# Relations industrielles Industrial Relations



# Volunteering, Income Support Programs and Persons with Disabilities

# Bénévolat, programme de soutien du revenu et personnes souffrant d'un handicap

# Voluntariado, programas de apoyo al ingreso y personas discapacitadas

Michele Campolieti, Rafael Gomez and Morley Gunderson

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See table of contents

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#### Article abstract

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# Volunteering, Income Support Programs and Persons with Disabilities

## Michele Campolieti, Rafael Gomez and Morley Gunderson

We study the propensity of persons with disabilities to engage in volunteer activity using the Participation and Activity Limitation Survey (PALS). Our principal focus is on the effects of various income support programs on persons with disabilities participation in volunteer activities because income support programs can differ with respect to their treatment of unpaid work. For example, workers' compensation programs embody strong disincentives to volunteering while public disability insurance programs explicitly encourage unpaid work. We find that workers' compensation is associated with decreases in the probability of volunteering while public disability insurance is associated with increases in the propensity to volunteer. The relevance of these results to both theories of volunteerism and public policy is discussed.

KEYWORDS: disability policy, employability, social capital, household production, flexible benefits payments

#### Introduction

Several interrelated concerns, of policy importance and academic interest, prompt a focus on the volunteer activity of persons with disabilities. First, there has been a rapid growth in the number of persons who collect disability benefits from public programs and a decline in employment of persons with disabilities [e.g., Bound and Waidmann (2002) and Burkhauser Houtenville and Wittenburg (2003) in the U.S. and Campolieti and Lavis (2000) in Canada]. Second, engaging persons with disabilities in active employment is now regarded as important not only to reduce the numbers on income support but also to foster their integration into society. Not surprisingly increased attention has recently been paid to various policy initiatives that facilitate the labour force participation of persons with disabilities. Such initiatives include: reducing the work disincentives embedded in the various income support programs; reducing the barriers to returning to work through reasonable accommodation requirements on employers; facilitating the adaptation of disabled workers to their limitations (e.g., changing jobs, changing employers, changing the kind of work they do and how much work they do); reducing the effect of the disability through vocational reha-

Michele Campolieti is Associate Professor at the Department of Management (Scarborough Campus) of the University of Toronto and at the Centre for Industrial Relations and Human Resources of the University of Toronto (campolie@chass. utoronto.ca).

Rafael Gomez is Lecturer at the Department of Management of the London School of Economics (r.gomez@lse.ac.uk).

Morley Gunderson is CIBC Chair of Youth Employment at the University of Toronto, Professor at the Centre for Industrial Relations and Human Resources and the Department of Economics of the University of Toronto (morley.gunderson@utoronto.ca).

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bilitation; and improving the ability of the disabled to re-enter the labour market by providing additional education as well as job search assistance.

A neglected area—and the focus of this analysis—is volunteer activity for the disabled, both as a potential bridge to employment and as an activity that fosters their integration into society. The usefulness of volunteer activity as a bridge to paid employment has already been emphasized, given the substantial monetary return to time spent volunteering—6 to 7 per cent estimated by Day and Devlin (1998) and 4 per cent in Devlin (2001). Volunteering may also form a bridge to a deeper engagement in the workforce for many groups who normally have problems with transitions into the labour force such as youths (school-to-work transition), older workers (transition to retirement), and women and the unemployed (transition back to the labour market) [for example, among others, Gomez and Gunderson (2001, 2003) and Jones (1999, 2000)]. The potential for volunteer activity to provide a bridge to paid employment is exhibited by the fact that the U.S. Civil Service Commission and a number of federal agencies regard volunteer activity as the equivalent of time spent in paid employment in terms of giving credit for work experience (Dicken and Blomberg, 1988). Canadian survey evidence indicates that 71 per cent of employers encourage or accommodate employee volunteer activity during working hours and/or encourage employees to volunteer on their own time. The most common reasons employers gave for such support were to improve their public image, to improve employee morale and to improve relations with the surrounding community (Easwaramoorthy et al., 2006). Some private sector employers, such as Delta Airlines, have also used volunteer activity as a transitional activity in their return-to-work strategy for injured employees who are well enough to do volunteer work but not yet well enough to return to their regular job (USA Today, September 1, 1999, 3B). Volunteer activity also fits into the broad initiatives currently underway in Canada and the U.S., which are trying to increase the likelihood that persons with disabilities who are collecting disability benefits would leave the disability rolls and re-enter the labour market. In spite of its obvious policy and practical importance, to our knowledge, the volunteer activity of persons with disabilities (to facilitate transitions back to work) has not been systematically analyzed.

A small number of Canadian empirical studies have analyzed the determinants of volunteering in general and for particular groups, and their conclusions will be contrasted with ours for persons with disabilities. Vaillancourt (1994) and Day and Devlin (1996) use the 1987 Survey of Volunteering (VAT), and Hall *et al.* (1998, 2001) use the 1997 and 2000 National Survey of Giving, Volunteering and Participating (NSGVP), respectively, but provide only cross-tabulations that do not control for the influence of other factors. Devlin (2001) also uses the 1997 survey but focuses on the impact of volunteering on earnings, with only passing reference to the determinants of the decision to volunteer. Gomez and Gunderson (2003) use the General Social Survey of 1994, but focus on characteristics of work and family as influencing volunteer activity; they have no information on persons with disabilities or income support programs. Other studies deal only with particular subgroups—youths (Jones, 2000), seniors (Jones, 1999) and the unemployed (Gomez and Gunderson, 2001). None of these studies,

however, analyze the volunteer activity of persons with disabilities. To our knowledge this is also the case with U.S. studies.

