested that, along with a sense of competence in their ability to do the work, firefighters tend to project “macho” images of themselves and to minimize or deny their problems. For instance, when these firefighters were asked about coping with upset feelings, drinking alcohol was found to be the second most frequent response. Reviewing these studies suggests that first responders are indeed vulnerable to developing psychological problems, yet different factors determine the outcomes and how they are manifested.

Other studies also examined the psychological effects of responding to crisis. For example, Bills et al. (2007) reviewed the literature on the mental health of workers and volunteers who responded to the 9/11 events. Findings were varied across studies, with the majority of studies noting significant rates of PTSD and Major Depressive Disorder in workers. Exposure to the events at the World Trade Center was associated with higher rates of psychological problems in most studies. However, it was noted that different diagnostic and screening tools were used for measuring similar symptoms, making it difficult to compare between studies. The authors spoke to the need of more qualitative studies describing psychopathology among disaster workers to deepen the understanding of psychological reactions to disasters. Long et al. (2007) surveyed Red Cross workers (paid and unpaid) responding to the September 11 attacks and compared the distress in providers of direct service who had exposure to disaster stimuli (e.g. ongoing contact with survivors) vs. providers of indirect services (e.g. management roles). The results

indicated that there was no significant difference in distress level between the two groups. It was suggested that the overall amount of perceived danger and uncertainty in the days following the attacks affected both groups equally regardless of function.

In another study, Perrin et al. (2007) interviewed nearly 29,000 individuals who, following the 9/11 attacks, participated in rescue and recovery work at the World Trade Center (WTC) site. These workers varied in their previous training and experience and included firefighters, police officers, emergency medical workers, engineering and construction workers, sanitation workers, and organized and unaffiliated volunteers. Findings showed an overall prevalence of current probable PTSD symptoms of 12.4% in these workers. Among the different occupations PTSD rates were highest in unaffiliated volunteers (21.3%) and lowest in police officers (6.2%). Working at the WTC during the first day, working long shifts, being injured, or having no prior disaster training, all these increased the risk for PTSD symptoms 2 to 3 years later. Overall, at greatest risk of PTSD were those volunteers and workers in occupations least likely to have obtained previous disaster experience or training and who became involved in firefighting or rescue efforts. The researchers concluded that shorter shifts to limit duration of service at the site and proper training in disaster preparedness may reduce risk of PTSD among disaster volunteers and workers.

Finally, Thormar et al. (2010) reviewed the literature on psychological problems among disaster volunteers. Overall, findings indicated that volunteers express “considerable to high levels of mental health complaints, in particular PTSD” (p. 534). Volunteers tend to have higher complaint levels than professional workers, and generally their patterns resemble those of survivors. This makes sense given that volunteers are

often disaster victims themselves. The authors also reviewed the risk factors that were associated with mental health issues: identification with victims (particularly with friends), length and severity of exposure to gruesome events while on duty, and insufficient post disaster social support. Other factors such as personality type, anxiety sensitivity (particularly fear of losing control), various (maladaptive) coping styles, lack of experience with crisis work, and confusion or ambiguity about their role and what was expected of them were also associated with mental health complaints.

### **Prevention.**

Two key issues related to prevention of mental health problems in responders are psychological intervention and training. Among the most commonly used intervention models with first responders and mental-health workers are the Critical Incident Stress Debriefing (CISD) and the Critical incident stress management (CISM) models. The CISD was introduced by J. T. Mitchell in 1983 as a mandatory group intervention intended for first responders, aiming at helping them to overcome the acute distress symptoms that often follow exposure to a traumatic incident (Roberts, 2000). CISD is typically administered in a three to five hour timeframe within the first few days after the incident, and is applied in seven phases: an introduction led by skilled facilitator, describing the facts of the incident, sharing thoughts about the incident, describing emotional reactions, describing symptoms felt and normalizing the experience, teaching and engaging in problem-solving, and re-entry (i.e. allowing for questions) and closure (Mitchell, J. T., 1983). Around a decade later, the CISM, which is a more comprehensive model containing a number of post-incident interventions, was introduced and utilized in different settings, with CISD being one of its subcomponents (Everly et al., 2000). The

CISM also contains seven elements, which include pre-crisis preparedness training, large-group crisis interventions (e.g., demobilizations), defusing, CISD, individual crisis intervention and counseling, family crisis intervention and follow-up, and further referral for formal assessment if necessary (Roberts, 2000). Over the years, these interventions were at the center of much debate and their effectiveness was reevaluated (e.g. Bisson & Deahl, 1994; Deahl, 2000). In recent years, a consensus emerged counter-indicating single psychological debriefing (e.g. Litz, Gray, Bryant, & Adler, 2002). Nonetheless, it continues to be widely used as a form of intervention with first responders (Everly, Boyle, & Lating, 1999). The use of these interventions with volunteers, particularly those who are unaffiliated with a particular organization may be, however, limited, as CISD is intended to be utilized with homogeneous groups that have been exposed to the same critical incident (Mitchell, J. T., 1983).

An early intervention which is widely accepted and used in many settings in recent years is Psychological First Aid (PFA). This manualized, evidence-informed treatment is considered to be a gold standard and is designed to provide primary service to meet practical needs of survivors during the first hours and days after a disaster (Gard & Ruzek, 2006). PFA is an umbrella term that contains eight “core actions” which can be used with flexibility according to the needs of the person in situation. The core actions are Contact and Engagement, Safety and Comfort, Stabilization, Information Gathering, Practical Assistance, Connection with Social Supports, Information on Coping Support, and Linkage with Collaborative Services (Gard & Ruzek, 2006).

Training is another key issue in prevention; a number of authors emphasized training and preparing responders to perform their work as an important aspect of

prevention of PTSD and other mental health disorders (e.g. Gard & Ruzek, 2006; Norris, Watson, Hamblen, & Pfefferbaum, 2005; Perrin et al., 2007). For example, Gelkopf, Ryan, Cotton, and Berger (2008) found that volunteers who participated in a training course preparing them to train teachers to administer a school-based intervention following the tsunami in Sri-Lanka in 2004 improved their perception of self-efficacy and sense of mastery as helpers, and they became more optimistic in regard to their own future. Gard and Ruzek (2006) recommended that volunteers become affiliated with an agency that trains and prepares for disaster response, and become familiar with this type of work and its challenges and intervention techniques. Pardess (2004) described guidelines for training crisis volunteers based on long-term gained experience with training Israeli volunteers who work in the Israel Crisis Management Center ('Selah'). The volunteers are first being screened through a group process that involves discussion about motivation and expectations, simulations of emergency situations, and sharing of feelings and experiences. The purpose of training is, according to Pardess, "to empower volunteers to respond in a sensitive and responsible way by activating their natural listening skills, common sense, life experience, and inner strengths" (p. 614). Training should prepare volunteers ahead of time to respond to crisis and be provided as long as the volunteering act takes place. The training should focus on developing good interpersonal skills, helping victims who are dealing with issues of grief and trauma, and being sensitive to cultural differences. Finally, the author posited that providing volunteers with a sense of belonging, and making the work both meaningful and purposeful are essential in reducing the risks of secondary trauma and burnout among volunteers.

### **Positive aspects of crisis work.**

In the past decade, with the growing movement of Positive Psychology (Seligman & Csikszentmihalyi, 2000) there has been an increased call to examine not only the negative effects, but also the positive effects related to experiencing first-hand and secondary trauma. In this context, a number of concepts were developed; *compassion satisfaction* is a term used to describe a sense of fulfillment or pleasure that therapists derive from doing their work well (Stamm, 2002). This does not imply that negative symptoms are not experienced at the same time; Larsen and Stamm (2008) reported an earlier work in which they surveyed rural mental health workers. They found that 48% of them reported high burnout scores, yet 75% of this same group also reported exceptionally strong compassion satisfaction. They concluded that “the ability to simultaneously embrace the benefits of the work while experiencing the negative costs serves as a buffer or protective force for trauma workers” (p. 283). Tedeschi and Calhoun (1995) introduced the term *posttraumatic growth* (PTG), claiming that growth can be achieved when one struggles to resolve difficult psychological outcomes of a traumatic event. Growth arises not from the actual traumatic event but from the struggle to find meaning in it (Joseph, 2009). Tedeschi and Calhoun proposed, among other ways of transforming trauma to growth, that “finding that one can use the traumatic event and/or the recovery from it to help others is also a powerful route to managing it and finding a meaning in it” (p. 84).

The value of volunteering in coping with traumatic events is also described and illustrated in the following studies; Lowe and Fothergill (2003) interviewed “spontaneous”, unaffiliated volunteers who responded to the September 11 attacks in

various roles. They found that most of them had both self-oriented and other-oriented motives, that is, they were deeply shaken by the events and described their motivation to volunteer as “a need to do something”. They aimed to help others, but, driven by “heightened feelings of victimization”, they were motivated to ease their own pain and distress. In that way, volunteering became a form of therapy, as one volunteer stated: “It’s not that glamorous or glorious or anything but it’s healthy, it’s very healthy” (p. 305). Volunteering proved to be an effective strategy towards individual recovery, and volunteers reported “emotional impact of healing and empowerment” (p. 308). In another study, Roger and Soyka (2004), two professional counselors who came to New York to assist responders and survivors following the September 11 attacks, also spoke to the personal gains of volunteering in a time of stress, emphasizing the element of mutual support:

While we clearly expected to have and communicate our compassion to the rescue workers in New York City, what was unexpected was the mutuality of compassion that we witnessed and experienced. In many ways we became part of a brotherhood of compassion that emerged within the security perimeter of the World Trade Center site, a brotherhood that allowed all of us to continue functioning at what seemed to be the physical border between absolute evil and absolute good. Thus, we experienced the evil of what appeared to be merciless destruction and the good as the best of human nature – dedication, commitment, courage, honor, compassion, faith, and love. To be permitted to experience this brotherhood was truly a gift of grace and one that we will carry with us always.

(p. 28)

In conclusion, the experiences of volunteers responding to crisis appear to be complex, often with both negative and positive aspects involved. While quantitative surveys and empirical studies provide valuable data, they, alone, do not fully capture the complexity of these experiences. Narratives and first-hand accounts are integral to understanding how individuals differ in their subjective response to working with trauma.



Qualitative accounts of these experiences open a window to the “what”, “how”, and “why” of responding to crisis, in addition to guiding future research, both qualitative and quantitative. The purpose of this study was to further elucidate the appropriate direction of future research in this area by gathering more detailed information on the phenomenological experiences of individuals responding to crises based on in-depth interviews with volunteers. While there are commonalities across various crises and disasters, they also differ in many respects, with each crisis situation offering its own unique challenges. This study explored the experiences of volunteers responding to a specific type of crisis, i.e. war. By focusing on a specific type of crisis from the volunteers’ perspective, this study aimed to increase understanding of the unique experiences of volunteers’ during a war, and to further understanding of the commonalities and differences of volunteering in a wide variety of crisis response situations.

## CHAPTER III

### MATERIALS AND METHODS

#### Introduction

This chapter begins with a preface which describes the part that the group of Eran volunteers took in this study and it is followed by the methods and materials used in this study.

#### Preface

##### **The core group of Eran volunteers.**

As mentioned in Chapter I, I conducted a debriefing meeting with the core group of Eran volunteers and also met with them individually shortly after the war to summarize their experiences (i.e. give and receive feedback, address pending issues with clients, and provide closure). The data from these meetings were documented by me and reported back to the organizations that we had worked with during the war. The meeting was attended by one male and five females (including me) with ages ranging from mid 20's to mid 70's. During the debriefing meeting I raised my idea about conducting a future study on volunteers' experiences during the war, and asked for the volunteers' permission to contact them again in the future for possible participation in it.

Two years later, I contacted these volunteers again and invited them to take part in the study as a "comparison group" to the participants of the study. All five volunteers

agreed to participate and signed a consent form. They were then interviewed about their experiences, using the same questionnaire that was used for the study participants, which will be described later in this chapter. The interviews with the Eran volunteers were recorded, transcribed, and carefully reviewed to identify central themes. The data from these narratives were used to enhance validity of the study by comparing the data from this group with the data received from the participants in the study. This method is known as “triangulation” – a method used in qualitative research to enhance validity and enrich understanding of a topic through comparing data collected from different groups of people, or by gathering data from the same group of people at different times in a longitudinal study (Yardley, 2008).

## **Participants**

Participants consisted of Israeli men and women who volunteered during the Second Lebanon War and who met the following criteria: (a) age between 18 and 75 (b) Hebrew or English speakers (c) served in any type of volunteer role (e.g. psychological first aid, food distribution, driving, entertainment, etc.) and/or (d) were engaged in any level of involvement (including making an unsuccessful attempt to volunteer, one time contact, occasional volunteering, daily activity, etc.). People younger than 18 were excluded because this would have meant that they were less than 16 during the war and therefore not allowed to officially register as volunteers according to municipal and federal laws; people older than 75 were excluded to eliminate confounds created by possible difficulties related to recalling information that may be present with an older age

group. Non-Hebrew or English speakers were excluded to eliminate confounds created by possible communication difficulties with the interviewer. This was crucial since the chosen method for this study consisted of an in-depth interview that required sufficient conversational skills (Additional information presented on participants in Chapter IV, p. 47).

### **Recruitment.**

Participants for the study were recruited in the following ways: first, an advertisement was posted in various online forums. The advertisement (see appendix A) posted a request for people who volunteered during the Second Lebanon War and who met certain criteria (as described above) to participate in a study. The particular websites were chosen because of the high probability of being viewed by potential participants (e.g. forums of volunteers, forums of Israeli cities and towns in the northern region of Israel, forums for educators and mental-health professionals, etc.). Further, some of these forums were chosen with the purpose of reaching out to diverse populations in order to attract a wide range of volunteers in terms of personal characteristics (e.g. forum for Israeli-Arabs, forum of orthodox Jews). The advertisement process was continued until sample saturation was met. Second, “Snowball” sampling was used to recruit additional participants; this is a technique for finding research subjects used in sociological studies in which one subject suggests the name of another subject, who in turn suggests the name of a third subject, and so on (Vogt, 1999). This sampling procedure was originally designed to recruit “hidden population” such as drug addicts, that otherwise would be difficult to find.

## **Materials and Methods**

### **Grounded theory approach.**

Materials and methods used in this study were utilized according to principles of Grounded theory as set forth by Glaser and Strauss in 1967. The methods used in GT are tailored for discovering ideas that emerge directly from immersion in and interplay with data, rather than from a priori assumptions and preconceived theories (Glaser & Strauss, 1967; Strauss & Corbin, 1998; Taylor & Bogdan, 1998). I chose to use GT because it was deemed most suitable to this type of study which aimed to explore a real-life situation that has been minimally addressed in the current literature.

Historically, GT was first created and introduced by Glaser and Strauss in 1967, however, over the years, they grew apart in their interpretation and implementation of the specific methods used, with their disagreement mainly revolving around their different perspectives on the procedures involved in the analysis of the data (Walker & Myrick, 2006). In 1990, Strauss and Corbin joined together and published an article describing the principles of GT research, which included a detailed procedure for analysis (referred in GT as “coding”). In some ways, it seems that “they have made the entire data analysis process more obvious but markedly more complex in terms of actual procedures” (Walker & Myrick, 2006, p. 554). Glaser (1992) claimed in response that Strauss and Corbin have created a completely different method which has little in common with the original GT. Glaser believed that by complicating the procedures, the analyst may impose his/her ideas on the data rather than “let the data speak” and allow themes to naturally emerge. In this study, I chose to adhere to Glaser’s approach, which seemed more

suitable to the analysis of the material and will be further described in this chapter.

Specifically, I had access to rich data that came from various resources, and my concern was to avoid missing the “big picture” perspective by what I felt would be over-analyzing the material. Glaser’s approach of keeping things simple proved to be useful and beneficial in analyzing and presenting the data in a clear, transparent way.

## **Materials**

### **Semi-structured interview guide.**

For the purpose of this study, I developed a questionnaire (see Appendix D) and used it as a semi-structured interview guide (see procedure section for more information on applying this method). The questions were formulated based on my personal experience as a volunteer during the war, as well as on themes that emerged during individual conversations and a debriefing group for volunteers both facilitated by me immediately after the war (see preface in this chapter). Content validity was assessed by two licensed professionals, a clinical psychologist and a social worker, both with expertise in the field of crisis intervention.

The questionnaire was divided into three sections: the first section was designed to gather rich descriptions of participants’ experiences. The second section was aimed to ask participants to reflect back on these experiences and evaluate them. It also explored their attitudes and beliefs regarding issues relevant to their volunteer work. The last

section was aimed to provide feedback about the interview. The three sections are described below:

The first section consists of four parts, with each part focused on a different aspect of volunteering: (1) *Personal experience during the war*: contains two open-ended questions about participants' overall difficulties and coping with the challenges of the war, not specifically related to their volunteer work. These questions were aimed to gather information about the difficulties participants were facing and determine if they spontaneously mention volunteering as a coping strategy to deal with distress (2) *Pre war*: contains a question about volunteer work involvement prior to the war and a question about the difference between previous experience and volunteering during the war. These questions were aimed to clarify whether participants were already involved with an organization as volunteers and determine how this affected their experience, and to learn more about their motivations to volunteer and whether they were different from previous motivations that had led them to volunteer in the past (3) *Volunteering during the war*: contains ten questions about different aspects of the work including motivation for volunteering, attempts to contact settings, roles and activities, training and supervision, difficulties and coping strategies, desired help, support, and most touching experience. These questions were aimed to receive broad, detailed information about the volunteering experience – what led to it, how difficult it was to find a venue for volunteering, and the logistics involved. This part was the “meat” of the interview (4) *Post war*: contains two questions about receiving acknowledgement and maintaining connections after the war. These questions were aimed to determine whether the volunteers were acknowledged for their work and how was the closure process obtained.

The second section, *Reflecting back*, contains five questions: one question inquires about lessons learned and was aimed to look back at the experience and provide useful feedback. Another question was aimed to summarize the experience by stating whether it was overall good or bad, and rating different aspects on a scale of one to ten. Specifically, participants were asked to rate their satisfaction with the overall experience, the organization of which they worked for, and their own performance. They were also asked to explain in a few words why they chose these ratings for each item. The purpose of these questions was to focus the conversation triggered by the questions asked in the first section, and have participants provide a “bottom line”. A second purpose was to use an objective measure (ratings) which could be used to examine overall tendencies such as to what extent did dissatisfaction from the organization the participant was affiliated with affect his/her overall satisfaction. The ratings were meant to be used as a helpful aide to hone the verbal responses; they could not be used as a quantitative measure per se as they were not previously validated. A third question was designed to determine whether volunteering affected participants’ self esteem and overall coping with the war. The questions were phrased in a way that did not assume direction (i.e. “did it affect your ability to cope in any way” rather than “did it help you to cope”) in order to allow any experience, positive or negative, to be expressed. The fourth question inquires about participants’ thoughts on having a network of volunteers – whether they find it helpful and how it can be done effectively given the obstacles that a crisis situation brings (i.e. the risks of meeting out of the house). Again, the purpose is to assess the need for support and to provide policy makers with useful feedback and ideas based on participants’ first-hand experience. The last question inquires about participants’ thoughts and attitudes on



the authorities relying on volunteers during mass crisis times. This question was aimed to detect any issues of anger and resentment that may have significantly impacted participants but were overlooked during the interview.

The third and last section, *Closure and feedback*, contains two questions about any additional information that was not addressed in the interview and suggestions for further questions to be added. Overall, participants gave positive feedback on the interview, stating that it was thorough and comprehensive. No further questions were added to the questionnaire.

