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Charity, Volunteering Type and Subjective Wellbeing

 Samuelson Appau¹ · Sefa Awaworyi Churchill¹ 

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Abstract We examine the impact of volunteering and charitable donations on subjective wellbeing. We further consider if the model of the volunteering work (formal vs. informal) and the geographical location of the charity organisation (local vs. international) people donate to has any impact on subjective wellbeing. Using UK's Community Life Survey data, we find that volunteering and engagement in charity are positively associated with subjective wellbeing, measured by individual life satisfaction. We show that while there is a positive effect of volunteering and charity on life satisfaction, the level of utility gained depends on the type of charity or volunteering organisation engaged with (i.e. local or international). Specifically, donating to local (neighbourhood) charities as opposed to international/national charities is associated with higher wellbeing. Similarly, engaging in informal volunteering, compared to formal volunteering, is associated with higher wellbeing. To explain our results, we use the construal-level theory of psychological distance, which suggests that people think more concretely of actions and objects that they find spatially and socially close.

Keywords Charity · Volunteer · Wellbeing · Life satisfaction · Psychological distance

JEL Classification I31

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Introduction and Background

Researchers have long been interested in understanding the factors that contribute to people's sense of subjective wellbeing (SWB).¹ For example, research has found that factors such as income, education, religiosity and social capital, among others, positively influence self-reported wellbeing (see, for example, Awaworyi Churchill and Mishra 2017; Diener and Oishi 2000; Easterlin 1995). These findings have been consistent across both developing and developed countries.

Another stream of research has also shown that volunteering work and charitable donations also increase subjective wellbeing. This stream of research suggests that people who give their time and money towards volunteering and charitable causes report higher life satisfaction, self-esteem, sense of control over life, physical health, and are less likely to suffer depression (see, for example, Bekkers and Wiepking 2011; Choi and Kim 2011; McMunn et al. 2009; Morrow-Howell et al. 2003; Wilson 2000). This consensus in the literature converges with related findings on the positive relationship between subjective wellbeing and generosity (Lane 2017). Thus, volunteering/charity donations and SWB affect each other positively.

However, charities differ in size (e.g. small, medium, large), geographical location (local, international) and function (animal welfare, human rights and poverty eradication). Volunteering can also be classified as either formal (organisation-based) or informal (outside of formal organisations) (Lee and Brudney 2012). These different

¹ In this study, our main measure of subjective wellbeing is self-reported life satisfaction although we also use happiness a proxy for wellbeing in robustness checks.

charity and volunteering types operate differently, have different goals, provide different levels of access and engagement, and have different impact on individuals and other stakeholders (Dovidio et al. 2017; Wilson 2000).

Previous research, however, has not fully explored if the type of volunteering and charity organisations that people engage with specifically affects SWB differently. The existing literature has examined the factors that influence individual decisions to engage in formal or informal volunteering (e.g. Plagnol and Huppert 2010; Van Tienen et al. 2011; Wang et al. 2017). For example, Mitani (2014) found that while education influences formal volunteering more than informal volunteering, religiosity and empathy influences both formal and informal volunteering. Other research focuses on conceptual and methodological aspects of formal and informal volunteering (Finkelstein and Brannick 2007; Handy et al. 2000; Stebbins 1996). However, to the best of our knowledge, prior research has not focused on whether participating in formal or informal volunteering have differential effects on SWB.

This also applies to charity type. Research on charity types focus on factors that influence people's decisions to donate to certain charities and not to others (See Bekkers and Wiepking 2011 for a review). The literature also examines people's response to charity advertisement, and how to develop marketing strategies for different types of charity (see, for example, Drollinger 2018; Pope et al. 2009; Strahilevitz and Myers 1998). Although evidence from these studies suggests that charity donations positively affect SWB, some gaps still exist in the literature on whether donations to certain types of charity have any differential impact on SWB.