This paper proposes to fill the gap in the literature by using Statistics Canada's Participation and Activity Limitation Survey (PALS), a unique dataset that focuses exclusively on disabled individuals with activity limitations and that has measures of voluntary activity as well as information on demographics, educational attainment, income and household characteristics. Most importantly, PALS also contains information on income support programs that provide some income to persons with disabilities. The rules governing the receipt of benefits in these programs can alter an individual's incentives to volunteer.

We look at the volunteer activity of persons with disabilities principally (though not exclusively) from an economic perspective—interpreting our estimates through the social capital and household production frameworks. This paper is the first study to: (1) identify the disincentives/incentives to volunteer activity embodied in various income support programs for the disabled; and (2) to estimate whether these incentives/disincentives are in fact associated with differences in the propensity for disabled individuals to engage in volunteer activity.

### Disability Policy in Canada and Incentives to Volunteer Embedded in Income Support Programs

The last several decades have seen a gradual shift from passive income support in terms of public programs for persons with disabilities, to an increased emphasis on enabling their reintegration into the labour market. In the United States, the primary focus of these efforts has been the American with Disabilities Act (ADA), which implemented comprehensive barrier removal legislation by requiring reasonable accommodation requirements on employers. In Canada, there has been much less emphasis on barrier removal legislation. In contrast, Canadian efforts that have tried to assist the re-entry of persons with disabilities into the labour market have primarily occurred via the Employment Assistance for People with Disabilities program and the "In Unison" agreements with the provincial social assistance ministries (Campolieti and Lavis, 2000), which have been recently replaced by the Multilateral Framework for Labour Market Agreements for Persons with Disabilities. These programs provide job search assistance as well as education and other services that help persons with disabilities become better prepared for a re-entry into the labour market. In addition, these programs also try to encourage employers to consider disabled workers for employment.

Canada has a wide range of benefit or income support programs that persons with disabilities can access. They can create various (likely unintended) disincentives to the use of volunteering as a way of "testing the waters" to form a bridge for persons with disabilities to engage in active paid employment. The disincentives generally arise from *three factors*: the scrutiny that program administrators apply for the recipient to maintain their eligibility for benefits; the extent to which volunteering could jeopardize those benefits; and the magnitude of the loss of benefits if they are jeopardized by volunteering. While such dimensions are difficult to precisely delin-

eate, the programs can be grouped according to the extent to which they may deter volunteer activity.

Workers' compensation programs are a provincial responsibility (the legislation that governs them varies across provinces) that are concerned with insuring workers with disabilities and industrial diseases that arose in or during the course of employment. One of the principal goals of workers' compensation programs is the return of the injured worker to paid employment. Consequently, workers' compensation scrutinizes its recipients with respect to their ability to return to work. In many cases, they may be expected to return to "light duties" once they have reached the point of maximum medical improvement. In such circumstances volunteering could be interpreted as being able to return to light duties and hence jeopardize continued receipt of benefits. Since persons on workers' compensation were once employed, their potential employability itself is not questionable except for their residual level disability after they reach the point of maximum medical improvement. Consequently, for workers with more severe injuries, engaging in volunteer work prior to reaching the point of maximum medical improvement could result in the termination of benefits. As a result, the disincentive to volunteer can be guite substantial for persons collecting workers' compensation benefits.

In contrast, the Canada/Quebec Pension Plan Disability (C/QPP-D) program specifically allows persons with disabilities the option of taking on volunteer work without any threat of reducing the size of their disability pensions. The fact that volunteering is specifically mentioned as acceptable suggests that it is encouraged as a prelude to facilitate a more formal re-entry to the labour market or as a way for persons with disabilities to maintain an attachment with the world of work, after formal exit from the labour force has occurred.

In between these two extremes that respectively discourage volunteering (workers' compensation) and encourage volunteering (CPP-disability) the other income support programs for persons with disabilities either have ambiguous or no anticipated effects on the incentive to volunteer.

Welfare or social assistance recipients are under considerable scrutiny for maintaining their welfare receipt, as was the case for persons on workers' compensation. While volunteering could be interpreted as being able to work (and hence jeopardizing continued receipt of benefits), it is also the case that welfare recipients are generally expected to participate in employment assistance activities if they are able to do so. Volunteering can be considered as consistent with such activities and hence would not jeopardize receipt of welfare benefits by volunteering for that reason.

Employment insurance scrutinizes its recipients for their ability to return to work but not to the extent of workers' compensation or welfare. Furthermore, in some cases such as maternity or parental leave, recipients are not required to be seeking work so that volunteering would not jeopardize their receipt of benefits. In other cases, they are allowed to take training or other human capital improvement programs without having to be looking for work. To the extent that these are recognized as possible avenues for human capital development that can serve as a bridge to

subsequent employment, volunteer activity may also be regarded as such a bridge and hence encouraged.

Private disability insurance programs, such as employer-based short-term and long-term disability, tend to scrutinize extensively their recipients for their ability to return to work. This scrutiny may result in the termination of benefits for recipients who engage in volunteering. On the other hand, this disincentive effect may be offset by the fact that private disability insurers also have a strong profit maximizing incentive to allow persons with disabilities to "test the waters" by volunteering in the hope that this may facilitate their return to work.

While welfare, employment insurance and private disability insurance may have offsetting incentive effects with respect to volunteering, other programs are neutral in their incentive effects and hence are expected to also have no effect on volunteering after controlling for the other determinants of volunteering. The *Guaranteed Income Supplement* (GIS) is a supplement to Old Age Security payments that low-income Canadians over age 65 receive. The age restrictions in our sample mean that individuals who receive this are spouses of persons who are older than 65 years of age. In neither program would volunteering be interpreted as being able to work and hence jeopardizing receipt of benefits. The same applies to *veterans' pensions* in that recipients are not scrutinized for being able to work and hence volunteering would not jeopardize benefits.