## **Procedure**

### **Scheduling the interview.**

All responders to the advertisement were contacted by me via email. Those who met criteria for the study were contacted to schedule an appointment for an interview (see below for more details). Others were thanked for their response and willingness to participate and were asked if they may be contacted in the future if more participants were required. Those who replied positively were added to a list of potential participants for future reference.

Responders who met criteria were contacted by me either by phone or email according to their stated preference to schedule an interview session. The goals of the study and its procedures were reviewed with them. If they chose to participate, arrangements were made for scheduling an interview lasting from 45 minutes to an hour-and-a-half. Participants were given the option to be interviewed in one or two sessions,

according to their time limit. The second (optional) session was to be conducted within no more than two weeks after the first session. All participants chose to be interviewed in one session. I conducted the interviews at the participant's home or in a quiet, private location mutually agreed upon. The interviews were all conducted by me to reduce interviewer bias attributable to interviewer variability.

### **The interview.**

The interviews were conducted in either Hebrew or English according to participants' preference. Prior to the first interview, participants were given a "letter of Introduction" (see appendix B) describing the study and stating participants' right to confidentiality, anonymity, and withdrawal from the study at any time. After given an opportunity to ask questions, written informed consent (see appendix C) which included permission for audiotaping was presented, discussed, and obtained.

The interviews followed the semi-structured interview guide, also referred to as the interview schedule (Smith & Osborn, 2008). The semi-structured interview guide includes a list of predetermined questions that are used by the interviewer as a guide rather than as a fixed protocol. In keeping with the tenets of grounded theory methodology, the interviewer is encouraged to utilize probes and follow up questions in order to enhance the data collected. This method was designed to trigger a conversation between the interviewer and the participant. In this format, the interviewer asks questions in a systematic fashion but is allowed, and expected to digress and probe far beyond the responses to the prepared questionnaire (Berg, 1998). Questions may be added or deleted in the process. Through interactive probes, follow-up questions, and attention to

important markers, the researcher is able to monitor the information that the respondent is providing, while facilitating the understanding of relevant material being disclosed. The predetermined questions used for this interview are described in appendix D.

Each interview was audiotaped, using a digital MP3 recorder. At the end of the interview, participants were given the opportunity to express additional feelings and thoughts that were not addressed in the questionnaire. I conducted all of the interviews, thereby ensuring complete confidentiality. I assigned immediately codes when labeling the audio recordings so in the unlikely event that someone might gain access to the recordings, the participants' individual data would be protected. I also kept the codes I generated in a location separate from the actual recordings. Participants were instructed not to use first and last names, or mention address or phone numbers during the recorded interview. All potential identifying information (e.g. family members' names, street names, etc.) were omitted from the final, written material; the interviews do not have any identifying information on them, except for the code. The digital MP3 recorder was kept in my locked home office in my place of residence for the duration of the research. Upon my returning to the United States, I personally brought the MP3 recorder back with me in my carry-on luggage. Ultimately, the recordings will be deleted within three years following the end of the study.

### **Data Collection and Analysis**

In order to describe how the data were analyzed, principles and strategies of GT are reviewed and explained in the following. First, GT entails a dynamic, ongoing

process in which data collection and analysis are conducted simultaneously with investigator's on the spot analysis of the data, interpretation, and decision how it would contribute to the emerging theory (Bowers, 1990; Charmaz, 2000; Glaser, 1992; Glaser & Strauss, 1967). Two important concepts related to this process are *constant comparison* and *theoretical sampling* (Glaser & Strauss, 1967); constant comparison refers to the process of comparing data to data, case to case, and incident to incident. Statements are compared within the same interview and in different interviews (Charmaz, 2008). This is done continuously and on various levels of abstraction to form through coding, - categories, concepts, and hypotheses that are eventually integrated into a theory. Theoretical sampling is the search for new data in order to reach a deeper understanding of the already analyzed material.

The process of data collection and analysis continues until the categories are saturated or well developed. *Saturation* is "a point in which the researcher cannot discover new dimensions in the data being collected" (Bowers, 1990, p. 48). At that point, analysis of new data is not producing new insights. However, theoretical saturation is never an absolute, but always a matter of degree (Strauss & Corbin, 1998).

The *Coding process* is the analysis of the data and the core process in classic grounded theory methodology. Glaser (1978) defined two types of coding: *substantive coding*, and *theoretical coding*. Substantive coding is divided into two procedures, *open coding* and *selective coding*, in which the researcher first runs the data open, fracturing and analyzing it, until a *core category* and related categories emerge. Then, through selective coding, the core and related categories are delimited and strengthened until saturation is reached (Holton, 2010). Theoretical coding aims to "conceptualize how the

substantive codes may relate to each other as hypotheses to be integrated into a theory” based on “cues in the data” (Glaser, 1978, p. 72). This process involves weaving the data around a central theme, hypothesis, or story to generate a theory (Glaser, 1978, 1992; Walker & Myrick, 2006).

The coding process also involves the use of *memos*. Memos are handwritten notes that track the researcher’s ideas and prompt him/her to “elaborate processes, assumptions, and actions covered by codes and categories” (Charmaz, 2008, p. 101). Glaser (1998) defined memos as “the theorizing write-up of ideas about substantive codes and their theoretically coded relationships as they emerge during coding, collecting and analyzing data, and during memoing” (p.177). Similarly, Taylor and Bogdan (1998) recommended using *journal writing* to record ideas, thoughts, and conversations with informants outside the interview situation and for listing the topics that emerge during the interview. These tools then undergo *sorting*, which is the process of sorting out and integrating the content of notes, thoughts and ideas into a cohesive theory.

In this study, data collection and analysis were conducted intermittently. I analyzed the data from interviews according to the coding process described above, and continued to conduct new interviews, constantly comparing the new data to the data already obtained. Coding involved breaking the data into possible themes, topics, and categories; comparing these to other data and searching for similar themes, and merging or creating new categories. This continued until data were saturated and well-defined within a theme or a category. For example, the theme of “motivations for volunteering” was created after identifying participants’ reasons to volunteer. Through constant comparison, additional motivations were identified; some motivations were not initially

as obvious as others and required second and third coding as well as additional comparative data from other interviews.

Memo writing was used to examine connections between themes and categories and speculate about ideas. Below is an example of a memo (pseudonyms were created and used for all participants):

Her motivations may appear “healthy” (expression of values) but not only, if you dig a bit under the surface (rescue fantasy); when this motivation draws her to risky situations, (as described in the theme of “special challenges” under “safety issues”) it can bring strong emotions (as illustrated in “emotional and mental states”); she reports having intense fear and guilt when she realizes that she could have died. She also has conflicting motivations – being out there and pleasing her boss vs. being at home with her young children. Volunteering then becomes a negative experience; her rescue fantasy and conflicted feelings about volunteering are risk factors to her well-being. She concludes that she could have volunteered in moderation without risking herself. This concept of “overdoing” is also expressed by Shuli who’s motivation was action seeking. She worked day and night, driven by her need for action but also by outside demands, and she ended up with severe fatigue. On the other hand, another participant, Sara, reported working very long hours but she said this helped her to cope better. So overdoing can be a protective or a risk factor, - depending on the motivation behind it, on outside pressure to do more, and on conflicted feelings. On the opposite side – some participants complained about “underdoing” and wished they could have done more; Henia felt rejected because they didn’t take her to volunteer. This concept of “how much to do” seems like an important one in a crisis situation...

I also used theoretical sampling to recruit for additional subjects. The following example illustrates how this was implemented in the study: during the process of data collection and analysis I arranged to meet with Ms. Alu-chamrah, a social worker who carries a senior position in the municipal Social Services Office in the city of Haifa. I originally met her during the war when she was actively involved with provision of social services to the community. Two years later, she was assigned to lead a project aimed to prepare community workers and volunteers for future community-based crises and disasters. I asked Ms. Alu-chamrah for feedback and further suggestions to the

questionnaire which I have created and used for the interviews. She gave me positive feedback and also raised the issue of the tensions among ethnic subgroups during the war which she became aware of and felt was needed to be addressed. Based on her feedback, I recruited participants who were from a diverse background and were engaged in working with diverse groups during the war, and I geared the interview questions towards acquiring and deepening my understanding of this issue and its relation to the experiences of volunteers.

I continued to collect data until saturation was reached. That is, I discontinued the interviewing process when I realized, through coding, that new interviews repeated the same content and did not reveal new information or add new categories.

## CHAPTER IV

### RESULTS

#### Introduction

The goal of this chapter is to present in a systematic way the data that emerged from the narratives of volunteers who were interviewed for this study. The chapter is divided into two parts: In part I, the narratives were reorganized, after data analysis, into ten main themes. Part II contains summative self-assessments of satisfaction with volunteering. Below, a brief description of the participants' background is presented, followed by Parts I and II.

#### Participants' Background

Information about the participants is also presented in Chapter III, p. 35. Interviews were conducted with 15 participants who defined themselves as volunteers during the war. Interviews took place two years after the war ended. At that time, participants' age ranged from 20 to 75. There were nine women and six men. Five participants are orthodox Jews, nine are secular, and one participant is an Israeli-Arab and is Muslim. Twelve participants are married and have children. One participant is engaged to be married. Two participants are single. Three participants are members of the same family (husband, wife and daughter).



Most participants live in northern Israel in areas that were under attack during the war: four live in a major northern city, five in small towns, three in a Kibbutz, and one in a suburban neighborhood. Two other participants live in central and southern Israel, one in a major city, and the other in a settlement.

Professionally, participants included a social worker, artist, musician, small business owner, community worker, yoga teacher, massage therapist, Hi-tech engineer, math teacher, police officer, college student, two home makers, and two psychologists.

Participants also varied in their roles as volunteers: four participants were involved in work related to mental health. Three participants distributed food and essentials to people in bomb shelters. Two participants provided yoga sessions and massage therapy to essential workers on duty and hospital personnel. One participant assisted with administrative work at the mayor's office. One participant helped in police work. One participant answered calls on a crisis helpline. One participant helped putting out fires caused by missiles. One participant hosted people who fled or were evacuated from the areas under attack. One participant entertained children in bomb shelters. Some of these participants focused their volunteer work in one primary area of activity but were also engaged in other activities. Pseudonyms were created for all participants in the study.

## Content Analysis

### **Part I: main themes.**

#### *Introduction.*

Part I contains ten themes illustrated by citations and examples from the narratives. In order to give the reader contexts for the themes some examples are depicted in more length than others. Themes are constituted through the coding process as explained in Chapter III, pp. 42-46. The themes reflect prevalence of participants' replies, as well as the importance of the material as determined by the researcher (i.e. material may be, on some occasions, included in a theme even if less prevalent, when it is perceived by the researcher as making an important contribution to the understanding of a theme). In describing the themes, prevalence is reported according to the following: "most participants" means eight participants and up; "several participants" means between 4-7 participants. Three participants or less are reported by exact number and usually do not constitute a theme. The ten themes are: (1) Identifying as Volunteers (2) 'Doing' as a Form of Coping (3) Motivations for Volunteering (4) Work-related Challenges (5) Acknowledgement and Appreciation (6) Sense of Accomplishment (7) Authorities' Role (8) Civilians' Reactions (9) Diversity-related Issues, and (10) Solidarity and Collaboration.

#### *(1) Identifying as Volunteers*

This theme focuses on the use of the term "volunteer" when describing participants' activities during the war. As can be seen, in some cases, the use of the term presented a challenge to the definition of volunteering and raised questions about what is

considered volunteer work in this context. Specifically, although all participants identified themselves as volunteers, it becomes evident that while ten of them were indeed volunteers in a traditional sense (i.e. chose to volunteer, did not receive monetary compensation for their work), the status of five others was vague. In these later cases, there appeared to be a lack of clear boundaries between participants' day-to-day job related duties and their voluntary activities. The examples below illustrate the confusion between those roles that was either internal (i.e. in situations where a personal choice was made to expand one's own activities beyond work requirements in order to meet emerging needs), or external (i.e. when there was an expectation by others that participants work despite the risks involved and although it was not mandated) or both (i.e. in situations where it was unclear whether the activities carried by participants were part of their job or considered volunteer work):

“Ali” is an Israeli-Arab residing in a major city in northern Israel. Among other activities, he runs a non-profit organization that develops and promotes education in Arab society. Ali receives a basic salary for this part-time work. During the war, he put in extra hours to the organization. He initiated special activities that were not normally a part of his job requirements such as using his connections to receive donations of supplies of books, games, and toys for children in bomb shelters, distributing them, and organizing out-of-town trips for children and their families. Ali defined himself as a volunteer, however, when asked by the interviewer to describe his volunteer work, he replied:

Ali: I was receiving a salary, I was receiving a salary. I was a CEO of a non-profit organization, earning a salary of 1700 shekels, not much when you are expected to give 20 hours a week, four hours a day, five days per week. But [during the war] I gave eight hours every day, twice as much.

For another participant, “Shuli”, there was external pressure to volunteer. Prior to the war she was working for a non-profit organization that provides food to families in need. She was asked by her boss to stay in town and expand her responsibilities to meet additional needs of the community, although this was not officially a part of her work. For example, she was sent to visit bomb shelters and bring essential items such as diapers and fans. She worked much longer than usual hours, putting herself at risk of missile falls:

Shuli: During the war two thirds of the city fled. I could have gone too but I received instructions from here that there’s nowhere to go, we must be out there, we’re needed here. Whoever stays and is not drafted has to go out there.

The confusion was perhaps greater among social services workers and mental health providers in the public sector because of the nature of their profession. It was unclear whether or not they should come to work due to the risk and uncertainty of the situation until approximately a week or two into the war when many of them, but not all, returned. Even then, some confusion remained in regard to the kind of work now needed to be done. Eva, a social worker and a regional superintendent working for the municipal social services in a major northern city, described the situation, particularly during the first days of the war:

Eva: It was unclear whether we should come to work. They told workers who live far away to avoid coming into the city where the shooting took place, those in the area under fire were initially sort of told not to come to work, later it was unclear. I am local so there shouldn’t be a problem, but it was also unclear whether we should continue our work as usual with places in the region that were not under fire, and on the other hand there was an expectation that we initiate contacts with other social services in the war zone, but again, in what way, who needed to do this, how to channel the efforts so that we don’t all end up doing the same thing, and what kind of help they needed, it took awhile until all of this became clear.

During these first chaotic days, Eva, who prior to the war did volunteer work with a family of Ethiopian newly immigrants, became more intensely involved in helping other

local Ethiopian families who were now staying in bomb shelters. Later, with other volunteers, she also initiated a large number of interventions utilizing her expertise as a social worker. These interventions were carried out either during or after her regular work hours and had at times little or nothing to do with her regular obligations:

Eva: It took some time but I eventually realized that this was volunteering and it was not directly related to my workplace, the office of social services...it was possible to do more; I didn't put all my professional qualifications out there, because emotionally I was torn between my professional role and my voluntary role. I was hardly here and hardly there. I was juggling between the things and my family as well. If you are not completely into the volunteering with all your heart...I did not define myself completely as a volunteer... I don't know why, perhaps I needed the title, to be told that I am a volunteer, the acknowledgement. And I also needed to work. When you volunteer during regular times you then know, you have steady days, you have steady hours and you need to do certain things. And then you can do everything, and you can do them better. Now, in retrospect, I am thinking - how did I miss this, how didn't I think about these things back then.

Another participant, "Suzan" is a psychologist living in a northern town near the Israeli-Lebanese border. This town suffered massive attacks during the war. Even in times of peace, missiles hit there occasionally and the town is familiar with crisis situations, but this time the shooting was significantly more intense, bringing new challenges. When asked if she and her colleagues were obligated to work she said:

Suzan: No. Here's the tricky business. It depends on who you ask. There is no such thing as mandatory during a war. There's supposed to be. Theoretically there is, but since an emergency state was not declared, if an emergency state was to be declared, then it is possible, no, also it's not clear, it is tricky. It is possible to say that all city workers, all municipal workers, all state workers have to work. It is legally a tricky business, but one of the big disasters, one of the biggest mistakes was that an emergency state was not declared.

To clarify, although an emergency state was not declared, a "special state in the home front" was announced, effective July 18, 2006 - a week into the war. The difference between an emergency state and a special state has implications on issues such as labor laws and legal rights for compensation in case of loss of work days. Broadly speaking, a

“special state” implies that only essential workers should come to work while non-essential workers should remain safe and avoid the risk. The Lack of clarity at the time regarding who was considered an essential worker in a crisis situation created confusion and left much room for interpretation and conflicts. Some employers insisted that their workers attend to work nevertheless, as witnessed by “Rita”, an artist who volunteered in the local municipal hall while her husband and adult children left town:

Rita: Initially, most municipal employees did not show up. He [the mayor] was compelled to call them and force them to come in. Then ah, secretaries didn't want to come, those that had small children. Some he coerced and I do not think that this is right to do. I think that those who have small children and don't have an arrangement for them, I don't think that the mother's thoughts will be focused on work, but on her children. I felt an enormous relief that my children were elsewhere, enormous relief. Therefore, I didn't mind working late at night. I think mothers don't need to work in the time of war. I think that if there are men who can replace them then it is preferable. And if there are volunteers that can fill in for them, that's better. But you don't need to coerce the workers. I saw in the newspaper that in the next war all municipal workers will have to work. This is huge mistake. People will flee. They will do everything, they will get a doctor's note, anything to avoid being in the war.

Interviewer: Do you think that volunteers can replace them?

Rita: Absolutely. In the end of the day, at a time of war, what's important is that the infrastructure works properly, that there will be regular water supply, that there will be food, mattresses, that the air conditioner will work, that services in the shelters will prevail, nothing else.

“Eleanor” is a psychologist from a Kibbutz in northern Israel. Shortly after the war began, she left the Kibbutz with her husband and two young children to stay with her in-laws in central Israel. Then her boss requested her help. She began to travel back and forth between northern and central Israel, spending a few days a week in the affected areas up north. She describes the dilemma of being a mother of young children and a psychologist whose services are needed during a crisis, and the consequences of her decision to comply with her boss's request:

Eleanor: The important thing to understand here is that my volunteering was not “pure” because it was derived from feeling heavy pressure to work. It was unclear until the last moment if this is work or volunteering. As far as I am concerned I traveled to Tel Aviv and I was fine with myself being a mother of young children until I received a phone call from my boss saying that she is in trouble and she needs me. This put me in a very difficult situation morally and also because she is my boss. Later, we spoke about this a lot when we did debriefing and gave feedback. In retrospect she is now more aware of these problems. On one hand she understands that I, as a mother, was faced with a dilemma, and came back because of a moral commitment, but inside I accumulated much resentment. On the other hand there was someone else there who was not mentally capable of coping with the demand to come and do the work. This created some splitting in the team. My boss realized that she comes with very high values and that she must respect people’s circumstances. I told her this; I will not come to town in the next war. I have children. I am willing to work from the outside and provide support. She is having a hard time with this but she understands. Also, now I am more confident in standing up for myself and being assertive. If I choose to volunteer, I will do this in my own free will, not because of pressure and guilt feelings...

What I did during the war was to go back and forth. I lived in two separated realities, three days in Tel Aviv, three days in the north. I did this three times, and every time was more difficult for my son. I did this once more towards the end when it was already really dangerous. Initially it was relatively safe and I felt relatively fortified. On the third week or so it became really scary here and my husband asked me not to go anymore...