The present study re-examines the relationship between volunteering and SWB and further considers if the model of the volunteering work (formal vs. informal) and the geographical location of the charity organisation (local vs. international) people donate to has any impact on subjective wellbeing. We ask: (1) Does informal volunteering lead to greater SWB than formal volunteering, or vice versa and (2) Does donating to a local charity lead to greater SWB than international charity, or vice versa? Towards addressing these research questions, we employ the construal-level theory to develop two hypotheses that we test using data from the UK's Community Life Survey.

We further address issues of endogeneity which have not received much attention within this literature. For instance, while volunteering affects wellbeing, it is likely that wellbeing could also affect volunteering. It is likely that individuals with higher levels of wellbeing would be

more inclined to join volunteering groups to give back to society. Further, it is also likely that individuals with lower levels of wellbeing might seek to join volunteering organisation to promote their self-worth as well as satisfaction about themselves and their lives. This reverse causality raises concerns of endogeneity, which have not been resolved in the literature mainly due to difficulty in finding appropriate instruments. We therefore use Lewbel (2012) internally generated instrumental variable approach to control for potential endogeneity and as a robustness check to our main results.

The remainder of our study is structured as follows. The next section briefly introduces our underlying theory and hypotheses. “Data” and “Empirical Specification and Methods” sections discuss the data and empirical methods, respectively. “Results” section presents the results, while “Discussion and Conclusions” section concludes with a brief discussion and policy implications.

Theory and Hypotheses

Some economic theories on giving provide insight into why volunteering could be beneficial to wellbeing. For instance, theories of altruism suggest that donors receive benefits in various forms when they help others, and thus, a person's wellbeing could be influenced by the benefits derived from others (Andreoni 1988, 1989, 1990). Accordingly, individuals may have utility functions that depend on the satisfaction of others (Rose-Ackerman 1996). Consistent with this, the warm glow theory suggests that people derive internal satisfaction from giving, and this extends to giving one's time freely to help others in the context of volunteering (Andreoni 1990).

Beyond satisfaction, theory also sheds light on utility gains in terms of prestige. The theory on prestige suggests that donors give partly because they want to signal a status of wealth and not just to obtain satisfaction (Glazer and Konrad 1996). Economic theory on giving thus suggests that volunteers and donors benefit from the act of giving, and this has further been established in the empirical literature. However, to help develop our hypothesis which relates to models of volunteering and locations of charities people engage with, we draw on the construal-level theory of psychological distance.

The construal-level theory of psychological distance is a social psychological theory that suggests that people think more concretely of actions and objects that they perceive to be close or near (Trope and Liberman 2010). Psychological

distance can be construed temporally (time distance of present or future), socially (relational distance of self and/or other), spatially (physical distance of remote or immediate location) and hypothetically (probabilistic distance of certainty or uncertainty) (Trope and Liberman 2010). Psychological distance affects action by influencing a person's construal (evaluation) of what is "near" and what is "far" by making what is "near" appear concrete and what is "far" appear abstract (Dhar and Kim 2007; Trope and Liberman 2010). For instance, an assignment due in 1 h feels "near" and concrete compared to an assignment due in 6 months. In the same way, close relations like spouses and children feel more "near" relationally than a stranger sitting beside you on the train, just as that stranger feels more "near" physically than another passenger sitting ten seats away from you.

Psychological distance affects many aspects of decision making and social life. For example, research has shown that when ideas appear more concrete they are more likely to lead to entrepreneurial action than when they appear more abstract, and such construal can result in entrepreneurial success or failure (Chen et al. 2018). Consider also an example in the context of climate change. Existing studies have argued that one reason people do not act on climate change is because they perceive it to be psychologically distant, and hence more abstract than a concrete matter requiring immediate action (Spence et al. 2012).