The C/QPP early retirement benefits require that the person "substantially cease working" which is interpreted as earning no more than one-quarter of the average industrial wage. Although the early retirement benefits do not explicitly exempt volunteer activity, they do specifically exempt a small amount of paid work suggesting that volunteering is at least allowed and possibly encouraged to facilitate the transition to retirement

## Framework for Analysis and Research Design

Since volunteering is a form of work, our specification of the determinants of volunteering begins with the standard labour supply model and its emphasis on such factors as the benefits derived from work and the opportunity cost of time. Particular attention is paid to the nature and severity of the disability and to the nature of its limitations, as these may raise/lower the costs of any activity and hence reduce/increase the decision to volunteer, just as they would affect the decision to do paid work in the labour market. As indicated earlier, some income support programs for persons with disabilities may have disincentives or incentives to discourage or encourage volunteer work.

Our empirical results are interpreted through a broad perspective that incorporates the concept of social capital (Coleman, 1988; Putnam, 1995), the household production function perspective and to a lesser extent the labour supply perspective. The social capital and household production views on unpaid work are sometimes overlooked in conventional economic interpretations of volunteerism. Because of the variety of frameworks employed, we identify the underlying variables used in the pa-

per and connect them to their theoretical channels of influence as well as establishing anticipated direction of effects with respect to volunteer behaviour. These links are all summarized in Table 1.

#### **Social Capital Perspective**

The social capital orientation, as originally suggested by Coleman (1988), treats social relations like any other form of capital, making social capital productive in the sense that it facilitates the completion or attainment of certain objectives. However, unlike physical or human capital, which is wholly observable in some tangible outcome (household income) or an easily measurable form (i.e., number of years of schooling), social capital is much less tangible because it exists in the relations among persons. In more precise terms, social capital is composed of social resources that can be drawn upon when needed, just as a pool of savings or 'capital' can be accessed by individuals.

In relation to our focus on persons with disabilities, the social resources include: (1) trust within a social structure of which a person with disabilities is a member; (2) use of information channels drawn from the social relations of a person with disabilities; (3) an adherence and belief in social norms regarding the importance of volunteering; (4) and the number and strength of formal/informal social ties and networks. Although often attributed to individuals, other relationships (e.g., marriage partnerships), actors (e.g., firms, community groups, and organizations) as well as geographic units (e.g., neighbourhoods, regions, and countries) can possess social capital. In this paper, social capital is treated as a resource available to persons with disabilities and present where these individuals live and/or volunteer. Social capital in this instance informs individuals of the positive externalities arising from the donation of time towards a non-remunerative goal. In this framework, the more "social capital" available to an individual with a disability, the less likely it is that time will be hoarded for immediate pecuniary purposes. These conditions enhance the likelihood of a person volunteering either in their local community or engaging with institutions related to their disability peer group.

What would the interface between the social capital, disability and volunteerism literatures look like? In terms of increasing the probability of volunteering, one can think of two (outwardly at least) identical disabled persons—where age, income, and nature of disability are all the same—differing only with respect to the social capital available to them and thus differing to the extent to which each volunteers. Social capital could be in the form of *educational attainment*. Despite its typical association with signalling and the human capital perspective, recent research has begun to establish the social and causal effects associated with higher education (Card, 1999) in that the more educated (university graduates especially) are more prone to vote, care for the environment and volunteer (Dee, 2004).

Social capital can also be associated with a household composed of *young children*, which has been found to thicken parental engagement with civil society through community participation and information about outlets for volunteerism (Bassani, 2007; Dunifon and Kowaleski-Jones, 2002). Likewise, social capital and its relation to volun-

TABLE 1 Theoretical Channe	TABLE 1 Theoretical Channels and Expected Signs for Variables of Interest	
Underlying Variable Benefit program	Theoretical Channel Labour supply perspective predicts benefit programs will have incentives/disincentives to engage in labour market activity.	Expected Effect on Volunteering Workers compensation strongly negative C/QPP disability strongly positive Remaining categories ranked from least to most likely to influence volunteerism.
Gender	Warm glow benefits may differ across males/females, with women perceiving/deriving greater benefits from volunteerism.	Negative for males
Education	Social capital and household production function all predict greater perceived benefits accrue from volunteering. Human capital predicts productivity of volunteers is greater the more educated.	Strongly positive
Social norm alignment with volunteer effort	Social capital channel predicts that stronger alignment with norms shared by group will be associated with greater likelihood of participation.  More time having a disability increases social norm alignment.  Labour supply perspective highlights possible association with disability severity thereby restricting ability to volunteer time. Some of this picked up in our severity measures below.	Weakly positive
Life-cycle demands	The household production function perspective predicts opportunity cost of time influences volunteer efforts. Time is most abundant (hence unpaid work least costly) at the youngest (15-24) and eldest (55-64) tails of the life-cycle. Younger respondents may also have less physical difficulty volunteering.	U-shaped effect with middle age respondents (35-44 and 45-54) least likely to volunteer
Marriage	Control variable but with some evidence of social capital influence positively affecting volunteerism.	No clear expected direction
Low income	Control variable but with some evidence of social capital influence positively affecting volunteerism. Household production effect also positive in that lower income lowers opportunity cost of time for volunteering.	Weakly positive
Homeownership	Social capital investments are greater for homeowners as they are more likely to exercise voice and volunteer time to improve local conditions. Household production approach views homeownership as a proxy for wealth, thus having a positive effect with respect to the affordability of donating volunteer time.	Strongly positive
Household income	Household production approach predicts that greater household income is positively associated with charitable giving in both time and money.	Positive
Child related activities	Social capital perspective predicts identification with volunteer effort to increase participation. Many volunteer outlets are related to youth and school related activities of own children.  Labour supply and household production approaches emphasise time constraints with one activity substituting of another.	Inverted U-shape effect Positive effect but with some optimum probable, too much or too little time in childcare reducing volunteering.
Nature and severity of disability	Controls for nature and severity of disability will affect propensity to engage in volunteer activity.	Indeterminate with respect to nature of disability Negative with respect to severity. More severe limita- tions will lower volunteer behaviour.

teerism could be in the form of *home ownership* which encourages investment in local social ties and local amenities, increases individuals' incentive to improve their local community and reduces the likelihood of outward mobility (DiPasquale and Glaeser, 1999). To paraphrase Hirschman (1970), in the absence of an easy "exit," active participation or "voice" becomes the predominant means of improving local conditions.