My son was four years old and he paid a very high price, I understood this only after the war was over. He developed severe post traumatic reactions, severe constipation. It took us time to realize that he has PTSD. This started at the beginning of the war and when it was over this emerged in a very strong form. Separating from me was always very difficult for him, it has an emotional and a personal base, but the war caused this to jump several levels upward, and every time he experienced me going away and he would get from television that there is war and he thought that I had died, this developed into trauma. He began to have constipation and fears and dreams, it was very difficult. We started treatment and only then I realized that the price was too high. I didn't understand this during the time of the war; I was totally in the work. In treatment, my son started to tell us how he saw his grandfather watching the news on TV and he understood that there's a war, he understood that mommy travels to where there's a war, and he became flooded with anxiety. We usually don't separate for more than a day; I am a very “attached” mother. Suddenly, for the first time in his life I travel for three consecutive nights and to this very dangerous place. He begged me not to go; he had dreams of missiles, of lights, as of this date he is unable to hear fireworks. Last independence day when the fireworks started, despite all the preparations we did, he ran away as if he's under attacks. We decided that next time we'll use headsets.

In retrospect, I wouldn't do this again. I am less concerned about myself and the experiences I had, but from a mother's perspective, I was told but I didn't listen, a mother is first of all for her children. You have a role, you are a mother of small children, you will do less work, you will not endanger yourself. If you die, your children, they will pay the price.

## ***(2) 'Doing' as a Form of Coping***

Participants were asked what their main difficulties were during the war (not related to volunteering) and how they managed to cope. Only a few participants reported not experiencing any difficulties at all. Among the rest, complaints were centered on two main issues: safety concerns and feelings of helplessness:

Gary: It was scary to be here. We had the bombing, the noise, the worry about what is going to happen to everybody, so it was a tough time.

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Ali: The main difficulty was the missiles falling. The first one fell in [name of place], caused a big boom, and the last day before the cease fire, I'll never forget that day. There was a bombarding of missiles, I'll never forget it.

Interviewer: Why?

Ali: Because it was very scary. The last day, I was with my organization at the offices, going up and down, down to the bomb shelter and back. It was very scary, and I was alone at the office. And I was concerned, concerned for myself, the office was on the top floor, I wasn't protected and I was afraid I'd get hit directly by a missile.

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Rita: Since I have two boys, the fear was to protect them. One day we sat like this in the evening and saw the missile fall very close and the younger boy was startled. Now he blinks, and I noticed that his blinking increased.

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Moshe: Now the hardest thing was perhaps to be helpless watching two million people fleeing from the north to the south.

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David: My main difficulty was that I wasn't really in the front, I was back in the Kibbutz...and I couldn't really make a difference; this really bothered me. I needed to feel that I could contribute directly and make a difference...the



frustration is about the inability to respond appropriately and see the leaders' mistakes, we don't give them the right response, we react rather than initiate.

When describing how they managed to cope, the verb 'doing' appeared commonly in participants' answers. In most cases, volunteering was the main outlet for 'doing':

Interviewer: What helped you cope?

Rita: The feeling that I can do something, the feeling that I can listen...

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Ali: What helped me deal with my fears was the 'doing', in the organization, in my offices...

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Aaron: I couldn't stop the war or manage it in the way I wanted, and I wasn't drafted either, so feeling that we're doing whatever we can was a given, it was appropriate, and important.

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Sara: you go through your day and you don't care about the bombs and all that, you feel that you have done something.

'Doing' helped participants to cope in two main ways: first, by providing a sense of structure and continuity, allowing participants to dissociate themselves from the situation by being occupied:

Gary: Well, while I was working, I was able to shut most of it out, and by the time I came home I was nice and tired and I could fall asleep.

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Ali: ...the ongoing work, organizing trips for the families, mainly Arab, mainly in the neighborhoods, and the visits inside the shelters to see what's missing. Filling up the time was the answer. It helped me to calm down, to be peaceful, to keep going, and to function as usual. This was very helpful to me. I stayed at home on the weekend occasionally, the offices were close. It was very difficult to spend time in the apartment alone, waiting for the sirens to come. When that happened, I would leave the house and stay under the staircase. I didn't have a MAMAD [fortified room] at home. This is not helpful. I headed over to the staircase and hid

under the stairs until the sirens stopped. But during the week, while I was busy, the time went by more easily.

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Aaron: ...doing what things that I can, both to keep my own life going and also help anybody else, even if it was just emails or phone calls to encourage people, or visits, even if it's going some places to play music... all kinds of things that kept me from feeling helpless.

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Tamara: Volunteering helped me cope better with the war, first because it gives you something to do instead of sinking in boredom and dwelling on how miserable I am, which I didn't really get to feel.

The other way in which 'doing' appeared to be helpful in coping was by providing participants with a sense of mastery over the disturbing situation. This was achieved by reversing roles, and rather than struggling with difficulties, participants overcame them by being able to "fix" them, like Danny, whose role as a volunteer was to disarm the missiles, by adapting the role of the "helper" instead of a "victim" like Henia, or by becoming a role model to others, like Tamara. Evidently, participants were aware of the fact that they were initially helping themselves:

Danny: Had I not been a volunteer, I'm sure I would have gotten scared and fled. Volunteering helped because you know you don't sit at home and fear the falling missiles, but rather, you go and take care of them [disarming the missiles] and then you don't fear as much.

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Henia: I am grateful that I'm not the one who needs help, that I am capable of helping others instead.

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Tamara: You asked what helped me, well, to be back home first of all, but I think that with no doubt, the fact that you sit by the phone and you have to be calm and rational, and you give people a little sense of security, you play a role but somehow it gets into you as well, when you help others you help yourself too because you calm them down and tell them that everything's gonna be all right and yes, it's tough out there, they want to be evacuated and you distract them, organize a day of fun for the children, that's all we could do... when you help, it

gets back to you because you are considered someone who helps others, people look up to you, and then you begin to feel it in yourself as well.

### ***(3) Motivations for Volunteering***

Most participants perceived ‘doing’ as a form of coping with the distress of the war, and volunteering as the main channel for ‘doing’. The preceding theme focused on why and how ‘doing’ was helpful in coping; basically, doing provided structure, continuity, and a sense of mastery. But what motivated participants to take action in the form of volunteering? The current theme further explores why volunteering was chosen for coping, as opposed to any other form of ‘doing’ (e.g. physical exercising).

It should be clarified that the term ‘motivation’ is used here to describe the reason(s) behind participants’ observed action of volunteering. This is the term used in the literature on both crisis intervention and volunteerism. As described in Chapter II, according to functional theory, which is commonly used to explain motivations behind an observed behavior, the act of volunteering can serve different psychological needs for different people or even for the same individual (Musick & Wilson, 2008). This is illustrated in the following example taken from David’s interview:

David: volunteering is an inner feeling of missionary, I was always like this, never sought why, and I’m not seeking now either. It provides a sense of satisfaction. It also measures my abilities, how much I can give. It is also satisfying and also provides me with a sense of being a part of the doing. If, for instance, I volunteer in the police department and manage to prevent a crime, it provides me with a sense of satisfaction.

The aim of this theme is to explore and describe the most dominant (i.e. frequently described) motivations that emerged from participants’ narratives. These were identified as expressions of values, action seeking, and feeling worthy. A sense of belonging was also mentioned by two participants.

### *Expression of values*

Most participants spoke about the values they inherited, emphasizing social responsibility as their main motivation for volunteering:

Danny: In our family, because my grandfather was a Lieutenant Colonel in the navy and the entire family served in the army, they induced this value in us. Before anything else - to give and help, and to become a part of the homeland security forces. I remember my grandfather saying, I want to see all my grandchildren as officers, just like I was...there is something healthier in this, teaching us these values from the time we are very young.

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Ali: in the past, there was a camp of volunteers in one of the Arab cities... They held such a camp once a year. We came, the students, and helped the city. We did paving, cleaned the gardens, cleaned the streets and more, last year for example I was teaching ninth grade here, I divided my students into several groups and they volunteered in four elementary schools throughout the city. Every school took ten students and they helped the students in the classroom. I organized this for two years...this is an inner persuasion that I need to give something to my society. It is not like someone had pushed me, no, it is something that I internalized...perhaps I was raised in this Communistic way of advocating Jewish-Arab partnership, that's how I was brought up.

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Eleanor: As far as I'm concerned, if I won't do this, nobody else would. Everyone would step aside and let fear enter. This is unacceptable according to my values. This is unacceptable for me to go easy on myself. Everyone needs to come forward at a time of crisis. If everyone will say I can't, then the people there will remain unhelpt. In my perception, I am committed to the state of Israel, to the citizens, to the north. I am part of this community...as a child I recall that in times of crisis people stay, they don't run away. This is our home. When growing up, we arranged to stay in the bomb shelters, the community rearranged itself for this occasion and the parents came by and kept us busy. The atmosphere was of heroism, of altruism.

Later in the interview, Eleanor noted that pleasing her boss was another reason for volunteering:

Eleanor: I came to work up north during the war because I wanted to show support to my boss and to the people remaining there. For me, emotionally, not staying with my children up north during the war was very tough. Normally, this

is unacceptable to me; several people in my Kibbutz chose to stay and they managed to arrange their entire community life inside the bomb shelters. I won't say that I was ok with this. There is a conflict.

According to Suzan, a modern orthodox woman, volunteering is highly valued in Judaism. She noted that a significant portion of volunteers who offered help during the war were affiliated with some Jewish religious group (modern orthodox or ultra orthodox). She attempted to explain this phenomenon and the motivation behind it:

Suzan: They were over-represented here as volunteers in an amazing and impressive manner. There was an enormous amount of religious people that flooded in here from everywhere, from the cities and from the west bank and the Golan Heights.

Interviewer: Why do you think there were more from this group?

Suzan: Because the "fight" reflex still exists; because the rest of the country has been conditioned to a "flight" reflex. When there's a crisis, there's "fight or flight" that can be conditioned; the government, the media, and the popular culture, the McDonald culture, the Coca-Cola culture condition to a "flight" response. The religious sub-culture, I think, conditions to a "fight" response in terms of – you have to do something, personal responsibility, responsibility for the community. It is not a Coca-Cola culture. Most of them do not even have a TV.

Interviewer: In what way does the pop culture condition you to a "flight" response?

Suzan: Because it puts personal comfort at top priority. Not personal calling, I should be an artist and that's what I have to do. My soul is in art. Ok, in the end of the day if it's good for you it's good for your environment. I believe that also. I'm not talking about that level. But personal comfort, discomfort is a catastrophe. Discomfort is an evil, you know, the ultimate evil is that it's hot, and I'm not happy.

### *Action seeking*

Volunteering appeared to also fulfill psychological needs other than expressing values. Another motivation expressed by several participants was action seeking:

'Action' had a slightly different meaning for each participant; for some it was related to experiencing thrill:

Moshe: In the end of the day I wasn't so scared, I'm an adventurous person, sometimes also seeking adventures, so I wasn't scared.

Interviewer: what do you mean by seeking adventures?

Moshe: let's put it this way, I'm not afraid of missiles falling.

Interviewer: how come?

Moshe: it's a personality type perhaps, it's even some kind of a game – so where, where?

Rita liked the action derived from being “where it all happened”:

Rita: I went straight to the mayor's office. I knew that's where I wanted to be. I really love being at the center of action, at the very top, the very top... I love being among those who make decisions.

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As the interviews progressed, participants revealed additional information about their personal history and circumstances and the role that these played in their motivation to volunteer. For Shuli, who defined herself as hyperactive, action meant being continuously on the go:

Shuli: I didn't consider leaving town. My husband was scared so he went away to stay with his sister and I would drive there at night because there was a bomb shelter there, I didn't think of fleeing and there was also a demand for organizing things here. Besides, I love action, I am an action person. My job also involves action. I am hyperactive. This runs in our family, ADHD and hyperactivity. Other than the fact that I love to help, I don't know where this is coming from, I don't have the answers. My family didn't raise me like this. Perhaps from another incarnation... With me, volunteering started in childhood. My mother's tongue is German and the first thing I did was to help a German priest with the youth he used to bring over to the country. I was ten years old then. I also helped in babysitting. There was someone in our neighborhood that slipped and we helped him. I was in youth movements and I was a group leader and we went to all kinds of courses. I love people and I want them to smile in the end of the day, this is the motto. I never thought where this came from, I don't care. I love being busy. Even when I wasn't able to walk I was busy. My brothers built a loom over my bed so that I can do handcraft. I must keep myself busy all the time, otherwise I go crazy. I become irritable, not much fun to be with. I get bitter, take pills.

For Danny, action seeking also had an element of risk seeking. This was initially not articulated but became evident through further investigation. Danny, currently a police officer who was a volunteer with the local police at the time of the war, described an event that occurred during the first days of the war and proceeded to talk about a traumatic event from his childhood:

Danny: I remember I was at home sleeping in my room, which is fortified. We knew that the situation was quite shitty outside and within a few hours it was already reaching our town. My brothers came to sleep in my room. My brother, who was nine at the time suddenly woke me - get up, get up, I hear booms. I told him to go back to sleep, this is probably coming from a nearby arms development factory that occasionally runs field experiments. My brother said no, no, the house just trembled! I told him go back to sleep, if something really serious happened I would have received a call on my cell phone, which is connected to the police system. Suddenly the phone rang and then I felt a strong tremor of the house. I tried to open the window but couldn't because of the momentary blast, but after that I managed to open it and saw the pit in the backyard underneath my window... I was home with my three younger brothers. I told them to relax and not worry...they started to surf the internet and my young brother brought the camera and began to take pictures from the window. I already called my buddies from the station and asked them to come over and treat this event, because I didn't know if this is a 'live' missile or a "dead" one, we didn't see it, only the pit it made. You do not see a missile. The missile enters the ground. We learned a bit about this before the war started. So I called the guys and dressed up. In the meantime my parents came back. They were on their way to work but returned home quickly. They packed some things and left around noon. I wasn't there. I already left at that point.

Interviewer: How did they react to what they saw?

Danny: I already prepared them in advance, I told them that as long as nothing serious happened other than minor damages to the house there was nothing to be afraid of. This is nothing to us. We didn't get too excited, we already 'got it' during the Gulf war. Back then we were here at my grandmother's home and a missile fell right here in the backyard. We were barbequing. It was my grandfather's birthday. The sirens started at night if you remember, we were getting up to leave when suddenly a missile fell right next to us. So we weren't, I wasn't scared during the war. This made me feel like I was...

Interviewer: Immuned? What happened when it fell?

Danny: After the missile fell, the security forces arrived. I don't remember much more, my parents took me into my grandmother's room. So I don't remember much... they took all the young children to the rooms. It was only the women and my grandfather. All the men were drafted to the army. My father, my uncle, my other uncle, all of them... I remember only bits and pieces. The barbeque, and that one day I took a toy gun and said I will kill Saddam [Hussein]. All sorts of things like that, and the room we were sitting in with the special gas masks for kids. I was four or five years old then.

Interviewer: Do you think that all this affected you somehow?

Danny: Yes, nothing gets me anxious. Things like this don't scare me.

Interviewer: Aren't you afraid to die?

Danny: No! If is die, I die.

Interviewer: Do you sometimes intentionally look for risky situations?

Danny: Yes, at work. I always search for a place to go where there's action, chaos.

### ***Feeling worthy***

Feeling worthy was another motivation expressed by some participants who described how volunteering provided them with a deep sense of self-worth through feeling that they were essential and of use to others:

Sara: The satisfaction comes from being useful, that was the euphoria. In regular times you don't experience such tremendous "thirstiness" for you.

Eleanor discussed how being essential is like an addiction. She acknowledged the rescue fantasy that motivated her:

Eleanor: I had difficult moments with female colleagues saying to me how can you walk around like this? We tremble with fear, what's wrong with us that we are so afraid to walk around between bomb shelters like you? And I was wondering too, what is wrong with me that I can do this? I reached the conclusion that something is wrong with me, that I am at a high stage of denial because of the need to fulfill a task, a need to be a heroine, to rescue, all sorts of things like that. But there is also something that does not protect, not me, not my children. There is an addiction to the role of a rescuer I believe. I love to do treatment and there is this rescuer fantasy that I try to understand and be in contact with. There is this need, but not to this extent, no.



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Rita: It provided me, particularly that it's a war and I'm in the battle field, me, missiles falling around me, and, it gave me a sense that there's someone to count on. Not like the little girl I was at home. I think my volunteering is my attempt, year after year, that I deserve to live, that I deserve to give and that I am worthy, something I never had at home.

Henia, who regularly volunteers with holocaust survivors, noted how volunteering gives a meaning to her life and helps her cope with her own "survivor's guilt":

Henia: What does volunteering mean to me? Apparently it contributes to my ego... perhaps it justifies my existence... I don't know if surviving World War II is relevant here, but many children then were separated from their families and were rescued. I was separated from my nuclear family at age five or six. I wandered, we fled from country to country in Europe. Also, the escape under shootings and sirens and alarms, sleeping in the shelters, switching from language to language, from school to school, I don't think I need to elaborate on the outcomes, on how this influences a child at this age. So it was an event that effected me for life, the results are still felt. And that was the war for me. It was the most, the most difficult and the most significant... I don't have formal education, a degree; I know a few languages but none of them thoroughly. It is hard for me to concentrate on something for more than an hour, a book for example. These things are typical to war survivors, and it is possible that because of my history I find it important to justify my existence all together, because why did I stay alive? There is a sense of guilt that comes with it. But these things are well known, I'm not describing anything new here, I don't reinvent the wheel, I'm not the only one. This is very common. I'm not unique.

### *A sense of belonging*

Two participants also noted the significance of feeling connected and being a part of a community. Eleanor talked about her childhood memories in the bomb shelter and how this motivates her now:

Eleanor: I remember the cohesiveness as one of the strongest experiences I have had as a child, being a group in the bomb shelter. There is great beauty in this cohesiveness.

For Aaron, an ‘Oleh chadash’ - a new comer who immigrated to Israel a few years prior to the war, being involved in prosocial activities also provided him with an “entrance ticket” to Israeli society:

Aaron: Then of course there’s the question of you know what in the world can I do to make a difference, if I’m not going to be a soldier and I’m not living up north, you know what options remain for me to be of some use.

#### **(4) Work-related Challenges**

Participants were engaged in different types of work which could be divided into three main categories: *Helping with Basic Needs*, *Organizational Activities*, and *Supportive Services*. Some participants were involved in activities of more than one category. *Helping with Basic Needs* included work addressing security issues, preparation and distribution of food and essential items, and hosting people who fled from the warzone. *Organizational Activities* included performing administrative and organizational work: tasks typically involved answering phone calls from civilians, organizing evacuations and short getaways for civilians, and collecting and distributing donations. *Supportive Services* included providing mental health services, holistic therapies (i.e. yoga, massage therapy) and entertainment in shelters; this was mostly conducted by professional and paraprofessional workers.

Three topics emerged as important aspects of participants’ work across all types of roles: (1) *Insufficient Monitoring, Training, and Supervision*, (2) *Dangerous Conditions*, and (3) *Workload*:

##### ***Insufficient monitoring, training, and supervision***

Several participants reported an overall lack of proper monitoring, supervision, and training. Participants, particularly those who were spontaneous volunteers, were

sometimes engaged in the work with very little to no monitoring of the outcome, opportunities to consult, or basic training. For example, Sara was given referrals of several settings who were interested in holistic treatments. She noted that there was no screening process or required bureaucratic procedure that she had to follow to become a volunteer, and nobody checked on her attendance, progress, or work quality:

Sara: I didn't work with any particular organization. My colleague went to the local Town Hall because she thought we needed to be cleared, to receive an approval, to talk to someone. There was nobody to talk to, they just provided her with addresses for nursing homes, but people had the ability to recreate themselves and it had its advantages and disadvantages: the advantage was when people like us came and had a great thing to offer and could choose where to go and people could simply come to see us, you didn't need a city official to approve it like in the other volunteer activity that I am involved in where there is so much need but the bureaucracy is so complicated...My colleague took the list of nursing homes addresses, no one cared whether we arrived there or not, nobody checked...I was given freedom to do whatever I wanted, they didn't inquire about our training, they fully trusted us. At the hospital people arrived constantly. At the nursing homes most of the workers were busy and we had to adapt our schedules to theirs. The essential difference between the war and regular times is the chaos. You can actually decide where you want to work and what you want to do, there was such need that it didn't matter. I could have gone to the shelters, to the different units of the hospital, workers brought their children, there was an entire department for children where activities were provided to them, it was possible to volunteer there. You had the ability to recreate yourself.