But psychological distance is not static; it can be manipulated to influence action (Trope and Liberman 2010). For example, experimental research has shown that people's construal in negotiations, perceived self-control and on social issues like immigration can be influenced by manipulating the underlying psychological distance (Ledgerwood et al. 2010). Psychological distance can also be manipulated to influence consumer decisions on savings and investment, gambling, gift giving and sharing, credit card use, evaluations of brand extensions and purchase choice (see, Bornemann and Homburg 2011; Kim and John 2008; Liberman et al. 2007).

Based on the construal-level theory, we expect that individuals will perceive themselves closer to people and activities that are geographically and relationally closer to them. Thus, when engaging in informal volunteering work, people will perceive a shorter psychological distance as they can relate better with the beneficiaries of the volunteer work compared to formal volunteering which tends to be more structured and regulated. Additionally, informal volunteer work tends to be community based and more interpersonal. Therefore, people will perceive the benefits of volunteering more concretely, as they can relate with

and witness the impact of their volunteering work. To illustrate, people will find it more rewarding and see the evidence of their efforts when helping their neighbours with their garden work compared to collecting donations for a cancer research organisation.

This also applies to donating to local charities, which are geographically closer and easier for people to relate with, compared to national/international charities. For example, people can perceive directly the impact of their charity donations to their local youth centre than donating to the Red Cross. We therefore expect that people will perceive a higher wellbeing in engaging with informal volunteering, compared to formal volunteering, and higher wellbeing when donating to local charity, compared to national/international charities. Specifically, we hypothesise that:

1. People will report higher wellbeing engaging in informal volunteering, compared to formal volunteering
2. People will report higher wellbeing donating to local charity, compared to national/international charity.

This research agenda is important because it contributes to the research on SWB by specifically identifying how different charity and volunteering affects SWB. The majority of voluntary work is formal, and local organisations receive the most charity donations (Stebbins 1996). Thus, the research hypotheses are important to gauge if such largely skewed time and monetary kindness to formal volunteering and local organisations has any association with wellbeing for individuals, who remain the largest charity donors and volunteers. Findings will also enable relevant stakeholders to understand if the type of voluntary work and geographical proximity of the charity organisation benefits the giver of charity and voluntary activities.

Data

Our data come from the Community Life Survey (Cabinet Office 2013, 2014, 2015). The Community Life Survey consists of a nationally representative survey conducted about the UK. This survey was commissioned by the Cabinet Office to provide official statistics on issues concerning social action, volunteering and community engagement. We use data available from the UK Data Services, which are cross-sectional data from 2012 to 2015.

Our dependent variable is consistent with the existing literature and captures an individual's positive evaluation of his/her life with regard to satisfaction. This single

measure is an often-used measure of subjective wellbeing (see, for example, Awaworyi Churchill and Mishra 2017; Pinquart and Sörensen 2000). The Community Life Survey provides information on respondent's wellbeing through the answers to the question, "On a scale of 1–10, where 0 is not at all satisfied and 10 is completely satisfied, overall, how satisfied are you with your life nowadays?" However, for robustness, we also adopt two additional measures of subjective wellbeing captured in the Community Life Survey. The first captures happiness and is based on the question, "On a scale of 0–10, where 0 is not at all happy and 10 is completely happy, overall, how happy did you feel yesterday?" The second is based on the question, "On a scale of 0–10, where 0 is not at all worthwhile and 10 is completely worthwhile, overall, to what extent do you feel the things you do in your life are worthwhile?" We also take the mean response to all three wellbeing question to generate a composite index.