Finally, social capital could be in the form of a *disability that is present since birth*, increasing the likelihood that the disabled individual would have formed attachments based on trust and understanding with individuals like him or her. Disabilities present since birth are likely to sensitize the individual to the challenges of persons with similar disabilities, simultaneously aligning social norms and increasing the likelihood of participation in volunteering efforts for that group. What is interesting is how this final measure, from a pure labour supply perspective, could be linked with the opposite prediction in that it could be capturing the severity of the disability and hence lowering the probability of volunteering. Fortunately, our data (described subsequently) is such that it allows us to control for the nature and severity of the disability, which would otherwise be misattributed by the disability presence variable.

#### **Household Production Perspective**

The household production function perspective incorporates the fact that the decision to engage in charitable activity can be based on various factors (Andreoni, 1990; Rose-Ackerman, 1996; Woolley, 2001, 2003). Charitable activity is "produced" via inputs of volunteer time, highlighting the importance of substituting time over different stages of the lifecycle. Thus we expect that individuals donate their time when it is least costly for them to do so (e.g., when they are young 15–24 or older 55–64) and that the ages when work and family obligations peak and time is most scarce (e.g., from young adulthood 24–44 to middle ages 45–54) would also coincide with the least likely life-cycle stage of volunteerism.

The satisfaction of volunteering can clearly have an intrinsic consumption value—yielding a "warm glow"—to those volunteering. Some researchers have found that *gender* plays a role in this respect, with the 'warm glow' more likely associated with females than males (Simmons and Emanuele, 2007). Volunteerism can also have an investment component in terms of mutual gift giving, reputation, standing in the community, constituency building, resume building, networking and experience (Apinunmahakul and Devlin, 2008). In the case of the disabled, this could involve testing the waters before engaging in formal work.

The household production function approach recognizes that volunteering is affected by the extent to which different persons within the household allocate their time to labour market versus household activity. Those who require more of their time at home (e.g., for the care of very young children) are less likely to have time to volunteer. Working in the other direction, however, is the fact that some volunteer activity may be complementary to other activities associated with having children within the family, such as school, club or team activities. These activities in addition have social capital components mentioned above, which reinforce the perceived

positive 'returns' (social or warm glow) to volunteering (Apinunmahakul, Barham and Devlin, 2008). The time spent on childcare activities may therefore display some optimum with respect to volunteerism, since too much time spent on childcare implies less time left for volunteering, but just enough time may be a signal that volunteering efforts (e.g., coaching in the little league) are complementary to childcare activities.

The household production function perspective also emphasizes that variables such as a person's expected income can have complicated effects on volunteering. As in the conventional labour supply model, persons with high potential wages may be less likely to volunteer because of the high opportunity cost of their time. However, the "production function" perspective also highlights that their high expected wage means that they may be more "productive" in certain types of volunteer activity and hence may volunteer more, or be pressed into volunteer service where their skills are important (Freeman, 1996). These 'productivity' effects may be better captured, however, by the *educational attainment* of the individual. Moreover, because of the offsetting predictions of individual income and wage measures, our selected measure of income in this respect is *household income* since it has a less ambiguous prediction with respect to volunteerism. Greater household income would function as an income (as opposed to substitution) or wealth effect, enabling the disabled to afford the consumption value of volunteering and/or the investment of time to volunteer.

### **Data and Empirical Specification**

The estimates in this paper are based on Statistics Canada's *Participation and Activity Limitation Survey* (PALS). The PALS uses the 2001 Census of Canada as a sampling frame and a series of disability filter questions to select potential respondents. Importantly for our purposes, the PALS contains information on volunteering as well as detailed information on the nature of the individual's disabilities as well as the effect of their disabilities on household and labour market activities—variables that are typically unavailable in most datasets. The PALS also has a wide range of personal and demographic characteristics that can be important control variables, and that yield interesting information in their own right. We restricted the sample to individuals aged 15–64 who were non-employed.

The outcome variable of interest indicates whether the individual participated in a volunteer activity in the 12 months prior to the survey. This dummy variable takes the value 1 if the individual engaged in any of the eight specified areas of volunteer activity in the survey and zero otherwise. These eight areas reflect specific questions over the nature of the respondent's 'formal' participation in volunteer activity. These include: (1) help to organize or supervise activities or events for an organization; (2) canvass, campaign or fund raise as an unpaid volunteer; (3) sit as an unpaid member of a board or committee; (4) do any consulting, executive, office or administrative work as a volunteer; (5) provide information, help to educate, lobby or influence public opinion on behalf of an organization; (6) teach, coach, provide care or friendly visits through an organization; (7) collect, serve or deliver food or other goods as a

volunteer through an organization; and, (8) do any other unpaid volunteer activities (including help given to schools, religious organizations and community organizations).

We estimate the probability of engaging in volunteer activity with a probit model. The probit is frequently used to estimate outcome measures that are binary in nature. We specify the probability of engaging in volunteer work as a function of a number of theoretically relevant variables grouped as: income maintenance or benefit programs they received income from (the focus of our analysis) and that can affect their incentive to volunteer (workers' compensation, welfare, employment insurance, private disability insurance, Guaranteed Income Supplement, veterans pensions, C/QPP early retirement, and C/QPP-disability); individual characteristics (gender, marital status, age, education, poverty status and whether their disability was present at birth); and household characteristics (homeowner, family income, time spent on childcare). The rich and extensive information on the person's disabilities and health problems is also used to create a number of control variables typically not measured in conventional datasets: whether they had multiple health problems; the nature of their health problems; their severity as indicated by whether their health problems disadvantaged them at work; and the type of activity limitation. The estimates on these variables will be interpreted in terms of whether they provide support for any of the different perspectives that we consider.