Eva, a social worker for the city, was involved in outreach work with civilians. She also noted that monitoring and guidance were missing:

Eva: There was no guidance, not as a volunteer or an employee. There wasn't any...we helped each other, but we didn't do this beforehand, only on the spot, which was ok but did not allow us to observe and figure out everything right away. In real time, along with the fact that all the helpful resources arrived in an unorganized manner, I think it made things worse...I expected help from the municipal organization that is in charge of guiding volunteers along with the professional workers. There should have been collaboration between the volunteers' department and the communal body who is supposed to prepare the community and the volunteers to situations like those that occurred.

Miriam hosted approximately 100 civilians in her house during the war and organized for accommodations for many others. She was asked by the interviewer about the referral process - whether people were screened and what information, if any, was she given about them prior to their arrival:

Miriam: I got the impression that whatever organization there was, they were so busy, things were just purring on them. I don't know what percent of Israelis live in the northern section, but I doubt it that it was only a few hundreds, I think it was more thousands if not millions of people that had to be removed. It most probably came suddenly on people and I have a feeling that not so many official things were ready.... The only thing I remember that I noticed was that if I got, let's say, a number of a family, they asked me later - did that family come? And I then said either yes or no, if I managed to place them. And then they most probably noticed if either people didn't come or left or whatever because I was calling them again asking for more. But there wasn't an actual, real good working system...

Interviewer: Those who referred them, did they do some kind of screening and taking notes on things like the level of kosher expected?

Miriam: Yes they did. But I think, there was definitely whether they are religious or not. That was the division, but they didn't say which level of kosher.

Interviewer: What other questions were asked?

Miriam: First of all they asked how big is the family, because, in our house, I could take a family of 23. But it's not many houses that can take that. How many people are coming was one very main question. And then if they are religious or not. And that was it. They just needed a place... Of course, also the mental cases need a place, but maybe there should be some kind of screening. I don't know how it could be done if somebody needs a place now, how can you screen them without an official, I don't know. When I called and asked some people can you take people, they said oh, but I want only good people! And I said what does that mean? And she said oh it has to be people that the rabbi of their town says that these are trustworthy people that I can take into my home. I don't agree with that very much, but I don't know what questions can be asked. We are different.

While some were able to work independently or with little monitoring and supervision, this was not always the case. A number of participants mentioned witnessing a mass of volunteers coming from all over the country and from overseas and offering help. Eleanor

described situations in which monitoring and supervising these volunteers became essential:

Eleanor: We saw volunteers who came with all sorts of unconscious motivations, a desire to give, a desire to be something to someone, and they sometimes did, I don't know if damages, but something vague, chaotic, sometimes providing unprofessional and incorrect advice. I remember one psychiatrist who came and started to do all sorts of interventions that can be overwhelming instead of calming. It is scary to receive volunteering psychologists whom you are responsible for and they do stupid things. You get to a shelter, people are sometimes hysteric, people give themselves, and you need to do the right intervention that will calm them down. Sometimes you don't know but you can also do harm. Something like this happened. So there was a debate whether to work in small teams or instead to recruit many psychologists from all over the country, and my boss was concerned that she might lose control, that people would make all sorts of interventions, and there won't be any monitoring.

Tamara, answering phone calls at the situation room, received some supervision and training, but she noted that there were many newcomers who did not receive the same level of training:

Tamara: It was initially a little difficult to always explain what not to say. I remember there was this person who wasn't helpful when he said to someone - yes, I am arranging for your evacuation. It was someone new who just arrived, and there are things you shouldn't say if you cannot truly provide them. Don't give people false hope, it's bad...

Interviewer: In that respect, were you given guidance as to how to talk to people and what to tell them? Were there more situations like this?

Tamara: There were many. Someone would say something like this, then others would jump at him, telling him not to say this... there were also times, ah, I remember I had two teenagers and it wasn't good; I remember my mother telling me don't let them answer the phone, they don't realize what nonsense they are saying. They were from the neighborhood and you are bored to death, you have nothing to do, there's nowhere to go and you are stuck in the shelter so they realized that there were people here so they came for the company. But even them, and also other people who caused some problems, they were somehow redirected - come help us, we need to carry the food.

Insufficient training, particularly among those who were performing work that required certain skills and knowledge often resulted in participants' feelings of self doubt and inadequacy:

Eva: On one hand I truly felt that I was doing something that was apparently essential. On the other hand, in retrospect, I understand that I did not have the adequate skills to do the work in the best possible way. There was much place for improvement.

Interviewer: How?

Eva: Well, had there been a clearer procedure in regard to the work in a public shelter, specifically with the Ethiopians but with other communities as well, had there been work done with a leadership or a group of activists...had there been guidance provided to me as a volunteer on this type of work, yes, on my role as a volunteer in this array.

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Eleanor: I was very concerned and I felt I had nothing to give, and I don't know, I never learned. When I started to work, the first thing I told my former boss was that I haven't received any education in crisis situations; I don't know what to do. She said something wise, she said, first, you are from the region, so you have plenty of experience. Second, a crisis situation is not much different from many other situations in psychology. You don't think you know, but you do, the same principals apply. Then she sat with me and explained things to me in theory, and a few years ago we organized an orientation day – we sat with the community and planned what to do in case of a crisis. I found myself with very little preparation giving an entire lecture about crisis situations, not from hands-on experience but rather from a theory that we created together, and pretty soon I felt that I was becoming connected, but I still didn't feel resourceful, I still had a great deal of anxiety.

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Tamara: I heard other people, how they related to callers. Also, you become better at this within time, sometimes you get annoyed and there is anger, there was much anger here and helplessness that were projected onto you, and who am I after all, I'm not even one of the leaders of the situation room, what am I doing here, I am just this poor high-school junior, and people yell at you and get angry at you.

### *Dangerous conditions*

Several participants worked under dangerous conditions of being exposed to missile hits. Danny described how he and his peers reacted:

Danny: People spoke, they got scared suddenly, when we were outdoors, and suddenly there are sirens, then you see the missiles fly above you. You think - just don't let it hit me. People talked about this.

This also raised concerns for participants' families:

Sara: Some days were more dangerous than others; I remember how in the last day of the war I was at the nursing home for a couple of hours and when I left my daughter called and yelled at me - 53 missiles fell in the area during the last hours, what are you doing there, get out of there! And I told her that I didn't hear anything, I don't know anything. The city was empty. I traveled from the nursing home to the hospital. Everyone there was panicked because tons of missiles were falling and they announced that they are not letting staff out, not even to our shelter where we were providing treatment. I realized that if I don't leave immediately I may be held in. I went to the beach, I was the only one there... this is my beach. I then went home and my daughter kept calling me, all stressed out, and a siren went off on my way home but I saw the police car standing there in the junction, I said whatever happens, happens... and I drove away.

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Eleanor: On the third week or so it became really scary here and my husband asked me not to go anymore...

For Eleanor, it was not only her husband's concern that caused conflicted feelings about her choice to do this type of work. She described how the proximity to danger shook her profoundly:

Eleanor: During the third time I went up north I found myself in the midst of a missile attack. This was one of the most frightening experiences. I wasn't ready for this. We had a bunch of volunteering psychologists with us. We separated into teams. My team was assigned to the northern part of town. I went there with an orthodox woman. We received our assignments, and then a warning alert was given. I received it in a text message as well, ordering us to go to the shelters. I was prepared for that and we went down the stairs at the shopping mall. It was ok. We waited there with a few other people until we were informed that it was all over. There were several hits at the tennis court and then we went out, I don't remember, I had to get back to the situation room. Some people asked for a ride so I and the orthodox woman, we took a few of them with us. I let them out and

suddenly the siren goes off. I am on the town's main road. You think quickly, usually there's a minute or two, I can't stay on the main road. So I turn around and drive to the first house we saw, I stop the car and we both knock on the door, and there's no one home. We pull into a niche, clinging to each other and looking – who's going to be inside and who will stick out, and she got in first and she tells me - no, you go first, you have small children, mine are all grown up. And I don't remember what I tell her, I went in and apologized and she says - no, it's fine. So we stayed there glued to the wall, waiting, and we burst in hysterical laughing about how we stand there, and then we hear an ear blasting whistle, and within a millisecond you recognize from your childhood that this one is going to fall very close, a matter of seconds, count to seven and it's gonna fall.

Those seconds that the heart is pounding and the fear and everything, and then the missile falls not too far from there in the neighborhood and the entire house shakes, and you think – seriously, I am gonna die, not die, is it worth it, what am I doing here, what is this insanity, what am I looking for here, what did I lose here, what happened, who am I rescuing, what good is it gonna do if I die now. Gee, this is dangerous, I must be completely mad. The body is a little shaky, you don't quite digest it, and suddenly the notion hits you – it is possible to die here, it's not, until then I felt relatively safe. I felt that there was a risk but I was relatively fortified. Truly, from that moment on, after experiencing a missile falling so close, I felt that wow, that's it, I went too far. I returned to the situation room and from then on I strictly remained in the shelters, and when the evening came, I ran out of there and never came back.

When the war was over and I did the EMDR and CBT courses I played back this moment. Now it is already processed, but it was a difficult experience. I'm not in that place anymore. When it happened I wanted to get to a shelter as soon as possible, I was shocked. The hysterical laughter is about uncertainty. You stand there between the rags and the wiper that the owners left in this niche. She was a religious woman, orthodox. I didn't exchange too many words with her. We said that it was frightening, something like that, and then we went to bring her husband. We waited for him in the headquarters, doing some work. She told him, but we didn't make a big deal out of it. But it was difficult. I told my boss that it was really scary. It was this close, as they say. She said - yes, I know what you're talking about. The week before she was caught in a missile attack, she found herself laying flat on the floor with missiles flying all over from one of the buildings she went to, and then it registered with her too. She was, she didn't understand why we were scared. I had a bit of a reality testing, I had fears, I was cautious when we had to go out, checking whether there were alerts. If a siren would sound I didn't play games by staying there, I was more aware of my fears, she was completely detached from it. But with respect to the experience, I knew what I was doing there but I said and what if I die, two people less, I could have talked to them on the phone, why must I run between the bomb shelters... The funny thing was that a minute before this happened we entered the shopping mall, I bought cigarettes for one of the families in the shelter that we were about to



visit, and she found, in the midst of the war, a good deal on bed sheets. She found something with a 50% discount to bring to her daughter. So we walk like this with this sheet that was on sale and there is the siren, and she is satisfied and with this sheet we drive around town and we stand there in the niche with this sheet, it is ridiculous what you do in middle of the war, shopping, and she is busy with the sheet that she will bring home. You might die! The laughter was out of fear, bewilderment, feelings of guilt, when I left the car I didn't close the windows and I ran quickly to seek shelter, this embarrassment that I know what to do and I run quickly. We were wearing protective vests, maybe even a helmet, and this also was ridiculous. What are you, a troop? True, there is that heroic feeling that you're helping people, but suddenly you are faced with the feeling that you are going to die, and you think – how stupid, what am I doing here? Enough, I said to myself. You must decide, this is not a game, it's not in my control. Until then I felt that there was some consistency, some control, I would get a notice, but this?

### ***Workload***

The issue of workload (i.e. the amount and intensity of the work) was mentioned by participants in two different contexts; first, when asked about their satisfaction with their own performance as volunteers, several participants expressed some disappointment with their performance, stating that they would have been more satisfied had they volunteered earlier in the process and done more. Second, when describing their work, some other participants commented on having an opposite experience; they worked for long hours that did not leave much room for resting and sleeping properly:

Danny: On the first day a missile fell in our own area, we got a vehicle from the station, with protective equipment; a helmet, a vest, and a mask, in case that, god forbid, a chemical or a biological missile falls, and the equipment was always by us in the vehicle, so we would go and take care of events; when a siren would sound we would listen to the car radio to hear where the fall took place and we would run there in order to arrive as soon as possible, possibly first on the scene, and begin to remove the crowds and to summon the sapper and all the professional teams. And if there are casualties we would start treating them since we were trained to give first aid. And in the remaining hours when there was nothing else to do we would walk around; this was already in the second week of the war, we would go into the bomb shelters where there were young children, we would sit and talk with them, try to understand how they feel, bring them many games that were donated by different organizations; we would distribute them. These all came to us because we didn't want others to be wandering outside; they were not fortified like we were. So we would distribute the games and candy to the children in the shelters because we went there anyway. We also have, here in

town, the office of welfare who received hot meals twice a day, so they would use us to distribute the food to people in need, like elderly people who couldn't take care of themselves.

Interviewer: Sounds like you did a lot. How many hours did you work per day?

Danny: Yes, nonstop. No rest, except when we went home at ten or eleven at night to shower and pack some clothes, we changed our shirts a few times a day because we were sweating underneath the vest.

Tamara noted the burn out that she experienced from doing repetitive work day after day:

Tamara: I was not 100% there. I came quite often, ok, so I answered the phones but I wasn't devoted to it...I could have, when I knew that this was how I was going to spend my time, say something like - I don't feel like it and I often want to go home.

Interviewer: what do you make of it?

Tamara: you can't predict it, it's not like I didn't want to volunteer, I had fun too, but five weeks of this, we were here every day...it becomes too much.

For Shuli, the intensity of the work had even more severe negative outcomes:

Shuli: as for the postwar fatigue, consider the fact that we slept about an hour and a half per night, there were days when I didn't get back to sleep, and missiles fell around us all the time... I didn't have much time to enjoy this fatigue because residents and those in need began to return to town and their electricity and water services were disconnected. I continued to work but my body was exhausted and my soul even more so. I was crying and nervous more than the usual and my body was already not functioning. My teeth fell during the war from fear or nerves, whatever you want to call it; fear of the whole thing. No one promised me that god truly looks out for me, or that my day hasn't come... If I was ought to do something differently, I would have gone out of here for a week or two to a place with no people, lay down on some mountain and give my body a chance to return to itself. I worked from six in the morning to six in the evening the entire month, and my work included not only distributing food, I had to listen to people and find them work to do and deal with whatever happens and get the heat from those whom I did not help because I thought they didn't need it, and by Friday felt how I was having a nervous breakdown.

##### ***(5) Receiving Acknowledgement and Appreciation***

Some participants reported receiving acknowledgement and appreciation for their volunteer work, either during the war or afterwards, but not all did. Some experiences left

participants with hurt feelings. For example, Rita, who worked at the mayor's office, reported negligence in keeping track of volunteers, attending to their needs, and acknowledging their contribution:

Rita: I think they took the volunteers for granted, even forgot them a little. There were groups that for example said we haven't eaten all day. There were groups that had to arrange for their own accommodations, and if it is to eat, I think there should have been occasional checks on them, how they're feeling....after all they ran around shelters and there people took the heat on them as if they were part of it. They came out of good will, sincere and pure in their desire to help. Not for profiting, not to gain anything, and suddenly, how long has it been since the war? Now they are giving diplomas? And suddenly, there were no lists, now go figure who volunteered? I think they should have come from the City Hall and shake their hands, and thank you and way to go and I don't know, have a dinner in the end of the war or something. They just went as they came. I think a good word, that's the best possible thing; no one needs a diploma or a trophy. Just say thanks.

Aaron, a musician living in central Israel, reported on his experience of being asked by the City Hall in his hometown to entertain evacuees who stayed at a local hotel:

Aaron: On one occasion my band was invited, not hired, but volunteered to play in a hotel lobby where there were people who were evacuated from the north. It came through one of my partners in the band, he made the contact. I think it was the city who arranged it. So we played there. That was a different experience because it was not so well organized. We got ourselves together, we came in costumes, we schlepped over the equipment, we got there and nobody knew that we were coming, they didn't know where we were supposed to set up, we didn't know who were the people in the lobby we were supposed to play for, and there we were, and we finally found somebody who seemed to know something about it, but it was all very hesitant and tentative, he didn't know where and what time, and I finally said to the guys here's a place, let's just set up and start playing. We're here, we're not getting paid, let's just make something of it. We never did know which of the people who stopped to listen to us were from the north and which were just staying at the hotel. We don't even know if the intended audience knew about this. Nobody introduced us. They didn't offer us anything to drink. That was typical for volunteer' experiences. We found this that whenever we volunteer we get treated like trash, and where people are paying us we get treated well, and the more they're paying us the better they treat us. I don't know if they think you're suckers to do volunteering, is it somewhere in their psyche, or it just doesn't matter to them because it didn't cost them anything. But somehow it often works that way. And this time it did, it was rather annoying. I think what happened is that the other guys are much younger and less experienced. I always try to get a name of who's in charge. My partner is more casual about these

things. I still blame those that organized it. Bringing a five piece band is not easy. It was in the summer, they didn't even bring us water.

Eva was not fully acknowledged as a volunteer because it was difficult to distinguish between her responsibilities as a social worker and the additional activities she performed. This was despite her giving many hours of her own time to perform tasks that were not part of her job:

Interviewer: As a volunteer, did you receive recognition and appreciation for your work, or was it considered part of your job?

Eva: No, I spoke about it with the head of the volunteer services, and there was an understanding, I don't remember at what stage, that I would not be considered a volunteer, although I am now apparently on the list of the volunteers because I was invited to the ceremony. But we concluded that I am not.

Interviewer: Why?

Eva: I don't remember the circumstances.

Interviewer: Was it because of the insurance coverage?

Eva: Could be.

Interviewer: Beyond the formality, did you receive any words of appreciation?

Eva: No.

A couple of participants felt that they were taken for granted. Rita volunteered at the mayor's office during the war and was later offered a job there:

Rita: I remember sitting in a meeting and the mayor said that he needed to track down all those who volunteered during the war...and I told him I also volunteered, he then looked at me and said good, but now you are a worker. What does it have to do with anything? I was with him for over a month!

Miriam invited evacuees to stay at her house but they decided against it, leaving her and her family with some hurt feelings, not understanding what happened:

Miriam: those people who came from the north, they looked normal. They were smiling and talking but they were ripped apart, and they didn't want to be in the south. They wanted to be in their own home, having their own private lives, and when they had to escape they just looked as if they functioned, but they didn't.

So, there was another family that came... a mother and a father and two children. A bomb has fallen quite close to them, and they just had to go. But when they came to us we showed them around and the kids' eyes were shining when they saw the pool and we had a huge playroom, ahh! Then I noticed that something was wrong. The father was holding his head with his hands, and then they started talking that they may have to go to the Dead Sea. And they started asking if we know nice places in the Dead Sea - oh no, maybe we go to whatever person it was in Jerusalem. They were so confused. They didn't know what they wanted. All they knew is that they didn't want to be with us. They didn't want to escape from there, and in half an hour they were gone. And I remember the kids' faces, they were first shown the pool and the playroom and then they were put in the car and again taken away. And they like swapped places with us by suddenly starting, the wife was in tears, and then she kind of came up saying - oh but you can come and visit us up north, and I will pay for your trip, to my daughter they said - you can come visit our children, you are so welcome, and suddenly they were the ones who were inviting us to their place, and they left. And my daughter looked at me and said - I can't believe this! They come here with all these kids, and she's expecting to have friends and play and go swimming, and they're just going away! What is this? And I must say that I kind of agreed with her. I understood it, but it didn't feel so nice...

Henia wanted to volunteer but was rejected by two agencies:

Henia: I actually wanted to volunteer, and they didn't need me. That's all, I think. Apparently the war went by even without my help. It didn't work out.