Our key explanatory variables focus on volunteering and giving levels as well as frequency. To ensure the robustness of our results and test our hypotheses, we focus on a set of explanatory variables that examine various components of volunteering and giving. Variables capturing involvement in voluntary actions include: (1) a dummy variable which equals 1 if respondent formally volunteered in the last 12 months, (2) a dummy variable which equals 1 if respondent either informally or formally volunteered in the last 12 months and (3) a dummy variable which equals 1 if respondent provided informal help in the last 12 months.²

Other explanatory variables capture frequency of volunteering actions and include: (1) a dummy variable which equals 1 if respondent formally volunteers at least once a month, (2) a dummy variable which equals 1 if respondent provides unpaid help to others at least once a week in the last 12 months³ and (3) a dummy variable which equals 1 if respondent provides informal help to others at least once a month. We also include two variables that attempt to capture the intensity of volunteering. These include the number of hours respondents spend volunteering formally and informally, respectively. Lastly, three of our explanatory variables focus on donations to charity. The first is a dummy variable which equals 1 if respondent, over the last 4 weeks, has given money to charity. The second is a dummy variable which equals 1 if respondent, over the last 4 weeks, has given to local charities as opposed to national

or international charities,⁴ while the last variable captures the amount given to charity in the past 4 weeks.

Other control variables included in our regressions are consistent with the literature and capture relevant factors that are likely to affect an individual's wellbeing or quality of life. These include gender, age, educational and marital status, income, employment status, race, general health and social class (see, for example, Awaworyi Churchill and Mishra 2017; Choi and Kim 2011; Pinquart and Sörensen 2000; Portela et al. 2013; Thoits and Hewitt 2001). Accordingly, to capture these factors, we include dummy variables for respondents that are female, unemployed and self-assess as having bad health. We control for the age of respondents and its quadratic term. For marital status, we include dummy variables for respondents that are married and single, excluding divorce as base. Education is a dummy variable capturing respondents that have tertiary education. To capture race, we exclude respondents of White ethnic origin as base and include dummy variables for respondents of Asian, African and other ethnic origin. Our measure of income is a nine-point income scale. To capture social class, we include a dummy for respondents that live in households with children. We also include regional dummies to control for regional-fixed effects. Specifically, we include dummies for all British regions except West Midlands, which is the base category.

Table 5 in the "Appendix" section provides a description and summary statistics of variables, while Table 6 presents an overview of our main explanatory variables by wellbeing levels. Overall, regressions with the highest number of observations include information on 14,156 respondents.

Empirical Specification and Methods

To examine the impact of volunteering and giving on subjective wellbeing, we estimate the following equation:

$$WB_i = \alpha + \beta_1 VG_i + \sum_n \beta_n X_{n,i} + \varepsilon_i \quad (1)$$

where i indexes the individuals, WB is the measure of subjective wellbeing, VG_i is the measure of volunteering or giving, X_n is a set of control variables described earlier, β_1 and β_n are parameters to be estimated, and ε is the random error term.

Consistent with the existing literature (see, for example, Awaworyi Churchill and Mishra 2017; Cheng and Smyth 2015; Portela et al. 2013), we use ordinary least squares (OLS). However, given the ordinal nature of our dependent

² Formal volunteering involves unpaid help in officially designated volunteer positions that is given through groups, organizations or clubs to benefit other people. On the other hand, informal help or volunteering is giving unpaid help as an individual.

³ Unpaid help represents casual help that is provided by the respondent to others but not in the context of formal or informal volunteering.

⁴ Local charity refers to charities located within a respondent's immediate neighbourhood or community in the UK.

Table 1 Volunteering, charity and wellbeing (OLS regressions)