### **Descriptive Statistics and Empirical Results**

We present summary statistics on the dependent variable and the explanatory variables in Table 2. All the variables in our analysis are dummy variables so the sample mean is the sample proportion. Respondents are reasonably well distributed across the various categories such as gender, education, marital status, income and time spent on childcare. Twenty-two per cent had the disability since birth and 35 per cent fall below the low-income cut-off. Forty-eight per cent of the respondents had more than one health problem, with musculoskeletal and soft tissue problems and the "other grouping" being by far the most common problems. Limitations arising from pain, mobility and agility were the most common activity limitations. About 26 per cent of the respondents reported that their disability disadvantaged them mildly at work, 39 per cent moderately and 35 per cent severely.

Interestingly, 33.7 per cent of our sample of persons with disabilities volunteered. Gomez and Gunderson (2003) examined volunteering in Canada with an earlier wave of the GSS and found a sample mean of 21.2 per cent. Their sample did not distinguish between persons with and without disabilities. Consequently, the difference in sample means between this paper and Gomez and Gunderson (2003) suggests that persons with disabilities volunteer more than persons without disabilities. In 2001, 3.6 million Canadians (or 12 per cent of the population of Canada) reported having activity limitations (Human Resources Development Canada, 2003); this, combined with their high rate of volunteering, suggests that the volume of volunteer activity undertaken by persons with disabilities in Canada is quite substantial.

TABLE 2 Summary Statistics		
	Mean	Standard Deviation
Volunteered	0.337	0.473
Benefit Programs		
Workers' compensation	0.102	0.303
Welfare	0.265	0.442
Employment insurance	0.168	0.374
Private disability insurance	0.097	0.296
Guaranteed income supplement	0.018	0.134
Veteran pension	0.057	0.232
C/QPP early retirement	0.051	0.221
C/QPP disability	0.094	0.291
Individual Characteristics		
Male	0.553	0.498
[Less than high school]	0.376	0.484
High school graduate	0.272	0.445
Trade certificate	0.145	0.352
Post-secondary diploma	0.131	0.338
University degree	0.076	0.266
Disability present at birth	0.215	0.411
[Age 15-24]	0.285	0.451
Age 25-34	0.169	0.375
Age 35-44	0.297	0.457
Age 45-54	0.155	0.362
Age 55-64	0.094	0.291
Married	0.434	0.496
Below low income cut-off	0.345	0.476
Household Characteristics		
Homeowner	0.636	0.481
[Income less than 10,000]	0.516	0.500
Income 10,000-19,000	0.244	0.430
Income 20,000-29,000	0.105	0.307
Income 30,000-39,000	0.061	0.239
Income 40,000-49,000	0.039	0.193
Income greater than 50,000	0.035	0.185
[No time on childcare]	0.639	0.480
1-4 hrs on childcare	0.086	0.273
5-14 hrs on childcare	0.081	0.225
15-29 hrs on childcare	0.054	0.348
30 plus hrs on childcare	0.140	0.347

	Mean	Standard Deviation
Health Problem Controls		
More than one health problem	0.483	0.500
Specific Health Problem		
Musculoskeletal and soft tissue		
problems	0.441	0.497
Mental disorders	0.248	0.432
Vision problems	0.041	0.199
Hearing problems	0.067	0.251
Nervous disorders	0.107	0.310
Heart and circulatory diseases	0.049	0.216
Respiratory diseases	0.039	0.193
Diseases of the digestive system	0.037	0.188
Arthritis and rheumatism	0.130	0.337
Neoplasms	0.009	0.095
Diseases of the endocrine system	0.027	0.163
Other	0.532	0.499
Work Disadvantage		
[Mild]	0.261	0.439
Moderate	0.389	0.488
Severe	0.350	0.477
Type of Activity Limitation		
Agility limitation	0.596	0.491
Mobility limitation	0.632	0.482
Pain limitation	0.757	0.429
Hearing limitation	0.179	0.384
Vision limitation	0.161	0.368
Speech limitation	0.161	0.368
Other type of limitation	0.491	0.500
Sample Size		876

Our discussion of the empirical results will focus on the marginal effects (i.e., the changes in the probability of volunteering) in Table 3 as derived from the probit coefficients. The magnitude of these effects should be interpreted relative to the average probability of volunteering, which is 34 per cent in our sample.

	Coefficient Estimate	Marginal Effect	t-statistic
Benefit Programs		,	
Workers' compensation	-0.491***	-0.157***	-2.66
Welfare	-0.049	-0.017	-0.38
Employment insurance	0.089	0.032	0.65
Private disability insurance	0.015	0.006	0.09
Guaranteed income supplement	0.252	0.095	0.7
Veteran pension	0.118	0.043	0.59
C/QPP early retirement	0.147	0.054	0.63
C/QPP disability	0.475***	0.181***	2.82
Individual Characteristics			
Male	-0.167	-0.060	-1.60
[Less than high school]			
High school graduate	0.430***	0.159***	3.45
Trade certificate	0.388**	0.146**	2.55
Post-secondary diploma	0.319**	0.120**	2.00
University degree	0.763***	0.294***	3.96
Disability present at birth	0.127	0.046	0.97
[Age 15-24]	_	_	-
Age 25-34	-0.181	-0.063	-1.14
Age 35-44	-0.198	-0.069	-1.29
Age 45-54	-0.418**	-0.138**	-2.19
Age 55-64	-0.048	-0.017	-0.21
Married	-0.164	-0.058	-1.36
Below low income cut-off	0.090	0.033	0.73
Household Characteristics			
Homeowner	0.218*	0.077*	1.94
[Income less than 10,000]			
Income 10,000-19,000	0.155	0.056	1.27
Income 20,000-29,000	0.079	0.029	0.44
Income 30,000-39,000	0.599***	0.231***	2.68
Income 40,000-49,000	0.314	0.119	1.18
Income greater than 50,000	0.431	0.165	1.58
[No time on childcare]			
1-4 hrs on childcare	-0.126	-0.044	-0.7
5-14 hrs on childcare	-0.086	-0.030	-0.47
15-29 hrs on childcare	0.625***	0.241***	2.90
30 plus hrs on childcare	0.107	0.039	0.69