Interviewer: And how did you feel?

Henia: I thought that the organization screwed up. See, but they weren't prepared for this.

Interviewer: Did you have a similar experience with this organization before the war?

Henia: There was good communication but they didn't need me in one case, this was a major disappointment. The problem wasn't with the communication, it was ok, but in that case I prepared and wanted to do the work, and I put much thought and planning and good will, and I was already imagining the work but it didn't work out because the person didn't need it, or actually he waived the organization's assistance. There was nobody to blame in that case, but I was disappointed.

Interviewer: When you approached the organization during the war and they said no, did you take it personally?

Henia: No, it didn't even cross my mind. Of course not... I thought there was chaos, that they cannot handle the chaos.

Interviewer: Did you consider volunteering through another organization?

Henia: Yes, but they didn't want me either, they knew I was a volunteer in this other organization, so they didn't want to take me away from their reserves. I don't know how to explain this. Well, someone always falls between the cracks, I didn't take this personally.

### ***(6) Sense of Accomplishment***

Regardless of whether or not they received acknowledgement and appreciation, most participants expressed a sense of accomplishment and feeling that their work was valuable to others:

Suzan: I was able to be effective. People managed to get from A to B. I managed to diffuse some situations, to help people redirect energy, function in situations where they felt they were drowning. Help people help other people.

Participants took pride of their accomplishments and responsibilities:

Miriam: I was busy sitting by the phone eight hours a day and I don't even remember how it started. I was just doing it. I was getting some names and numbers of people who wanted to come, and then I was first taking them into my own house, and when that was full, it's a big house, then I started referring people to our settlement and I was calling back and forth and organizing who goes where. Then when our settlement was full I continued to another one in the same way...I didn't mean to open my own business (laughs) with secretaries and phones. It was me and I had one phone, but then I ended up handling all these people.

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Shuli: My role was to go out and bring food to people in bomb shelters according to the information we received from the food hotline which we operated. Not the Town Hall but us.

They reported satisfaction with knowing that their work was helpful to others:

Sara: I felt productive, that I was helping. Two of my yoga classes insisted on continuing, we did, when the sirens went off we stopped, go into a fortified place, and also when I got to the hospital or the nursing home people were so excited so there was a feeling, I'm embarrassed to say, more productive than usual...I had a feeling that I'm walking around with a tool that can actually help, particularly during a war. All it takes is to tell a nurse who's been working an eight hour shift to lay down and lift her feet, she can't thank you enough, just a bit more pressure here and there. I was walking around thrilled...

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Gary: They had brought me a young man who didn't know who he was or where he was, and he was talking nonsense, and after an hour he started to calm down and make more sense, he reorganized himself. It was professionally very interesting...he had been very close to a rocket falling. He wasn't physically hurt but he was totally disoriented and he couldn't speak coherently about nothing, he knew where he was, that he was at a medical center being treated. And he, after an hour, Thai massages are all stretches and pressure, it's like Yoga for lazy people, Yoga done to you, and you could see his tension started leaving his limbs, he became more relaxed, his eyes became more focused, he started talking more sense. There were a few like that...

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Moshe: ...and this is how we felt that we were doing something instead of blowing up in front of the TV. You can do something and feel that you've actually done something, because when you bring food to someone up north who really needs it...

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Tamara: When you're there and talk you don't necessarily sense how helpful you are, how important this is. Afterwards you get it, you helped people in the situation room, like manpower, and I also remember talking to people and calming them down and bringing them to talk with less crying or stress...

Civilians' positive reactions provided participants with validation that their work was valued:

Aaron: People loved us, they were very happy, they were singing and dancing with us and laughing at the jokes.

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Interviewer: how did people react?

Ali: fine, very happy, very happy...because they were sitting alone in the shelters, doing nothing, I brought a few paper carts and gave them away, I sat with them for an hour until they managed to divide and share them, and I left.

### ***(7) Authorities' Role***

Participants expressed frustration with the way matters were handled by the authorities (both governmental and municipal) in terms of responding to community needs during the war; they perceived the leadership as negligent, inefficient and

indifferent to civilians' needs, putting on a façade of "business as usual", and taking care of their own needs instead. Suzan and Moshe described it:

Suzan: That's the problem, there was no leadership. That was very hard for the volunteers because they got their feedback from the people in the shelters, some of them were not in good shape...there was no leadership at all and it gave the volunteers a feeling of detachment. It's sort of like here you are instead of the government, instead of the people who should be doing it, and on one hand it's very nice, on the other hand it's very depressing. The mayor did not function on any level at any time, it was pathetic and infuriating, that's what I felt, I wanted to smack him, people in the shelter complained, there were needs, the volunteers would come and tell us the needs, how do I get to the social worker, and we said that's ok, we'll take care of it. It's not to overlap them, it's even greater – there is no social worker.

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Interviewer: You said that the leadership system collapsed?

Moshe: Let me tell you a story that happened in one of the towns. We arrived on Friday right before Shabbat for the first time to see what's happening. The town was completely empty. We entered the Town Hall, the place was wide open...it seems like a couple of days before the war they had an exterminator over. And there were many cockroaches all over the place. So, all the doors are open, many cockroaches and no one there. You run around and you don't see anyone. Suddenly, we found someone, a Russian speaking man, and an alcoholic. Gradually we realized that he was an alcoholic and there was also a note saying that he is not mentally healthy. What happened with him, he went home on a pass for the weekend, and when he returned to the hospital, he resides in a psychiatric institute, it turned out that they transferred all the residents to another place, and forgot him behind. So he went to search for someone in the Town Hall, but no one was there because they all fled. We started speaking with him and suddenly someone arrived and told us to evacuate the building because the mayor was about to come and give an interview to a TV channel. He came especially from [another town] to give this interview and show that everything's all right. But this was the reality, meaning - an open Town Hall, empty, one crazy guy wandering around because they threw him and forgot all about him, and he was wandering around there inside the Town Hall, and that's what it was.

Most participants stated that the authorities should be prepared to meet the needs of civilians and not rely on volunteers during a war, although they basically agreed that since these needs can become overwhelming it is reasonable to have volunteers help



covering the workload. In reality, participants became the main source of help for those in need after the government and the city abandoned them, particularly at the beginning of the war:

Shuli: The shelters we assisted were not public shelters but the private ones under the buildings. For example, we received a call from a person who just had a liver transplant and he was in the shelter without air conditioning and without good electricity that is required for the oxygen device, then my co-worker who was drafted, he calls me, he received all the unusual requests. He tells me to go to the shelter and look into the situation, at least buy him an air conditioner. Where will I take money from, I already spent million shekels on food. We got there and brought fans we received from all kinds of places, I brought from home an icebox that gives water. This is not something that the Town agreed to help in. They claimed they don't do anything for private shelters. That was the argument. Because of that they didn't provide these shelters with food at the beginning of the war at all, because the mayor claimed that these are not "his" shelters. Then whose? He doesn't have enough public shelters in town for all the people and even those that exist, when the war began they were in an unlivable condition, they definitely didn't have air conditioners. No toilets, nothing. Or they called us to open blockages of sewers. They turned to us because they all knew us, both donors and those in need.

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Eva: I came to search for this Ethiopian family and I arrived at a shelter where many Ethiopian families resided in, and they were in a very difficult situation in my opinion. They were isolated from all the, since it was not a public, designated shelter, and they also lacked the ability to get organized, despite the fact that they seemed fine to some extent. And the conditions were very difficult, congestion and lack of air... I arrived at the shelter, they brought me there, and there I found many more families congested in some kind of a shelter that was actually a school's shelter but was not in any condition for a continuous stay. They received the keys from the school's principal. No one from the school came afterwards to check on them. The toilets were in a very bad situation, there was flooding, there were several fans but it was very stuffy. They put a few mattresses on the floor and they were pretty organized with food, each time several people brought the food, but beyond this there was nothing else. So I turned to the City Hall and to other organizations I knew and I requested to connect them to services. Initially it was difficult since this was not a public shelter but part of the school. Later on they added them to the list of public shelters and as a result they began to receive food, basic products, toys, additional fans, the toilets were repaired at some stage, things started to happen, but simultaneously there was also inundation of many sources, generous donors who came to contribute, all the federation I know from Boston and all the good people from Israel who spent there a lot.

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Moshe: ...those that remained there up north stayed from all kinds of reasons. They couldn't leave, they feared to leave, it was too hard for them to leave and so on.... And there were places where the federal system completely collapsed, people fled and only people those who couldn't flee remained and sat in shelters. They were at home with no food because there was nowhere to go shopping for it. The ATM machines were shut down, so we began to send them products on a daily basis, like food and diapers to the small children and so on.... To do this we announced collection points. There were seven points in different cities all over the country. We announced it in the media and many people donated products, food and simple things like gifts as a donation to the people up north.

The authorities did not provide an answer to those who needed to be evacuated, leaving volunteers to deal with the consequences. This often became overwhelming:

Tamara: I remember someone threatening me that he's going to commit suicide.

Interviewer: What did he say?

Tamara: He said that he can't take it anymore. He sounded terrible, very distressed and agitated. I don't remember exactly what he said but I believed him.

Interviewer: So it sounded authentic rather than an attempt to get something?

Tamara: Yes. He couldn't take it anymore so his last source was I am going to kill myself, evacuate me, I can't continue. The problem with the evacuation was that a state of emergency was not declared if I remember correctly, so there was no official policy of evacuating the residents in a systematic way, there was chaos...people were already miserable and feeling hopeless, and this organizational mess on top of it, and people didn't know, is there anything I could do, anywhere to go to? That was the majority, because who are those who stayed here after all? People who didn't have the resources, or where or whom to go to. And how long can you afford a hotel? So that guy was, the head of the psychological services happened to be there, so I told her - take this call. And there were others who arrived in the situation room on several occasions, this scared me a little. They would come and turn tables and curse and threaten like there's no tomorrow, these were people that you could tell they have already reached their breaking point.

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Rita: There were lots of complaints by civilians and cries and fears, and then the journey of evacuation began... There were hotels of all kinds who took people in...people were given a week, but they didn't want to return home afterwards. So this was a problem, and it triggered arguments and quarrels and there were a lot of donations received which were distributed between the shelters, and food was distributed, and there was an attempt to respond to all the problems that emerged

but it was hard with all the complaints...I had a particular bad feeling around a certain case of a family with a son who was handicapped, in a wheelchair, I am not sure what his problem was. They insisted on staying at the hotel and not returning. The father called and said - I am not leaving the hotel, I have a handicapped child. This created a feeling of, I understand him on one hand, he is right, but on the other hand there are other families that also deserve a little bit of timeout, get out of the shelter, and there was feeling of, you understand each side and you don't want to judge anyone. And it was hard, I tried to stay out of it because I am very sentimental and not objective, but the person who handled this, he was terribly miserable.

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Miriam: We had one experience that my husband and I had to sort out. There was one lady, just alone, no family, no children, that I placed first with one lady who was bursting in eagerness to help. She took this woman, and the woman started organizing her life. She frightened the children, she told them what to do, she decided when the door is open and when closed, and then after awhile the host called me and said - I can't take it anymore! I don't know what to do with her, I just simply can't! And then I placed this lady, we told her excuses whatever so that she doesn't feel bad, placed her in another family, and the same thing happened. Then I placed her in a third family, and the same thing happened, and in the end, the thing came back to us, and people said we can't, she's mentally sick. Nobody can manage her. And then we had to try and find a phone number where we can get her. And I remember there was kind of a balagan [hectic] to get her and her things removed to wherever.

### ***(8) Civilians' Reactions***

Participants described how the many challenges presented by the war caused civilians to act out in various ways. One of the main concerns expressed by participants was about civilians becoming demanding and greedy. Eva worked in a shelter occupied by families of mostly new immigrants from Ethiopia. She described how the donations that were received there often caused problems among the residents. She attributed the problems to the fact that these civilians were not accustomed to a situation of staying in shelters (as many Israelis are), and to the lack of leadership among them to assist in communicating effectively and providing structure:

Eva: ...people came and poured stuff there, games and all sorts of things, there was chaos, no good conditions in the shelter to organize structured activities, and as a result many fights and anger started, it didn't go well. We also tried to bring instructors in, and,

Interviewer: What were the fights about?

Eva: Mainly around who gets more, who takes more home...the families suddenly realized that it is possible to receive many more meals and take lots of it home, the children or the families took the games and lost them or whatever, but this didn't result in them sitting and playing together as we would have expected, although there were attempts to bring instructors who definitely tried to arranged a structured activity and it partially helped, but there was no leadership. Today, in retrospect, I recall that one person among them tried to put some order in things...he was the representative and a contact person with the authorities, but in retrospect I think that we needed to work more with the leaders, their leaders. We were more concerned with putting off fires that occurred.

Interviewer: Was the unfamiliarity with a war situation a problem?

Eva: Right, there was also a problem of some anxiety and lack of confidence about getting out of the shelter when there were no attacks, and I am still not sure on what basis this anxiety was built, indeed in our city there was no need to sit in the shelter all the time. I tried to understand if this is a result of something cultural or because they were just comfortable staying together. Perhaps this decreased the level of anxiety a little, or maybe they heard from other places where they stayed in the shelter continuously, it is something that we didn't look into, I didn't fully look into this, and it's truly interesting. Towards the end the solutions of sending people out for vacation and rest and all that stuff we tried to organize, and indeed quite a few of them went out to Jerusalem, and even then there were many fights and resentment about seats on the bus and going out on vacation...There were not enough seats for all those who wanted to go. This was absurd. The community workers in charge arrived only at the last stage. Their absence was felt; workers who know this population, who work with them regularly, they came only towards the end. So this teaches us that it is important that those who work with them throughout the year need to be present in times like this.

Similar complaints, however, were expressed by participants who worked in towns occupied by civilians who were familiar with staying in shelters:

Tamara: Well, problems kept emerging, things will never be one hundred percent fine. There were complaints all the time but the main issue was around the food distribution to the shelters. It was basically provided for people who were on welfare and received food all year long in a kitchen soup, so during the war they were delivered food to the shelter. So other people who saw this started saying – we also need food. Because when you see that someone else is getting food, why

won't you get food too....so they called and asked why didn't you bring us food? This was part of the ongoing problems.

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Rita: ...the pressure, the cries, the phone calls, people would come and yell and make threats and all, and this was a problem. I remember watching this, there were donations of toys so they tried to make it up to them with toys and with all sorts of stuff, but people wanted more and more. I had a feeling while watching this that this became a cynical abuse of the situation, to take and get stuff, and I did not appreciate what I saw.

The demands were also targeted at those who came to assist, resulting in volunteers feeling that they were being exploited:

Eva: We were asked to come and intervene with a group of female soldiers in one of the towns up north. We met with them, and I don't remember everything, but the meeting was mainly focused on their need to vent and reflect on things...there was much burnout as a result of working many, many hours. This burnout was because people treated them like babysitters...there was not enough help, and again I saw lack of local leadership that could have helped them instead of expecting soldiers to entertain and keep the children busy in the shelters. This is something we witness all the time, apparently in time of crisis it intensifies, this excessive dependency, sense of entitlement, of helplessness.

Miriam described how, even when the war was over, some felt entitled to ask personal favors from those who generously opened their house to them during the war:

Miriam: I remember one lady, the war was already over, then I got a phone call from the north and she said can she come, that her children didn't have any summer camp or anything, and she stayed in the bombshell all the time, and I said - okay come, even though the war was over. So she came, and I showed the big house and the pool and the playroom for her two kids, and she said - is this where I'm going to stay? And I said where do you want to stay? And she said I want to go to the same house where my sister and mother stayed, and then I called them, and she said - what!? The war is over! What do they want from us? And then she called back after a few minutes and said - okay, listen; and that's where she went and she stayed there a few days (laughs).

These behaviors evoked strong emotional reactions in some participants. Rita believed that civilians took advantage of the crisis situation to make demands, and that this behavior was an indicator of a more profound problem:

Rita: There's always clashes and anger and bitterness because there is a community that is raised upon I deserve and give me and I want more, and they don't consider giving back, even for a moment, not even a moment. And it's sad, but this is a community that is raised on these premises.

Shuli had similar experiences. She had to set limits with people who became too demanding:

Shuli: As for those complaining about not receiving enough food, I told them that they can kiss my...that's all. Each area had one grocery store open in certain hours. I don't think people need to receive things endlessly; they should also do things for themselves. Those who had something to say I would tell them - if this is not good enough for you, the grocery store just opened, you can spend a little money on your own. People remained in the shelters. They wouldn't get out no matter what...I am not more courageous than them. They became too spoiled.

#### ***(9) Diversity-related Issues***

As mentioned earlier, Israel is a diverse country comprised of civilians with different ethnic backgrounds, religious beliefs, and political views. Participants, too, had their own ethnic, religious, cultural, and political diverse background, and they were responding to a diverse community with its own cultural sensitivities. The interaction sometimes presented different challenges for both participants and those who were helped by them. For example, Ali, an Arab-Israeli who lives in a northern major city that has a minority Arab society described how living in a state of a mixed Jewish-Arab population is often difficult, and more so during a war. During the first days of the war, when things were escalating, the Arab residents living in Israel were called by the Hezbollah leader, Sheikh Hassan Nasrallah, to evacuate their homes and flee in order to avoid the missiles which were aimed at the Jewish residents only. Ali's family left but he decided to remain in the city and do volunteer work, which benefited both Jews and Arabs; nevertheless, he found himself in a situation in which he was exposed to the threat

of the missile hits on one hand, and to anger and anti-Arab comments from the Jewish-Israelis on the other hand:

Ali: I didn't want to flee. Some left after Nasrallah's announcement. He called the Arab residents of [the city] to leave. He addressed us directly. Many left, the neighborhood was almost empty of people and cars.

Interviewer: This is probably a sensitive topic, but what was the feeling like as an Arab-Israeli?

Ali: It was a threat to everyone, forget the conflict between Lebanon and Israel, with respect to the war, I felt the threat directly at me, the missiles don't distinguish between Arabs and Jews. I was in the same boat as my Jewish neighbor.

Interviewer: Was there hostility between Arabs and Jews that was intensified during that period?

Ali: Yes, many people said things at that time, against Nasrallah and against Arabs. I remained quiet.

Interviewer: This must have been a difficult experience for you?

Ali: Yes, but they were right, 33 days in panic, many missiles falling on the city, this has a bad influence on people.

Interviewer: despite your understanding, did this hurt your feelings?

Ali: Not at all, no. I realized that they lived in fear of getting hurt, they can get angry, curse, I understood.

From the Jewish-Israeli prospective on this topic, Moshe, who defined himself as politically "hawkish", described a dilemma that some Jewish volunteers expressed in regard to distributing food to Arab civilians residing in mixed Arab-Jewish neighborhoods:

Moshe: There were inner debates, some people said - why would we give them food, they celebrate when missiles fall, and we give them food? And gradually, first with "leftists", this is very natural for them, and eventually hawkish people too, those that are called "right extremists", they all accepted the idea that just like doctors who help a sick person without asking questions...here too, when it comes to helping people, we are not going to examine whether the person in need is

Jewish or Arab, as a principle. Of course, if we were to identify a family that celebrates while missiles fall, we wouldn't include them. But as long as the list we have shows an Arab family in need, we would bring them food.

Tensions between religious subgroups also emerged:

Moshe: I, as one of the organizers, I had to bridge between ultra orthodox and Messianic Jews on several occasions. It was perhaps one of the most difficult things when a Messianic Jew with a van that had "Jesus" written on it arrived at the house of an ultra orthodox Jew who was collecting things, and he had to take the food from him, and the orthodox guy said - is he going to distribute everything like this? So we came to an agreement that he will not use this van to distribute things. He will only use it to transfer food to the Yeshivah people and they will pass it on to people so that we don't advertise the Messianic Jews.