	Coefficient Estimate	Marginal Effect	t-statistic
Health Problem Controls			
More than one health problem	0.192	0.069	0.88
Specific Health Problem			
Musculoskeletal and soft tissue problems	-0.063	-0.022	-0.39
Mental disorders	0.051	0.018	0.30
Vision problems	0.360	0.137	1.36
Hearing problems	-0.145	-0.050	-0.60
Nervous disorders	-0.033	-0.012	-0.18
Heart and circulatory diseases	-0.186	-0.064	-0.75
Respiratory diseases	0.371	0.141	1.43
Diseases of the digestive system	-0.296	-0.098	-1.06
Arthritis and rheumatism	0.004	0.001	0.02
Neoplasms	-0.833	-0.226	-1.53
Diseases of the endocrine system	1.098***	0.416***	3.47
Other	-0.158	-0.057	-0.87
Work Disadvantage			
[Mild]			
Moderate	-0.063	-0.023	-0.52
Severe	-0.290**	-0.102**	-2.15
Type of Activity Limitation			
Agility limitation	-0.068	-0.025	-0.54
Mobility limitation	0.005	0.002	0.04
Pain limitation	0.207	0.072	1.49
Hearing limitation	0.204	0.075	1.38
Vision limitation	-0.105	-0.037	-0.75
Speech limitation	-0.121	-0.042	-0.83
Other type of limitation	-0.042	-0.015	-0.34
Sample Size			876
Value of Log-Likelihood Function	-502.12		

Notes: The excluded reference category is presented in square brackets. Single asterisk denotes statistically significant at 10 per cent level, double asterisk at the 5 per cent level, and triple asterisk at the 1 per cent level.

The estimates are consistent with the anticipated incentive effects of the different income support programs for persons with disabilities. Persons with disabilities on workers' compensation are almost 16 percentage points *less* likely to volunteer compared to other non-employed persons with disabilities. This is a statistically significant and large (47 per cent) decrease in the probability of volunteering relative to the average rate of volunteering of 34 per cent. This strong deterrent effect highlights the substantial scrutiny and risk of benefit termination in this program.

In contrast, in the C/QPP disability program where volunteering is explicitly allowed or encouraged without jeopardizing benefits, persons with disabilities are approximately 18 percentage points *more* likely to volunteer compared to persons with disabilities not on those programs. This is a statistically significant and large (54 per cent) increase relative to the mean of 0.34.

No statistically significant relationship was found for the other income support programs for the disabled that either had potentially offsetting incentive effects (welfare, unemployment insurance and private insurance programs) or had no incentive effects on volunteering (GIS, veteran's disability, and C/QPP early retirement). This is consistent with the proposition that the receipt of these benefits is not jeopardized by volunteering.

Overall, the results for the different income support programs provide empirical confirmation for the notion that specific program design features can have important incentive effects for volunteering on the part of persons with disabilities. Among persons with disabilities, volunteering can be encouraged if it is explicitly allowed to serve as a bridge to employment without jeopardizing benefits. In contrast, volunteering is (likely unintentionally) discouraged if it runs the risk of being interpreted by program administrators as a sign that the person could engage in paid employment. In light of the potential for volunteering to enable persons with disabilities to "test the waters" as a possible bridge to employment, explicitly exempting volunteering from being interpreted as a sign of being able to return to work merits consideration on the part of workers' compensation program administrators. These findings also confirm that in modeling the determinants of volunteering (in general or for any subset of the population) a consideration of hidden (or not so hidden) incentives should be taken into account. The significance and empirical importance of our findings in relation to other more traditional volunteerism variables (discussed below) bears this last point out.

We did not find a statistically significant gender difference in the probability of volunteering (t-ratio of 1.6). Earlier studies (Day and Devlin, 1996; Devlin, 2001; Vaillancourt, 1994; Gomez and Gunderson, 2003) have found that males are less likely to volunteer, which likely reflects the higher opportunity cost of volunteering for males given their generally higher wages.

Volunteering increases substantially with higher levels of education and it is especially high for persons with a university degree. Even though they tend to have a higher opportunity cost of time, the household production function perspective emphasizes that higher educated persons are also more likely to be "productive" at volunteering, especially formal volunteering for organizations. As well, their education may have exposed them to social issues and causes that are dealt with through the social capital formation associated with volunteering. Unfortunately, we cannot distinguish between these alternative channels with our data. Consequently, our positive estimates for the effect of education on volunteering are consistent with the human capital, social capital and household production approach. Earlier Canadian studies, such as Day and Devlin (1996), Devlin (2001), Gomez and Gunderson (2003) and Vaillancourt (1994), have also found that education has a large impact on the propensity of volunteering.

We did not find a strong relationship between volunteering and age. Volunteering is less likely to occur for the middle age group of 45–55 relative to the 15–24 age group. This is consistent with the household production perspective on volunteering. However, we do not find that there are statistically significant increases in the probability of volunteering for the older age group.

We did not find any statistically significant relationship between volunteering and marital status. We also found that the estimate on the dummy variable indicating whether the recipient fell below the low-income cut-off was not statistically significant. This suggests that poverty does not diminish the propensity of disabled persons to engage in volunteer activity. The variable controlling for whether the disability was present at birth also was not statistically significant.

Home owners are more likely to volunteer than are non-home owners. This is a finding common to other studies and reinforces the view that being a home owner appears to increase the use of "voice" and investments in social and community capital, as the literature suggests (Gomez and Santor, 2001). However, the positive effect of home ownership on volunteering is also consistent with a wealth effect from the household production perspective.

There is generally not a strong relationship between volunteering and household income. Since household income includes both earnings and non-earned income, this could reflect the offsetting income and substitution effects. That is, households with higher income can afford the "normal" good of volunteering and its resulting "warm glow." But they also likely have higher earnings and this increases the opportunity cost of volunteering, inducing them to do less time intensive activities such as volunteering (substitution effect in household *consumption*) and to substitute money for their more expensive time (substitution effect in household *production*) in producing a given level of charitable activity. This is consistent with the household production perspective on volunteer activity.

Most of the estimates on the controls for childrearing responsibilities were not significant. However, persons with disabilities who spend 15–29 hours on childrearing duties are substantially more likely to volunteer, relative to those with no time spent on childrearing. Many volunteer activities are associated with the raising of children in the broader community so that the reciprocal or collective benefits that come from volunteering when having to raise children may offset some of the domestic time pressures. Volunteering and bringing up a child are complementary activities in spite of the time pressures of child rearing.

Having more than one health problem does not have a significant effect on volunteer activity. However, being severely hindered by a disability has a significant negative effect on volunteering, likely reflecting the difficulty of engaging in any activity for the severely disabled. Our finding for severity on volunteer activity has parallels in studies of disabilities on paid labor market activity (Hyatt, 1996; Campolieti, Gunderson and Krashinsky, 2007).

None of the estimates on the controls for the type of health problem or activity limitation have statistically significant effects.

## **Concluding Remarks**

Our main policy conclusion is that income support programs accessed by persons with disabilities can have substantial incentive effects on deterring or encouraging

volunteer activity. The deterrent effect occurs in programs when the recipients are monitored for their ability to work, and volunteering could serve as a signal that the disabled person is able to engage in activities that could resemble work and thereby jeopardize their receipt of the income support. This was the case with workers' compensation which has more stringent monitoring in terms of work ability and where volunteering could easily be interpreted as being able to return to work, especially in "light" duties. In contrast, where volunteering is specifically allowed and actively encouraged, as in CPP-D, it is much more likely to occur.

In essence, the negative or positive incentives embedded in income support programs for persons with disabilities can discourage or encourage volunteering. Since volunteering can be a viable way for persons with disabilities to "test the waters" for engaging in more formal work activities, these incentive effects merit more attention and could be used as an additional policy lever in disability policy.

Future research should try to determine the extent to which worker adaptation and more flexible benefits payments that explicitly recognize the value of volunteer activity can improve the volunteer propensity of persons with disabilities. This is likely to be more important because recent policy initiatives are increasingly focused on improving the labour market participation of persons with disabilities. A better understanding of the long-term impacts of these alternatives can be used to inform future legislative efforts that are directed at improving the employability of persons with disabilities. One limitation of our study is that our data were limited in our ability to distinguish between the household production and the social capital perspective in our estimates. This suggests a need for perhaps a richer data set that has more distinct measures of social capital and household production variables, but also rich information on disability status. Finally, the creation of a survey series that provides researchers with a comparable question by which to measure the propensity of different subgroups to volunteer would also be a major improvement over existing data.

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#### RÉSUMÉ

# Bénévolat, programme de soutien du revenu et personnes souffrant d'un handicap

Nombreuses sont les préoccupations d'importance politique qui incitent à porter un regard sur les activités de bénévolat des personnes souffrant d'un handicap. S'ajoutent aussi des intérêts d'ordre académique. En premier lieu, on observe une croissance fulqurante du nombre de personnes qui reçoivent des prestations d'invalidité en vertu des programmes publics et un déclin de l'emploi des personnes handicapées. En deuxième lieu, le fait d'embaucher des personnes handicapées pour occuper un emploi réel est maintenant considéré comme important, non seulement en termes de réduction des personnes inscrites à un régime de soutien du revenu, mais également en termes d'une meilleure intégration à la vie sociale. Sans surprise, une attention accrue vient récemment d'être accordée à diverses initiatives en matière de législation pour faciliter une participation au marché du travail des personnes handicapées. De telles initiatives sont de l'ordre d'une diminution des incitations à fuir le travail, qu'on retrouve bien ancrées dans différents programmes de soutien du revenu, tout en réduisant les obstacles à un retour au travail moyennant un accommodement raisonnable de la part des employeurs, en facilitant l'adaptation des travailleurs handicapés à leurs limitations (par exemple, les changements d'emploi, les changements d'employeurs, le fait de modifier le type de travail à accomplir ou la somme de travail à exécuter); également, en atténuant l'effet du handicap par une réadaptation institutionnelle, et en améliorant l'habileté des handicapés à retourner sur le marché du travail par l'offre d'une formation additionnelle aussi bien que par l'aide fournie au moment de la recherche d'un emploi.

Un secteur négligé, et c'est justement l'intérêt principal de cette étude, est celui de l'action bénévole chez les handicapés, à la fois à titre de tremplin possible vers l'emploi et à titre d'une activité qui facilite l'intégration sociale. L'utilité du bénévolat comme un pont vers l'emploi a déjà été mise en évidence, plus particulièrement, quand on pense au retour financier inhérent au temps consacré au bénévolat. Ce dernier peut aussi servir de passerelle à une implication plus intense sur le marché du travail dans le cas de nombreux groupes qui normalement éprouvent des difficultés dans leur intégration au marché du travail, tels que les jeunes (le cas de la transition de l'école au travail), les

travailleurs âgés (la transition du travail à la retraite), les femmes et les chômeurs (leur réintégration sur le marché du travail).