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Suzan, an orthodox psychologist, experienced her colleagues as being intolerant towards another group of religious volunteers because they supposedly imposed their values on civilians:

Suzan: There were volunteers from Chabbad [a Jewish religious group]. They came with basic things that people need, like food. So somebody had to zero in on the fact that they gave children candy and said - say a short prayer and here's the candy, because they really think that that's what should be done. And we had this whole discussion in the staff about how that's immoral... And this is from people with higher degrees who consider themselves progressed. I can't bare it. The limits of hypocrisy, unconscious arrogance, I find it overwhelming, mostly because they are too small to give anybody else a square. And this is from the "liberal humanistic", while in fact, if you don't talk like them, look like them, vote like them, breath like them, you are not approved.

Miriam had several experiences with hosting evacuees who stayed with her or her neighbors and left unexpectedly. She was trying to make sense of these experiences:

There were families that came, and I remember one Charedi [ultra orthodox] family that came to our house. They had seven or eight children also, little ones. And they were very determined, they didn't touch any of my kitchen things, they just bought, nothing was good enough, and they only ate Badatz [food products that meet strictly high kosher standards]. In the morning, suddenly they started packing. And then I already knew, I had experienced it already, so I asked them - what's going on, and they said their baby is sick and they have to go to the doctor that always looks after him. And that was it and they went. But then I also had those that did stay; that was also funny how that happened. My husband wasn't



home, and I had a bunch of Charedis come, and I just started my swimming course, I was wearing my swim suit plus a gown when they came to the street, and I showed them, I was very proud, in the side of our house we have a little apartment with three rooms and a kitchen and I was ready to give them that...and they said - is there anything else in the house? And I said yes, and I took them upstairs, there was also a place there with a little field kitchen there, and suddenly my daughter comes running and she said - oh mommy they left! And I went to the street and I looked after the two cars that they have come with, and they didn't even say anything! They didn't say it's not good enough, I didn't know if they were just going to the grocery store and coming back, I didn't know anything. And I felt very offended. I don't think it's too much to say I'm sorry this isn't exactly what we were thinking of, or anything, just something. Even goodbye, we are going. Nothing, they just went. And I tried to call them and there was this rabbi-looking person in the car, I called the same number that I called before when I was telling him how to drive to us, and it was disconnected, and even that I thought was an offense. He didn't want to have a connection, anything.

Interviewer: What do you think happened?

Miriam: Well, first of all, as I said, they didn't want to escape the war. They had to, but they wanted to stay home and have their life, just like I would.

Interviewer: Did they go back home?

Miriam: No, as far as I know they couldn't. Some of the people that came to us, they did decide to go back home, even though there was bombings. And some of those that I spoke on the phone with decided not to leave even though there were bombs. Some of them called urgently - come now!! We can't take it anymore. And my husband dropped everything and went. He went twice to take people...and I was with him on the second trip. I think that this particular family that we are now talking about, they, maybe, they are maybe insecure people that need certain people around them to feel okay, and my husband and I are not typical, and we don't speak Hebrew with the right accent, and we don't behave the way that Israelis are used to. Maybe that was one reason.

Interviewer: What do you mean?

Miriam: Well they were Sephardic and we are Ashkenazi; that might be one thing. And then, our way of thinking or speaking or presenting ourselves is different, we are not like Israelis, because we are not Israelis, we have a different background, our way of thinking might be different and so forth. And maybe they felt uneasy with us because they noticed that we are, well, the husband asked - are all the people in this Yishuv [settlement] Olim chadashim [new immigrants]? We had been here, in Israel, for 15 years. And I understood that he means that maybe we were too old to be his company, there might have been plenty of reasons.

Interviewer: Were there any political disagreements perhaps?

Miriam: No, they have been ten minutes in the house. We gave them grapes and water to eat and drink and showed where they can choose a room and they saw the pool, but they more or less felt confused. They had to escape. If I had to leave my home and bombs are falling and my kids are screaming in terror and I don't know what is going to happen to the home when I leave it behind, will it stay there, or will people go looting, or will it burn or explode; and then I have to come to somebody else's house, and I don't know the people or they look older or different or they speak different, somehow I understand them. And yet, I felt pity for them, that they didn't find us, our house or whatever, the surrounding, good enough for that purpose. They left, and that was it. Somehow I understand and somehow it didn't feel all that nice. But I want to tell you about another man, this is a man that came once with my husband when he went to [other city]. And this is the one that called that his children can't take it anymore. The psychologist tried to help and they just can't take it anymore! Come now! And my husband went and brought them to our Yishuv. He first gave them to one family, and they couldn't take that family, and they moved out.

Interviewer: Why not?

Miriam: I don't know, they are very nice people. And they moved to another family, also in our Yishuv, and just when I happened to go there and see if everything is right, because they changed a place, I found the man sitting in the garden, sulking, very gloomy, and muttering to himself - these Ashkenazi, I'm quite certain that I won't get the hot sauce! (laughs). I heard it and I saw it and I went home, and I happened to have chili, and I made the hottest ever sauce! (laughs). And I took it to him, and he must have been pleased, because he is still now to this very day in contact with the family. They have been visiting each other and they call every now and then. So I think it was the sauce (laughs).

### ***(10) Solidarity and Collaboration***

Along with the tensions between subgroups, the war also provided opportunities for volunteers and civilians from very different backgrounds to interact and get to know each other:

Moshe: I remember sitting across from someone who was an extreme leftist, and at the time I thought that if I met him I would have slapped him in the face. But during the war we sat together and thought how we can plan things. All this planning was taking place, and there were people who were Kahanah supporters [right-wing extremists] and others who were left-wing extremists and they all worked together as we felt that there is a mutual goal - to help the people up north. I perceived this as one of the best and most beautiful accomplishments, that suddenly all the conflicts that appeared in the blogs - people knew one another from the blogs - the conflicts suddenly disappeared, and apparently we were united, and we were also helped by the Yeshivah people.

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Miriam: I was in bed sleeping, it was 2 a.m. and I heard people in the house, and I quickly called my husband's number - where are you, and he said - I'm at home, don't worry, you just go on sleeping, everything's fine. And in the morning I heard that he had been driving and somebody had called him and he asked for driving directions. And when he thought that he had already directed this family into our house, he gets another call - how do we go from here and here, close to Jerusalem, and he thought - how funny, I already told them, and then he realized - oh, it's two different families! And in the end we had two families living in the small side, one from Argentina and one from Latvia, and then we had two different families living upstairs, all together, oh and then, one morning then these people who lived with us for weeks... suddenly I see there on the floor mattresses and people that I have never seen before. They were sleeping there. I didn't know who they were, and then I heard later that one grandmother that was upstairs living with us, she had her son overseas and their house was bombed, and so she had called and said - don't go there, come here. So it was him and his family, wife and daughters sleeping in our playroom on the floor when we came down. So in the end we had one Shabbat when we had 30 people around the Shabbat table, we put the tables one after the other. And we had so much fun. There was one man who was a real like solicitor between groups, so he managed to get everybody there, very not religious people and "medium" and these Charedis, all able to sit around the same Shabbat table. And we had such a nice time.

People collaborated and helped each other and together they pooled efforts to meet the emerging needs of the community:

Moshe: We approached cab drivers, we told them that we have lists of people in need and we want them to help us to distribute things, so they took all the merchandise from us and distributed it. And in another town we contacted the Yeshivah, and the rabbi asked his students to come back, because initially he sent them away and told them they had nothing to do there. So he called them back and we brought things to the Yeshivah and they distributed them according to the lists. This was the second stage, delivering things, and everywhere we went we made contacts - with cab drivers, with Yeshivah people.

In the lack of sufficient guidance available, volunteers learned from each other, and helped their peers:

Tamara: We were in the same room so if someone would come in...and ask what do I need to do, then someone would grab him and explain the work and give him guidance. I personally learned from whatever that was going on around me so it was fine...

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Gary: I was also doing a little bit of work with my wife in the headquarters. At some point the morot-chayalot [female educational-soldiers] approached her, approached me, they wanted to have a workshop to learn the basics, so that they would be able to use it in shelters that they were working at, there were always hysterical people and tensed up people, so, one of the last nights we had a whole workshop that lasted well into the night, for all the morot-chayalot, and with mattresses from the gym, and we organized the teams, we did theory, we did practice, so it was all very interesting; someone who has just taken a few courses and is qualified to give a Thai massage but all the sudden finds himself actually teaching other people.

This created a special atmosphere of social support and solidarity that is otherwise rare:

Tamara: There were things, it was heartwarming and also gave you strength, in between all the nerves and the weeping and cries for help, there were also phone calls with hello, I am from central Israel and I wanted to ask how can I help, or, I have games that I would like to send, I can host people in my house, there were some calls like this...it was touching and great to hear this. It's like you're not alone, people want to help you... some people called to offer help and there were also people who would just show up. Someone would enter, no one knows him... - hello, I arrived from wherever and I came to help, do you need a car, do you need this or that, and they would tell him - sit here and answer the phone. And people, they immediately got into business, it was great to witness.

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Shuli: It was a fun time, because there was shared responsibility, you know? In Israel you need a war for this to happen...but this shared responsibility happens here only when things go bad.

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Rita (smiling): I miss those days, I miss them. I keep telling this army commander - well, come on talk Nasrallah into starting another war or something. Because the feeling was that people focused on something called a war, and all the daily gossip – who said what to whom about whom, all this stopped, this petty, mundane, ugly gossip.

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Moshe: Yes, among all the bad things that the war created, perhaps one good outcome was creating unity among people.

**Part II: participants' satisfaction with volunteering.**

Most of the semi-structured questionnaire contained open-ended questions, except for one, which contained three self-ratings scales reflecting on participants' satisfaction with the volunteering experience, followed by open ended questions for participants to explain each rating (for additional details see Chapter III, p. 39). Specifically, participants were asked to rate their satisfaction with (1) the overall volunteering experience (2) the organization(s) which they worked with, and, (3) their own functioning during the war. Scores ranged from 1 to 10 (1=extremely unsatisfied, 10=extremely satisfied). Consequently, they were asked to briefly explain their rating (i.e. why they were satisfied or dissatisfied). The results are shown in table 1 (see next page), followed by a summary of participants' responses to each item (see next page for details on missing items<sup>1</sup>):

Table 1

*Participants' Ratings of Satisfaction with their Volunteer Work*

|   | <i>Range</i> | <i>Mean</i> | <i>Standard Deviation</i> |
|---|--------------|-------------|---------------------------|
| Participants (n = 14)                           |              |             |                           |
| Overall Satisfaction                            | 4-10         | 8.11        | 1.80                      |
| Satisfaction with<br>Organization's Functioning | 3-10         | 7.67        | 2.18                      |
| Satisfaction with<br>Own Functioning            | 6-10         | 8.23        | 1.51                      |

<sup>1</sup>Missing values: one participant did not provide a response to this item as the interview was unexpectedly cut shorter towards the end and he was unavailable for rescheduling. Another participant did not provide rating for the overall satisfaction (scale 1), saying that she "could not come up with a number". A third participant did not rate her satisfaction with her own functioning (scale 3) because she was not assigned any work, however, she was able to rate her satisfaction with the organization that she had contacted for volunteering, as well as her overall satisfaction. Range, mean, and standard deviation were therefore calculated with n=13 for scales 1 and 3, and; n=14 for scale 2.

***Satisfaction with the overall volunteering experience.***

Scores on this item ranged from 4-10, with  $M = 8.11$ ,  $SD = 1.80$ . Most participants expressed satisfaction with the overall volunteering experience. Participants who gave scores ranging from 9-10 stated they believed that they have made a difference, that the work seemed organized and under control, that volunteering helped them to personally cope with the war, and that they enjoyed the collaborative atmosphere that united people. Participants whose scores ranged from 6-8 stated that there was initially lack of organization. One participant gave a score of 5 on this item, stating that there was a “hectic” atmosphere. Another participant gave a score of 4 to reflect her dissatisfaction with the fact that despite being an experienced, dedicated volunteer prior to the war she was turned down by organizations when she offered to help during the war.

***Satisfaction with the organization(s).***

Participants were asked to rate their satisfaction with the organization(s) they have worked with. Those who worked with more than one organization were asked to rate the organization which they were mostly involved with. On this item, participants were asked to rate the organization’s functioning only, *and not* their own performance. Scores on this item ranged from 3-10 with  $M = 7.67$ ,  $SD = 2.18$ . Those that gave high scores of 9 or 10 explained that the organizations were very efficient and organized. Participants that scored 6-8 stated that the organization functioned “not badly” but could have been more organized and improve communication among volunteers and administrators. Two participants gave a score of 3, saying that their organizations were “inefficient and unorganized”.

***Satisfaction with own functioning.***

Participants were asked to rate their own functioning, *separately* from the functioning of the organization(s) they have worked with. Scores on this item ranged from 6-10 with  $M = 8.23$ ,  $SD = 1.51$ . Those who rated this item highly (i.e. gave scores ranging from 8.5-10) stated that they “gave everything they could”, and that they learned much from the work and improved their professional skills. Participants who gave scores from 6-8.5 stated that they “could have done more”, “started too late”, and “weren’t very invested in the work”.



## CHAPTER V

### DISCUSSION

#### **Introduction**

This chapter presents an analysis of the results of the study. It begins with suggesting a framework for understanding crisis volunteers' experiences, and continues with reflection upon the main findings that emerged from the analysis of the data. References to the literature are made in order to help locate the experiences of the participants who were interviewed within the larger context of the literature on volunteers, on responders to crisis, and the intersection between the two. The implications of the findings and suggestions for future research are also discussed. The chapter ends with a discussion of the limitations of this study.

#### **A Suggested Framework for Understanding Crisis Volunteers' Experience**

The purpose of this study was to explore the experience of Israeli civilians who were enrolled as volunteers in various roles of aiding fellow citizens under ongoing missile attacks during the Second Lebanon War in Israel. There was no particular hypothesis for this study; rather, it was designed to generate hypotheses. Fifteen participants were interviewed two years after the war about their prior experience as volunteers during the war. The interviews yielded rich descriptions of various aspects of the volunteering experience. The data from the interviews were audiotaped and later

transcribed, analyzed, and re-arranged into ten themes using the methods of Grounded Theory.

Taken together, the themes indicated that participants' experiences are rich and complex, with several identified factors interacting to form them. These factors, which are directly derived from the themes and reflect on their main ideas, can be incorporated into two core categories named "protective and risk factors in volunteers' experience". It is suggested that these factors come together to comprise volunteers' experience, with each volunteer having a unique set of factors interacting, and therefore a unique experience. Nevertheless, identifying common factors helps to gain a better understanding of the idiosyncratic experience of individuals.

Protective and risk factors are terms commonly used in the field of crisis intervention to describe an association with an outcome (e.g. LaFauci Schutt & Marotta, 2011; Norris, Friedman, Watson, Byrne, Diaz, & Kaniasty, 2002; Perrin et al., 2007; Thormar et al., 2010). For example, previous trauma is a risk factor associated with developing PTSD symptoms in workers responding to a disaster, that is, responders who suffer from previous trauma may be at increased risk for PTSD (Fullerton, Ursano, & Wang, 2004). The association between the risk/protective factors and the outcome is not always easy to establish for various reasons (e.g. identifying the particular influence(s) of prior traumatic experiences; isolating one factor from other factors) and therefore it is often difficult, in this field, to predict an outcome based on a single factor. Hence, it is more accurate to say that certain risk factors may increase vulnerability to an outcome, while certain protective factors serve as buffers, or mediators, to the risk factors, and increase resilience.

Protective/risk factors are used more loosely as terms in the field of crisis intervention than in the field of public health in which the predictors and the outcomes are often easier to define and assess, and research opportunities that lend themselves to testable hypotheses are more readily available (M. J. Indart, personal communication, September 20, 2011). In the current study, which is a preliminary attempt to learn about the experience of volunteers responding to crisis and is exploratory in nature, the terms protective/risk factors are accordingly used to describe putative protective/risk factors. Similarly, the outcome here is broadly defined as an overall positive or negative experience, based on participants' reflections throughout the interviews and self-ratings of their satisfaction with volunteering, with high ratings indicating a positive experience, and vice versa. Further study may determine which of the putative protective/risk factors identified in the current study can indeed predict crisis volunteers' experience, and which terms and measures should be used in defining the outcome.

### **Protective and risk factors across three domains.**

When examining volunteers' experiences, one is typically interested in two domains: the work performed and the individual performing it. The themes that emerged from the interviews are related to the individuals (e.g. their motivations to volunteer) or the work (e.g. the supervision and monitoring available to participants). Another important domain that emerged in participants' narratives was the *context* in which participants were operating. 'Context' pertains to anything related to the milieu – the authorities' role in responding to the crisis situation, civilians' reactions, the tensions around diversity issues, the solidarity, and the interaction between participants and the surrounding community. These issues appeared to be central in participants' experience

and are therefore worthy of being included within a third domain. It is important to state that the division into three domains is not absolute and overlaps may occur. Application of this framework should be made on a case-by-case basis to determine what is considered “work” and what is “context” for a particular volunteer. Indeed, the significance of context in volunteers’ experience has been remarked upon by Omoto and Snyder (2002):

We consider community as both context and process for volunteer efforts. That is, many volunteer efforts are situated squarely in a community. The standards, norms, resources, and institutions of the community provide a backdrop for volunteer efforts. And, in reciprocal fashion, a community is often directly and indirectly changed by the activities of volunteers and the time and energy that they invest in responding to the needs of the community. Thus, we believe that considerations of the interplay between community context and volunteer activities are especially important to investigate, both theoretically and empirically. (p. 848)

It is therefore suggested that the two core categories defined earlier as “protective and risk factors in volunteers’ experience” can be further divided across three domains: the individual, the work, and the context, with each domain containing its specific protective and risk factors. Table 2 (see next page) provides a summary of the protective and risk factors across the three domains.

Table 2

*Protective and Risk Factors across Domains in Participants' Volunteering Experience*

| <i>RISK FACTORS</i>           | <i>DOMAIN</i> | <i>PROTECTIVE FACTORS</i>       |
|-------------------------------|---------------|---------------------------------|
| Individual stressors          | INDIVIDUAL    | 'Doing'                         |
| Safety concerns               |               |                                 |
| Sense of helplessness         |               |                                 |
| Past traumatic events         |               |                                 |
| Unclear status as a volunteer | WORK          | Sense of Accomplishment         |
| Insufficient supervision      |               |                                 |
| Heavy/light workload          |               |                                 |
| Dangerous conditions          |               |                                 |
| Lack of acknowledgement       |               |                                 |
| Negligence                    | CONTEXT       | Solidarity and<br>Collaboration |
| Greediness                    |               |                                 |
| Exploitation                  |               |                                 |
| Diversity-related tensions    |               |                                 |

**Reflections on the Findings**

Some of the dominant implications pertaining to several of the protective and risk factors across domains are discussed in this chapter. Connection between themes and

references to the relevant literature are made and discussed, as well as suggestions for future research:

**The individual.**

***‘Doing’ as a form of coping.***

Safety concerns and general feelings of helplessness were perceived by participants as the main difficulties during the war. The majority of participants mentioned “doing something” as a protective factor that helped them to cope by providing continuity, structure, and a sense of mastery. The verb “doing” was commonly used to describe the desire to overcome the personal distress by taking action. As one of the participants said:

The man in the street felt either helpless or very powerful because he was doing something, those that did, it empowered immensely. Those that didn’t felt duped, powerless...