Cette étude utilise les données de l'Enquête sur la participation et les limitations d'activités (EPLA) de Statistique Canada en vue de chercher à identifier les raisons de l'activité du bénévolat chez les personnes handicapées. L'enquête présente un ensemble unique de données qui s'intéressent exclusivement aux personnes handicapées, ayant des limitations au plan de leur action, et aux mesures de l'activité de bénévolat. Elle fournit également de l'information sur la démographie, le degré d'instruction, les caractéristiques eu égard au revenu et au ménage. D'une manière plus significative, l'enquête contient aussi de l'information sur les programmes de soutien du revenu qui procurent un certain montant aux personnes souffrant d'un handicap. La règle qui gouverne l'obtention d'avantages dans ces programmes peut modifier les incitations au bénévolat chez les individus.

Nous regardons l'activité bénévole des personnes, avant tout, sous l'angle d'une vision économique, en procédant à une interprétation de nos évaluations avec une perspective de capital social et de production domestique. Cet essai constitue la première étude cherchant à (1) identifier les incitations et les freins au bénévolat provenant des différents programmes de soutien du revenu s'adressant aux handicapés; (2) à évaluer si ces raisons peuvent rendre compte ou non des différences dans la propension à s'adonner à des activités de bénévolat chez les personnes handicapées.

Notre principale conclusion en termes de politique publique est à l'effet que les programmes de soutien du revenu accessibles aux personnes handicapées peuvent avoir un impact majeur sous l'angle des incitations ou non au bénévolat. L'effet de dissuasion se présente dans les programmes lorsque les récipiendaires sont orientés en fonction de leur habileté à travailler. Le bénévolat peut alors servir de signal à l'effet que la personne avec handicap est capable de s'adonner à une activité qui puisse ressembler à du travail et compromettre ainsi son accès au soutien du revenu. Ce fut le cas avec le programme d'indemnisation des travailleurs qui comportait un suivi plus rigoureux en termes d'aptitudes au travail et où le bénévolat pouvait être considéré comme une capacité de retour au travail, plus particulièrement dans des « travaux légers ».

Par contre, là où le bénévolat est particulièrement permis et encouragé activement, tel qu'on le voit dans le Programme de prestations d'invalidité du Régime de pensions du Canada, la probabilité qu'il survienne est beaucoup plus élevée. Dans les programmes de soutien du revenu, qui ont contrebalancé les effets en termes d'incitations (l'aide sociale, l'assurance emploi, les programmes privés d'assurance) ou qui ne contiennent pas d'incitations au bénévolat (le supplément de revenu garanti, la pension d'invalidité des anciens combattants, la retraite anticipée prévue aux régimes provinciaux et fédéraux de pension), aucun effet significatif n'a été observé.

De par leur nature même, les incitations, qu'elles soient positives ou négatives, imbriquées dans les programmes de soutien s'adressant aux personnes handicapées peuvent encourager le bénévolat ou l'en détourner. Puisque le bénévolat peut être une manière viable pour les personnes handicapées de sonder le terrain au moment de s'engager dans des activités de travail plus formelles, ces effets incitatifs méritent plus d'attention et ils peuvent servir de levier politique additionnel dans l'élaboration de politiques publiques en matière d'incapacité.

Des recherches additionnelles devraient préciser dans quelle mesure ou non l'adaptation des travailleurs et des prestations plus flexibles tenant compte de la valeur du

bénévolat pourraient améliorer la propension au bénévolat chez les personnes souffrant d'un handicap. Ceci s'avérerait d'autant plus important à cause des initiatives récentes en matière de politiques publiques qui se centrent de plus en plus sur une amélioration de la participation au marché du travail. Une meilleure compréhension des effets à long terme de ces choix pourrait servir à structurer des efforts subséquents en matière de législation susceptible de bonifier l'employabilité des personnes handicapées. Une des lacunes de notre étude réside dans le fait que nos données réussissent mal, à l'étape des évaluations, à établir une distinction entre la production domestique et la perspective du capital social. Cela indique la nécessité de recourir peut être à un ensemble plus riche de données qui permettrait une distinction entre les mesures des variables liées au capital social, d'une part et la production domestique, d'autre part. Serait également désirable une information plus explicite sur la nature de l'incapacité. Enfin, la mise sur pied d'une série d'enquêtes fournissant aux chercheurs, qui ont une semblable préoccupation, des mesures de propension au bénévolat de la part de différents groupes contribuerait aussi à une bonification importante des données existantes.

MOTS-CLÉS: Politique d'assurance-invalidité, employabilité, capital social, production domestique, prestations d'invalidité adaptées

#### **RESUMEN**

# Voluntariado, programas de apoyo al ingreso y personas discapacitadas

Basándonos en la Encuesta Participación y limitación de actividad (EPLA), estudiamos la propensión de las personas discapacitadas a implicarse en actividades voluntarias. Nuestro enfoque principal concierne los efectos de los diferentes programas de apoyo al ingreso respecto a la participación de personas discapacitadas en actividades voluntarias puesto que los programas de apoyo al ingreso puede variar en cuanto al tratamiento del trabajo no remunerado. Por ejemplo, los programas de compensación de trabajadores incluyen fuertes desincentivos al voluntariado mientras que los programas públicos de seguro de discapacidad promueven explícitamente el trabajo no remunerado. Constatamos que la compensación de trabajadores está asociada con la disminución de la probabilidad de voluntariado mientras que el seguro publico de discapacidad está asociado con el incremento de la propensión al voluntariado. Se discute la relevancia de estos resultados respecto a las teorías sobre el voluntariado y las políticas públicas.

PALABRAS CLAVES: políticas sobre discapacidad, capacidad de empleo, capital social, producción domestica, pago de beneficios flexible