This finding is in agreement with Lowe and Fothergill (2003) who interviewed 9/11 spontaneous volunteers and noted that the primary motivation for volunteers to help was a “compelling need to transform the negative effects of the disaster by doing something positive” (Steffen & Fothergill, 2009). The current study reaches a similar conclusion, that is, taking action by volunteering is a coping mechanism that helps individuals to overcome the distress of the crisis situation.

***Motivations.***

Four motivations for volunteering were identified in this study: expression of values, action seeking, feeling worthy, and a sense of belonging. Almost all participants mentioned more than one motivation for volunteering. The motivations identified here

are consistent with those widely accepted in the literature on volunteering as summarized by Musick & Wilson (2008).

The process of retrieving information about participants' motivations was as interesting as the outcome: most of the motivations identified did not emerge from answering the question about motivation, but, rather, became evident as the interviews unfolded and participants shared their personal history and circumstances. The format of an in-depth interview allowed them to discover and express more "hidden" aspects of their experience. This revealed motivations that tended to be related to more "negative" aspects of the self, and perhaps not easily admitted to the interviewer for this reason. They may have also been suppressed and less accessible to participants' awareness. For example, one participant who initially described her motivation in terms of social responsibility later recognized having a "rescue fantasy" as a reason to volunteer. Another participant described risk seeking behavior as an attempt to face and overcome fears that were related to earlier exposure to trauma. Another participant, who requested that her identity would be fully concealed in regard to her motivation, reported that, among other motivations, her long-term passive suicidal wishes caused by a traumatic childhood played a role in a desire to expose herself to risk.

In that sense, some motivations could be viewed as risk factors. Further research can determine whether the findings from the two participants who reported elements of risk seeking are idiosyncratic or an indication of a small subgroup of volunteers who become engaged in volunteering, at least in part, for the "wrong" reasons. The important point here is that motivations for volunteering should not be seen as solely positive as may appear from the literature. Further, personal history and prior exposure to traumatic

events were found to be factors that increase vulnerability to the development of psychological problems in the wake of a crisis (Fullerton et al., 2004; Norris et al., 2002). The data from the current study suggest that personal history and prior exposure to traumatic events may be, at least for a subgroup of volunteers, part of their (conscious or unconscious) motivation to get involved in risky situations, and these volunteers may be at risk of developing psychological problems due to their personal history. In any case, these findings support the view expressed earlier by Lowe & Fothergill (2003) that crisis volunteers are also victims who are not only attending to the needs of others, but also to their own needs.

**The work.**

*An unclear status.*

The findings show that although all participants initially identified themselves as volunteers, some expressed self-doubt whether they actually were considered volunteers. Four types of volunteers were recognized in this study: spontaneous volunteers who offered help, either in their field or by doing something else; long-term, registered volunteers whose activities were part of their ongoing volunteer work, with modifications made to their regular work in order to meet emerging needs; workers who, on their own initiative expanded their work hours and/or duties, and; employees who were not clearly mandated to work by law but were pressured by their superiors to “volunteer” their time and skills.

The literature addresses the issue of vague situations by leaving the definition of volunteerism as broad as possible (e.g. Wilson, 2000) or introducing terms such as “quasi-volunteers” to account for various situations (D. Smith, 1982). The United Nations



definition (1999) attempts to resolve the controversy by recognizing that there are some “grey areas”: “...the activity should be undertaken voluntarily, according to an individual’s own free-will, although there are grey areas here too, such as school community service schemes which encourage, and sometimes require, students to get involved in voluntary work.” (p. 4).

The concept of “free will” according to this statement may be compromised in some situations when individuals volunteer to fulfill a program requirement. It can be argued, however, that in such cases it is assumed that these individuals had a choice of attending the program in the first place, knowing that volunteering was required. This is not the case in situations that emerged during the war (as reflected in the fourth subgroup of participants) in which employees were asked to work although they were not mandated to do so. In the current study one participant who was asked to work by her boss reported inner conflicts about whether she should “volunteer” or be with her family. Another participant experienced intense burnout and fatigue symptoms. Others were not mandated to work but were confused about their status and were not sure under whom they had worked. Another issue was with participants who were not “pure”, registered volunteers working under a volunteer-based agency, and were therefore subject to receiving less training, supervision, and acknowledgement for their work.

One problem that stems from this unclear status is that many of these volunteers reported being exposed to dangerous situations. This raises a concern about liability. A community-based crisis naturally results in increase in the need for help, while the issues of liability and unclear labor laws are not fully resolved. This is not unique to Israeli law. According to Orloff (2011) the main concerns of emergency management are of being

sued by spontaneous volunteers or by a potential client, with the emergency agency becoming liable for the volunteer's actions. She further described the current situation in the United States regarding laws on disaster volunteers:

According to FEMA's "Citizen Corp Volunteer Liability Guide," liability laws are difficult to understand, protection is inconsistent from state to state, non-governmental agencies are not well protected, and to complicate matters further, some volunteers have multiple affiliations that blur the lines as to who is responsible for their protection. Lastly, unaffiliated volunteers are unlikely to receive liability protection or injury benefits unless steps are taken to register them. (p. 25)

These situations are not sufficiently addressed in the literature on volunteers and require further attention. In any case, they give further support to the recommendation (Gard & Ruzek, 2006) that disaster volunteers should be enrolled in a volunteer-based agency that can provide them with proper training and supervision and monitor the risk taking.

***Insufficient monitoring, training, & supervision and the role of mutual support.***

The findings indicate that there was insufficient monitoring and training across types of roles, and participants either experienced this in-person or witnessed other volunteers in need of supervision. Participants were not always sure to whom they should report or seek advice. These issues are also addressed in the literature. According to Thormar et al., (2010) role confusion and ambiguity about expectations are among the risk factors to volunteers' well-being. Additionally, Perrin et al., (2007) found that assigning volunteers to unfit roles may increase risk for developing psychological problems.

On the other hand, as some participants pointed out, in the absence of adequate supervision, mutual help and collaboration among volunteers was perceived as a positive,

productive experience. Therefore, although monitoring, training, and supervision were insufficient, participants valued mutual help and collaboration and managed to find solutions. This speaks to the idea of empowerment as an important principle in crisis intervention and in building community resilience. As mentioned earlier, volunteers are also victims who are affected by events. Norris, Friedman, & Watson (2002) noted that in order to help disaster victims, it is important to reassure them that they have what it takes to overcome the crisis by building “strengths, capabilities, and self-sufficiency” (p. 248). This is not to take away from the responsibility of volunteer-based agencies to provide training and supervision and to monitor volunteers’ actions. However, as Pardess (2004) noted, the conclusion here is that the training of volunteers should emphasize the importance of empowering them. This is also in agreement with Zimmerman (2000) who posited that “the process is empowerment if it helps people develop skills so that they can become independent problem-solvers and decision-makers” (p. 46).

***Workload, dangerous conditions, and tasks performed.***

The workload was found to be an important factor in participants’ experience: some were frustrated that they had little to do. The opposite was also true; several participants complained about the heavy workload and long shifts: one participant reported symptoms of severe stress and exhaustion by the end of the war related to working extremely long hours. Two other participants reported exhaustion and burnout after working long shifts. This is in support of the study of Perrin et al., (2007) who found that working long shifts may have increased the risk of PTSD two-to-three years later among workers and volunteers who responded to the 9/11 attacks. On the other hand, another participant in the current study reported the opposite: she found that working

long hours helped her avoid the distress of the war. A possible explanation for this different experience is that it depends on the task performed; the first three participants were engaged in highly stressful tasks of providing food and essentials to civilians in need and answering their phone calls. These participants were exposed to civilians' ongoing complaints and feelings of helplessness, whereas the latter participant was providing holistic treatment to hospital personnel who were generally appreciative and kind to her. Additionally, Perrin et al. reported that those who worked long shifts performed rescue and recovery tasks, were exposed to dangerous conditions, and had feelings of bereavement and helplessness. Under these conditions, it is understandable how longer shifts became a risk factor. In the current study, long shifts, exposure to danger, the type of task performed, and the context seemed to accumulate to cause emotional and physical exhaustion. This fits the conclusion of Norris et al. (2002) that a greater number of stressors increases vulnerability for developing psychological problems.

As for those who felt that they did not do enough: this touches upon a sensitive issue in disaster studies; disasters elicit a mass of volunteers who are often perceived as disruptive to official response efforts (Steffen & Fothergill, 2009). This typically results in organizations being overwhelmed with civilians who have good intentions but not much to do (Lowe & Fothergill, 2003). This may increase the effect of helplessness in which civilians are not only exposed to a disaster that triggers a sense of helplessness, but are also then told that they cannot do anything about it.

*A sense of accomplishment.*

A sense of accomplishment was identified as a work-related protective factor and was mentioned by several participants. In fact, consistent with previous findings (e.g. Gidron, 1983), “making a difference” was associated with high ratings of satisfaction with the volunteering experience. In this study, an observation worthy of mentioning was that participants tended to describe their accomplishments in tangible terms, as shown in the following examples:

I was able to be effective. People managed to get from A to B.

---

I sat with them for an hour until they managed to divide and share them, and I left.

---

He wasn't physically hurt but he was totally disoriented and he couldn't speak coherently about nothing...And he, after an hour...you could see his tension started leaving his limbs, he became more relaxed, his eyes became more focused, he started talking more sense.

This gives support to the finding in the literature that a sense of efficacy, particularly the ability to visualize and feel that one's work is effecting change, is one of the major reasons stated for why people become and remain volunteers (Sherr, 2008). It is speculated here that an ongoing community-based crisis provides many opportunities for volunteers to become engaged in work that provides them with an observed “proof” that they are making a difference. This reinforces their motivation to work and, despite possible lack of acknowledgement from others, provides volunteers with a satisfactory experience.

### **The context.**

#### ***Civilians' reactions.***

Participants reported experiencing many civilians as being greedy and exploitive and this had a strong impact on them, as the following description illustrates:

Suzan: Now I have to point out something that was ugly, dirty, and disgusting, and that is that there has developed, thanks to the leadership on the city and on a national level, of people with this “grabby, I’m entitled” attitude. And that is a horrible experience. And that broke people. That broke ‘N’ [a volunteer]; for him, it was a traumatic experience because of that. He’s a young man, he’s a very good guy, he’s a how can I help kind of person, and he was witness to people being animals, being ugly and piggy. It destroyed his motivation, and at one point he said - I can’t run this. He was suppose to run it... he was soaked onto a turbo of people’s desires.

One thing that emerged from the narratives describing civilians’ reactions is that most incidents revolved around civilians receiving materialistic benefits. It is suggested here that crisis situations may evoke a tendency to compensate civilians for their suffering by offering them goods and benefits, as one participant noted:

Eli: they [civilians] want an evacuation, and there was non, so you distract them a little, offer a fun day for the kids, we had, that’s what we were able to provide, fun days in the amusement park...it was like very technical, and that’s it.

It is possible that such interactions became counter-productive as they may have reinforced civilians’ greediness. This, accompanied with civilians’ frustration with the leadership’s negligence, may have further resulted in triggering a sense of entitlement and exploitation of volunteers. It appears from the narratives that volunteers were often those in charge with distribution of goods and benefits and therefore they became a target of exploitation. It is further speculated that provision of materialistic supplies and free services (e.g. childcare in shelters) may serve at times as a “quick fix” of problem clients, a solution that works well for *both* the volunteer and the receiver and therefore may be difficult to change. This, again, speaks to the need to provide volunteers with sufficient

training and skills (Pardess, 2004) to empower civilians rather than increasing their dependency on outside resources in order to cope (Norris et al., 2002; Zimmerman, 2000). This can benefit both the civilians and the volunteers.

***Contributions to building solidarity.***

The findings showed that there was a strong agreement among participants that the government and some municipal authorities were generally negligent and non responsive to civilians' needs. Some participants used strong language to express their frustration with the authorities' functioning. In reviewing participants' descriptions, it appears that the leaders and their representatives were detached from the community; they were mostly absent, both physically and psychologically. On the other hand, participants reported growing solidarity and collaboration, even among subgroups and individuals who were normally opponents. This did not happen overnight but seemed to be a result of spending time together due to the circumstances or collaborating in volunteer work. Such connection with people who are otherwise strangers was similarly reported by Roger and Soyka (2004) who responded to the 9/11 attacks and described the special relationships that were formed on site, stating that: "...what was unexpected was the mutuality of compassion that we witnessed and experienced. In many ways we became part of a brotherhood of compassion" (p. 28).

These two observations – the frustration with the authorities and the solidarity that formed - are probably related, i.e. in the lack of proper leadership and response to community needs, civilians came together to support each other despite their differences. This, together with a shared destiny, and close proximity (i.e. spending time and

collaborating efforts) all brought people together. This created a sense of belonging, and standing together as a community in the wake of the war was experienced as empowering. This form of solidarity serving as a protective factor matches earlier findings indicating that social support, either perceived (i.e. in a form of creating a sense of belonging), or received (i.e. in getting actual help from others) is found to be a protective factor in times of crisis, protecting the disaster victims from psychological distress (Norris et al., 2002).

### **The outcome.**

#### ***Satisfaction with volunteering.***

Participants were asked to provide a “bottom line” and summarize their experience by rating their satisfaction with volunteering and explaining their ratings. The findings show the following: most participants expressed satisfaction with the overall volunteering experience. High scores were related to participants’ feelings of making a significant contribution, to the work environment seeming organized and under control, to the notion that volunteering helped them to cope with the war, and to enjoying the collaborative atmosphere that united people. Dissatisfaction was related to disorganization and a hectic atmosphere, and to being denied the opportunity to volunteer. Participants also rated their satisfaction from the organization(s) with which that they were affiliated. High scores were related to organizations being efficient and organized and vice versa. Participants then rated their satisfaction with their own performance. High scores were related to being invested in the work and putting effort into it, obtaining valuable learning from the work and improving professional skills.



Lower scores were related to participants' feelings that they could have done more or become engaged in volunteering earlier in the process.

Interestingly, most participants reported having many difficulties related to the work and the community responses. Nevertheless, most of them gave a high rating for their overall and personal satisfaction with volunteering. The majority of participants also stated that their self-esteem improved as a result of volunteering. These results can be seen as providing support to the views of positive psychologists who claim that compassion satisfaction does not only exist, but can coexist along with symptoms of compassion fatigue and burnout (Larsen & Stamm, 2008). Further, the exposure to traumatic experiences, combined with a struggle to overcome the psychological problems and find a meaning by helping others was suggested as one of the ways of promoting posttraumatic growth (Tedeschi & Calhoun, 1995). Indeed, in the current study, although most participants reported a mixture of good and bad experiences, their overall perception of the experience was satisfactory. Compassion satisfaction and Posttraumatic growth were not measured in this study. Future studies may determine whether these concepts are associated with crisis volunteers' satisfaction with their volunteering experience.

An alternative explanation for this finding is that participants were experiencing cognitive dissonance causing them to perceive their work as satisfactory despite its shortcomings. It is also possible that the time that had elapsed between the actual event and the interview which took place two years later resulted in participants downplaying the impact of the bad experiences. Last, participants may have rated their level of satisfaction highly because of what is known in research as social desirability bias (i.e.

the tendency of subjects to respond according to what they believe will make them be viewed positively by the researcher): that is, they wanted to please the interviewer by reporting a positive volunteering experience.

However, judging by the overall content of the narratives, it appears that participants' satisfaction was reflected not only in their high ratings but also in the stories they related. As one participant summarized her experience:

Eli: Afterwards when I was asked - ok, so where were you during the war, and again, this is not about bragging or anything, you say - well, I was here and I also did something, then you do feel good, a little better than if I wasted my time in I don't know what.

### **Limitations of the Study and Future Directions**

The current study included anyone who defined her/himself as a volunteer during the war, that is, first responders, people who expanded their work hours, mental health providers who were asked to volunteer their time, and unaffiliated, spontaneous volunteers. This resulted in a heterogeneous sample which differed in various components such as: roles performed, degree of affiliation with being a volunteer, and level of training. Moreover, this study used a small sample of fifteen participants. Despite this variety and small sample, some common themes still emerged. However, it is possible that a larger sample, or alternatively, a more homogeneous group would have yielded additional specific themes that are related to subgroups of volunteers (e.g. interviewing only mental health providers working during a war). Future studies could address these limitations.

In a sense, the issue of heterogeneity is a reflection of similar problems described in the relevant literature, as well as in the reality of crisis situations: as mentioned earlier, the definition of volunteers in the literature is broad and contains gray areas. This ambiguity is mirrored in real world situations: when a crisis emerges, it is not unusual for different types of volunteers with different backgrounds and training experiences to come forward and offer help, and sometimes even be assigned to do similar tasks (Perrin et al., 2007). From this perspective, interviewing a heterogeneous group who responded to the same crisis situation makes sense as a first step towards understanding the topic of crisis volunteers' experiences.

Another limitation stems from the fact that this study addresses a specific type of crisis, that is, a short-term war. Although it is reasonable to assume that different types of crises have some commonalities and research relies on learning from these case studies and from the knowledge base that each situation brings (Norris et al., 2002), the findings from this study should be viewed with caution, taken into account that they derive from a particular situation. Further, the study was conducted in Israel. It is possible that had the same situation occurred in another country with a different response system to crisis situations and with different cultural norms, the findings would have been different. Similar studies in other states and countries can further examine this.

Third, as mentioned in the first chapter, I was a volunteer during the war and this study stemmed from my own experiences. Being a former volunteer as well as a researcher of this topic challenges the ability to approach this study objectively and avoid an investigator's bias. I addressed this challenge by often consulting with peers, keeping a journal, and constantly writing notes in which I reviewed the data critically and

considered alternative interpretations to those that I might favor. Also, in retrospect, consulting with a supervisor while volunteering during the war helped me to become aware of my own personal struggles versus what has emerged from the narratives. In addition, as illustrated above, many of the themes that emerged from my own study were independently observed and described in other studies. This provides additional confidence in my own study in terms of the themes that emerged.

Last, the interviews were conducted two years after the war took place. This has pros and cons: the main disadvantage of interviewing participants in retrospect about an experience that occurred two years earlier is that they may have difficulties recalling events accurately because of the time that had elapsed. On the other hand, there is an advantage to the interviews taking place two years later since participants were given a chance to process their experiences and to reflect on them from an emotional distance. This allowed them to consider other perspectives and integrate their own experiences with some deeper insights. Since both perspectives are valuable, I attempted to control for this by comparing the themes of the interviews in the study to the themes that emerged from the initial conversations with the Eran volunteers which took place within a week after the war.

## **Conclusion**

Volunteering during the war was found by participants to be helpful not only towards those they served, but also towards themselves. By using ‘doing’ as a coping strategy, they created a sense of structure, continuity, and mastery over the situation and

reduced their feelings of helplessness and fear. Volunteering provided participants with benefits such as an opportunity to act upon their values, an outlet for action seeking, a feeling of worthiness, and a sense of belonging. A number of negative aspects related to the work were mentioned by participants: an unclear status as a volunteer, insufficient monitoring, training, and supervision, too heavy or too little workload, working under dangerous conditions, and lack of acknowledgement and appreciation from others. Participants were also discouraged by the negligence of the authorities (both governmental and municipal) in taking care of the community's needs, and by some civilians' reactions of greediness and exploitation. Tensions around diversity issues also occurred. Nonetheless, participants enjoyed the community coming together in solidarity and mutual support. The positive and negative aspects mentioned above could be conceptualized as protective and risk factors across three domains: the individual, the work, and the context (environment). Acting together, these factors comprised the participants' experience.

Overall, despite the risk factors mentioned above, most participants reported a satisfactory experience, mainly due to the fact that they were able to better cope with the war, were proud of their accomplishments and contribution, and felt empowered by the atmosphere of solidarity, collaboration and mutual support that surrounded them. These were found to be protective factors.

Early disaster preparation and response, as recommended in the literature (e.g. Pardess, 2004) seems to be a key component in optimizing volunteers' experience. Creating an arsenal of registered crisis volunteers, training and preparing them in advance and then monitoring their work and providing them with supervision will likely solve

many of the problems reported in this study. Another key component is balance - finding the right balance between working and resting, minimizing exposure to risks, dividing time between work and attending to personal matters – all these appear essential to increasing volunteers' satisfaction and well-being.

A community-based crisis is a time of chaos. It seems that a crisis acts like a litmus test of the community - everything that is hidden becomes out in the open. Ongoing social issues may exacerbate and become worse. Although communities may be resilient to significant long-term effects of crises (Norris et al., 2002), it can be expected that at some point in time another crisis situation would emerge and yield similar problems. In reviewing the results of the current study, in conjunction with the literature on community and crisis, I believe that early preparedness for crisis situations is essential, but not sufficient. There is a need to continuously empower the community, enhance citizens' participation, and build solidarity and collaboration around suitable goals to promote a sense of community and social responsibility among all its members. Taken together, the efforts towards increasing volunteers' satisfactory experience should encompass early preparedness of volunteers, maintaining balanced work conditions, and building a healthier, resilient community.

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## APPENDIX A

### **Advertisement**

An Israeli citizen, currently studying for her doctorate at Rutgers University in the USA is conducting a study about volunteers. She is searching for people who reside in the city of Haifa and the region who volunteered during the Second Lebanon War in different roles related to the crisis situation in the city. The aim of the study is to learn about volunteers' experiences and needs during the war in order to achieve insights with regards to creating suitable conditions for future volunteers active in similar crisis situations.

The study includes a 45 minutes to an hour-and-a half interview conducted in one or two sessions with the volunteer. The interview will take place at a time and location according to subject's choice and preference. The interview includes a number of questions about the volunteer's experience during the war. Men and woman age 18-70 who speak Hebrew, in all areas of volunteering are welcome. Duration and frequency of volunteering do not matter; people who had limited volunteering experiences during the war are welcome as well. Identity of subjects and all Identifying information will remain confidential.

People who are interested in being interviewed for this study or receiving more details are welcome to email me directly with a brief message including:

First name

Age range (18-25, 26-35, 36-45, 46-55, 56-64, 65-70)

Contact information (email and/or phone number)

Area of volunteering (psychological help, bomb-shelter aid, food and medication distribution, children's activities, drivers, etc.)

Your Participation is important and greatly appreciated!

Thanks in advance,

Naama Nebenzahl

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In Hebrew:

דוקטורנטית ישראלית מאוניברסיטת רוטגרס בארה"ב מחפשת לצורך מחקר על מתנדבים אנשים המתגוררים בחיפה והאיזור אשר התנדבו בזמן מלחמת לבנון השנייה בתפקידים שונים הקשורים למצב החירום בעיר. מטרת המחקר היא ללמוד על התנסות המתנדבים ועל צרכי המתנדבים בזמן המלחמה, על מנת לסייע לתובנות לגבי יצירת תנאים מתאימים למתנדבים במצבי חירום בעתיד.

המחקר כולל ראיון בן 45 דקות עד שעה וחצי שייערכו בפגישה אחת עד שתיים במקום ובזמן המתאים למתנדב. הראיון כולל מספר שאלות לגבי התנסות המתנדב בזמן המלחמה. מוזמנים לפנות גברים ונשים דוברי עברית בני 18-70, שעסקו בכל תחומי ההתנדבות בזמן המלחמה. משך ותדירות ההתנדבות אינם חשובים, גם אנשים אשר התנדבו בצורה מצומצמת ביותר מוזמנים לפנות. פרטי המתנדב וזהותו יישמרו חסויים.

אנשים המעוניינים להתראיין למחקר או לקבל פרטים נוספים מוזמנים לפנות אלי ישירות באימייל ולהשאיר מסר קצר הכולל:

שם פרטי

טווח גיל (18-26, 25-36, 35-46, 45-56, 55-65, 64-70)

פרטי התקשרות (כתובת אימייל ו/או מספר טלפון)

ציון תחומי ההתנדבות (עזרה נפשית, סיוע במקלטים, חלוקת מצרכים ותרופות, הפעלות לילדים, הסעות. וכו')

השתתפותכם במחקר חשובה ומוערכת ביותר!

בתודה מראש,

נעמה נבצל

אוניברסיטת רוטגרס,

ניו-ג'רסי, ארה"ב

naamane@eden.rutgers.edu

## APPENDIX B

### Letter of Introduction

Dear Participant,

Thank you for agreeing to participate in a study that I am conducting as a graduate student in Clinical Psychology at Rutgers University, New Brunswick, New Jersey, USA, regarding the experience of volunteers in the city of Haifa and the region during the second Lebanon war in the summer of 2006. By participating in this study, you will be contributing to a scientific effort to understand the issues involved in being a volunteer during a crisis time. This can help to be better prepared for similar situations in the future which involve using volunteers during a crisis time.

For this study, you will be asked to reflect back on your own experiences during the war. The interview will last from 45 minutes to an hour and a half and will be conducted in one or two meetings, according to your choice. The interview will be audiotaped and then transcribed; the audiotapes will be destroyed upon transcription. The transcripts will contain no identifying information, and will be available only to me, the researcher. Your real name will not be used, and any identifying information will be changed or excluded in the final report in order to protect your identity from being disclosed. Quotes or details about any singular person will be used anonymously. Please do your best to avoid mentioning identifying information such as last names, addresses, and phone numbers. Nevertheless, you can be assured that such details will be omitted from the final report.

Participation in this study is completely voluntary, and if you decide at any point not to participate, there will be no penalty or loss of any kind to you. The risks involved in your participation are minimal. Should you feel distressed or uncomfortable during the interview, you are free to interrupt your participation. In addition, if you have any other problems as a result of your participation in this study, please contact me at the number or email provided below. You are also welcome to contact me if you wish to receive additional information regarding this study, including the final results of the research, once it is completed. I welcome any comments about your participation or suggestions regarding any other aspect of this study.

I thank you for your interest and participation.

Sincerely,

Naama Nebenzahl, Psy.M.

Tel: 050-8874951 (Israel) +917-660-0201 (USA)

Email: [naamane@eden.rutgers.edu](mailto:naamane@eden.rutgers.edu)

In Hebrew:

### מכתב פתיחה

תודה על הסכמתך להשתתף במחקר שנערך על ידי במסגרת עבודת הדוקטורט שלי בפסיכולוגיה קלינית באוניברסיטת רוטגרס בניו-גרסי, ארה"ב לגבי ההתנסות של מתנדבים בחיפה והסביבה בזמן מלחמת לבנון השנייה בקיץ 2006. השתתפותך במחקר תתרום למאמצים המדעיים להבין את הנושאים הכרוכים בהתנדבות בזמן משבר. הדבר יכול לסייע להכנה טובה יותר למצבים דומים בעתיד בהם מועסקים מתנדבים.

לצורך המחקר הנוכחי, תתבקש/י לחשוב ולספר על ההתנסות האישית שלך בזמן המלחמה. הראיון יארך כ-45 דקות עד שעה וחצי, ויתקיים במסגרת מפגש אחד או שניים על פי בחירתך. הראיון יוקלט באודיו-טייפ ולאחר מכן ישוכתב. ההקלטות יושמדו לאחר השכתוב. השכתובים לא יכילו כל מידע מזהה ויהיו זמינים אך ורק לי, החוקרת. השם האמיתי שלך לא יהיה בשימוש, וכל מידע מזהה ישונה או יושמט בנוסח הסופי על מנת למנוע זיהוי. ציטוטים או פרטים לגבי כל אדם המוזכר בראיון יובאו באופן אנונימי. אנא המנע/י כמיטב יכולתך מהזכרת מידע מזהה כגון שמות משפחה, כתובות וטלפונים. בכל מקרה, היה/י בטוח/ה שמידע זה יושמט מהניסוח הסופי.

ההשתתפות במחקר היא חופשית ומתוך בחירה, ואם בכל שלב תחליט/י שלא להשתתף לא תהיה לכך כל השלכה עבורך. הסיכונים הכרוכים בהשתתפותך הם מינימליים. אם תרגיש/י שלא בנוח מכל סיבה שהיא במהלך הראיון, את/ה חופש/יה להפסיק. בנוסף, אם תיווצרנה בעיות כלשהן כתוצאה מההשתתפות במחקר זה, אנא צור/צרי עימי קשר באמצעות הטלפון או האימייל המופיעים למטה. את/ה מוזמן/ת ליצור איתי קשר אם ברצונך לקבל מידע נוסף לגבי המחקר, כולל התוצאות הסופיות כאשר המחקר יסתיים. אני מקדמת בברכה הערות לגבי השתתפותך במחקר או הצעות הקשורות לכל נושא אחר במחקר.

אני מודה לך על העניין שאת/ה מגלה במחקר ועל השתתפותך.

בברכה,

נעמה נבנצל, Psy.M.

טלפון: 8220328-04

אימייל: [naamane@eden.rutgers.edu](mailto:naamane@eden.rutgers.edu)

## APPENDIX C

**Consent Form**

I, \_\_\_\_\_ hereby authorize the researcher Naama Nebenzahl, Psy.M., of Rutgers University in New Brunswick, New-Jersey, USA, to gather information from me for a research study on Israeli volunteers' experiences during the Israel-Lebanon war in 2006. I have freely and voluntarily consenting to participate in this study, with no coercion used to elicit my cooperation.

I understand that my identity will be kept confidential to the full extent of the law, through procedures explained to me by the researcher. I understand that my participation will involve one or two audiotaped interviews of approximately 45 minutes to an hour and a half total. The audiotape will be destroyed upon the end of the study by the researcher. The transcribed interview will contain no identifying information, and will be available only to the researcher. Identifying information will appear only in this consent form which will be kept under lock and key in the researcher's home office.

I understand that the interviewing process will involve minimal psychological risk. I have also been assured that I may discontinue participation at any time during the interview. I understand that if participating in this study causes me any undue stress either during or after the interview, or if I have any questions regarding the research, Naama Nebenzahl will be available for consultation and can be reached at 04-8220328 or by email at [naamane@eden.rutgers.edu](mailto:naamane@eden.rutgers.edu). I also understand that I may receive the results of this study or any other additional information if I so desire. These procedures have been explained to me by Naama Nebenzahl. Her faculty advisor's contact is: Kenneth Schneider, Ph.D., Department of Applied Psychology, 152 Frelinghuysen Road, Piscataway, NJ 08854, 732-445-2000, x 107, [schneid@rci.rutgers.edu](mailto:schneid@rci.rutgers.edu).

If you have any questions about your rights as a research subject, you may contact the IRB Administrator at Rutgers University at:

Rutgers University, the State University of New Jersey

Institutional Review Board for the Protection of Human Subjects  
Office of Research and Sponsored Programs  
3 Rutgers Plaza  
New Brunswick, NJ 08901-8559  
Tel: 732-932-0150 ext. 2104  
Email: [humansubjects@orsp.rutgers.edu](mailto:humansubjects@orsp.rutgers.edu)

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Participant's Signature

Date

I, \_\_\_\_\_ understand that the researcher, Naama Nebenzahl, has requested to audiotape my interview. I hereby consent for Naama Nebenzahl to make these recordings.

---

Person's signature who is consenting

---

Date

In Hebrew:

### טופס הסכמה מדעת

אני \_\_\_\_\_ (שם) נותן בזאת את הסכמתי לעורכת המחקר נעמה נבנצל, Psy.M, מאוניברסיטת רוטגרס בניו-ג'רסי, ארה"ב, לאסוף אינפורמציה ממני לצורך מחקר על ההתנסות של מתנדבים ישראלים בזמן מלחמת לבנון השנייה בשנת 2006. אני משתתף במחקר זה מרצוני החופשי, ללא כפייה כלשהי.

אני מבין שזהותי תישמר חסויה כפי שמתחייב בחוק, באמצעות הליכים שהובהרו לי על ידי החוקרת. אני מבין שהשתתפותי תכלול מפגש אחד או שניים באורך כולל של 45 דקות עד שעה וחצי לצורך ראיון מוקלט. ההקלטות תושמדנה על ידי החוקרת עם סיום המחקר. הראיון המשוכתב לא יכלול שום פרטים מזהים, ויהיה זמין אך ורק לחוקרת. מידע מזהה יופיע על גבי טופס זה בלבד שיישמר נעול במשרד החוקרת.

אני מבין שתהליך הראיון כרוך בסיכון פסיכולוגי מינימלי. הובא לידיעתי שאוכל לסיים את השתתפותי בכל עת במהלך הראיון. ידוע לי כי אם השתתפות בראיון תגרום לי למתח נפשי בעת או לאחר תום הראיון, או באם תהיינה לי שאלות כלשהן בנוגע למחקר, נעמה נבנצל תהיה זמינה למתן מענה/ייעוץ בטלפון 8220328-04 או באימייל [naamane@eden.rutgers.edu](mailto:naamane@eden.rutgers.edu). כמו כן אני מבין שאוכל לקבל את תוצאות המחקר או כל מידע נוסף אם ארצה בכך. ההליכים הנ"ל הוסברו לי על ידי נעמה נבנצל. מנחה המחקר שלה הוא ד"ר קנט שניידר, וניתן ליצור עמו קשר באמצעות מכתב, טלפון או אימייל:

Kenneth Schneider, Ph.D., Department of Applied Psychology, 152 Frelinghuysen Road, Piscataway, NJ 08854, 732-445-2000, x 107, [schneid@rci.rutgers.edu](mailto:schneid@rci.rutgers.edu)

לשאלות לגבי זכויותי כמשתתף במחקר, ניתן לפנות לאדמיניסטרטור של וועדת ה- IRB של אוניברסיטת רוטגרס:

Rutgers University, the State University of New Jersey

Institutional Review Board for the Protection of Human Subjects

Office of Research and Sponsored Programs

3 Rutgers Plaza

New Brunswick, NJ 08901-8559

Tel: 732-932-0150 ext. 2104

Email: humansubjects@orsp.rutgers.edu

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\_\_\_\_\_

חתימת המשתתף

\_\_\_\_\_

תאריך

אני \_\_\_\_\_ (שם) מבין שהחוקרת, נעמה נבנצל, מבקשת  
להקליט את הראיון עימי. אני נותן בזאת את הסכמתי לנעמה נבנצל להקליט את הראיון.

\_\_\_\_\_

חתימת המשתתף

\_\_\_\_\_

תאריך



## APPENDIX D

### **Semi Structured Interview Questionnaire**

#### Questions for volunteers

General question about the 2006 war period:

Describe your personal experience during this time:

- a. What were the main challenges/difficulties you were faced with during the war?
- b. What helped you to cope better?

Pre-war

1. Were you already an active volunteer in any organization/s when the war began?
2. Was your experience as a volunteer during the war different from your other volunteering experience? If yes, in what way?

Volunteering during the war

1. What prompted you to volunteer?
2. Who did you approach?
3. Were there any difficulties finding a setting for volunteering?
4. What was your role as a volunteer?
5. Did you receive any training at any point?
6. What were the obstacles/difficulties doing your work?
7. What helped you cope?
8. What would have helped you to cope better?
9. Did you receive any support? From whom?

Post war

1. Did you continue to keep in touch with
  - a. The people you helped?
  - b. The organization you volunteered with?

Reflecting back on volunteer work during the war

1. What, if anything, would you have done differently?

2. Overall, did you have a good/bad experience? Why?  
 Ratings of satisfaction: (scale of 1-10; 1=totally dissatisfied, 10=extremely satisfied) and briefly explain your rating.

a. Rate your overall satisfaction with the volunteering experience \_\_\_\_  
 Why? \_\_\_\_\_

\_\_\_\_\_

b. Rate your satisfaction with the organization you worked with \_\_\_\_  
 Why? \_\_\_\_\_

\_\_\_\_\_

c. Rate your overall satisfaction with your personal functioning as a  
 volunteer \_\_\_\_  
 Why? \_\_\_\_\_

\_\_\_\_\_

3. Did the work have any effect on your
- a. self esteem
  - b. personal coping with the war
4. What do you think about the idea of having ways that volunteers can meet in person or communicate in other forms (e.g. via internet) during the war? (in terms of risk, necessity)
5. What is your opinion on whether government/municipal authorities should rely on volunteers during crisis time?

#### Closure

1. Feedback: What do you think of this interview? Is there any important information that you would like to add?
2. What questions do you think I should be asking to better understand your (or others') experience as a volunteer?

In Hebrew:

### ראיון חצי מובנה

#### שאלות למתנדבים

שאלה כללית לגבי תקופת המלחמה

תאר/י את החוויה האישית שלך בתקופת המלחמה:

א. מה היו האתגרים/הקשיים העיקריים עימם התמודדת?

ב. מה עזר לך להתמודד טוב יותר?

#### לפני המלחמה

1. האם היית מועסק/ת כמתנדב/ת פעיל/ה במסגרת ארגון כלשהו כאשר המלחמה התחילה?

2. האם ההתנסות שלך כמתנדב/ת בתקופת המלחמה הייתה שונה מההתנסות האחרת שלך כמתנדב/ת? אם כן, באיזה אופן?

#### תקופת המלחמה

1. מה גרם לך להחליט להתנדב?

2. למי פנית כדי להתנדב?

3. האם נתקלת בקשיים למצוא מסגרת התנדבות?

4. מה עשית כמתנדב/ת?

5. האם קיבלת הכשרה בשלב כלשהו?

6. מה היו הקשיים/המכשולים בעבודתך?

7. מה סייע לך בהתמודדות עם הקשיים?

8. מה היה יכול לסייע לך להתמודד טוב יותר?

9. האם קיבלת תמיכה כלשהי? ממי?

#### לאחר המלחמה

1. האם המשכת לשמור על קשר:

א. עם האנשים להם עזרת?

ב. עם הארגון בו התנדבת?

במבט לאחור על חווית ההתנדבות בתקופת המלחמה

1. מה, אם בכלל, היית עושה אחרת?

2. באופן כללי, האם היית לך התנסות טובה/רעה כמתנדב/ת? למה?

דרוג שביעות רצון: סולם 1-10: 1=לגמרי לא שבע רצון, 10=שבע רצון ביותר) והסבר/י בקיצור את הסיבה לדרוג.

א. דרג/י את מידת שביעות הרצון הכללית שלך מחווית ההתנדבות \_\_\_\_

למה?

ב. דרג/י את מידת שביעות הרצון שלך מהארגון איתו עבדת \_\_\_\_

למה?

ג. דרג/י את מידת שביעות הרצון הכללית שלך מהתפקוד האישי שלך כמתנדב/ת \_\_\_\_

למה?

3. האם לעבודתך כמתנדב/ת הייתה השפעה כלשהי על

א. הערכתך העצמית?

ב. יכולתך האישית להתמודד עם תקופת המלחמה?

4. מה את/ה חושב/ת על הרעיון ליצור אפשרויות שמתנדבים יוכלו להפגש או להיות בקשר בדרכים אחרות (למשל באמצעות האינטרנט) בתקופת מלחמה (מבחינת הסיכון הכרוך ביציאה מהבית, הצורך במפגש)?

5. מה עמדתך בנושא הסתמכות על מתנדבים בזמן מלחמה על ידי הממשל/הרשויות המקומיות?

סיכום

1. מה את/ה חושב/ת על הראיון? האם יש מידע חשוב שאת/ה רוצה להוסיף?

2. אילו שאלות את/ה חושב/ת שאני צריכה לשאול כדי להבין טוב יותר את ההתנסות שלך (או של אחרים) כמתנדב/ת?