	Panel 1—involvement			Panel 2—frequency			Panel 3—intensity			Panel 4—charity		
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	
<i>Dependent variable: subjective wellbeing (life satisfaction)</i>												
Volunteering/charity	0.209*** (0.031)	0.267*** (0.038)	0.517*** (0.033)	0.245*** (0.033)	0.203*** (0.045)	0.114*** (0.032)	0.001 (0.001)	0.003*** (0.001)	0.092* (0.055)	0.149*** (0.057)	0.006*** (0.001)	
Female	[0.053]	[0.061]	[0.089]	[0.056]	[0.055]	[0.028]	[0.008]	[0.059]	[0.021]	[0.032]	[0.060]	
	0.183*** (0.032)	0.185*** (0.032)	0.186*** (0.032)	0.187*** (0.032)	0.208*** (0.044)	0.183*** (0.032)	0.195*** (0.038)	0.169*** (0.035)	0.180*** (0.046)	0.158*** (0.042)	0.211*** (0.044)	
Age	-0.079*** (0.006)	-0.079*** (0.006)	-0.079*** (0.006)	-0.079*** (0.006)	-0.079*** (0.008)	-0.079*** (0.006)	-0.090*** (0.007)	-0.068*** (0.006)	-0.060*** (0.009)	-0.074*** (0.008)	-0.081*** (0.009)	
Age squared	0.088*** (0.006)	0.088*** (0.006)	0.088*** (0.006)	0.087*** (0.006)	0.087*** (0.009)	0.087*** (0.006)	0.100*** (0.007)	0.075*** (0.006)	0.066*** (0.009)	0.081*** (0.008)	0.089*** (0.009)	
Educational status	-0.100*** (0.035)	-0.081*** (0.035)	-0.074*** (0.035)	-0.096*** (0.035)	-0.163*** (0.048)	-0.068*** (0.035)	0.039 (0.041)	-0.058 (0.038)	-0.092* (0.051)	-0.115** (0.047)	-0.170*** (0.048)	
Married	0.547*** (0.038)	0.558*** (0.038)	0.561*** (0.038)	0.547*** (0.038)	0.584*** (0.053)	0.562*** (0.038)	0.531*** (0.045)	0.537*** (0.041)	0.412*** (0.056)	0.428*** (0.052)	0.594*** (0.053)	
Single	-0.077 (0.052)	-0.070 (0.052)	-0.066 (0.052)	-0.076 (0.052)	-0.041 (0.076)	-0.068 (0.052)	-0.118* (0.062)	-0.067 (0.058)	-0.049 (0.080)	-0.069 (0.072)	-0.048 (0.076)	
Unemployed	0.003 (0.043)	0.005 (0.043)	0.008 (0.043)	-0.006 (0.043)	0.025 (0.059)	0.006 (0.043)	0.041 (0.051)	0.061 (0.048)	0.180*** (0.064)	0.145** (0.057)	0.015 (0.060)	
Income	0.096*** (0.010)	0.096*** (0.010)	0.098*** (0.010)	0.097*** (0.010)	0.100*** (0.013)	0.099*** (0.010)	0.102*** (0.011)	0.072*** (0.010)	0.133*** (0.016)	0.140*** (0.015)	0.096*** (0.013)	
Asian	0.002 (0.078)	0.002 (0.078)	-0.005 (0.078)	0.004 (0.078)	-0.099 (0.113)	-0.010 (0.078)	-0.058 (0.094)	-0.038 (0.088)	0.112 (0.109)	0.084 (0.104)	-0.099 (0.113)	
Black	-0.250** (0.113)	-0.243** (0.113)	-0.240** (0.113)	-0.249** (0.113)	-0.272* (0.151)	-0.244** (0.113)	-0.187 (0.134)	-0.307** (0.132)	-0.053 (0.169)	-0.135 (0.151)	-0.265* (0.152)	
Other/mixed race	-0.117 (0.125)	-0.114 (0.126)	-0.115 (0.126)	-0.119 (0.126)	-0.013 (0.178)	-0.117 (0.125)	-0.040 (0.150)	-0.136 (0.137)	0.006 (0.182)	-0.111 (0.172)	-0.008 (0.178)	
Bad health	-0.942*** (0.099)	-0.949*** (0.099)	-0.957*** (0.099)	-0.944*** (0.099)	-1.025*** (0.166)	-0.960*** (0.099)	-0.995*** (0.134)	-0.985*** (0.118)	-1.113*** (0.157)	-0.992*** (0.136)	-1.020*** (0.167)	
Children	0.033 (0.039)	0.042 (0.039)	0.043 (0.039)	0.038 (0.039)	-0.046 (0.053)	0.043 (0.039)	0.066 (0.046)	-0.007 (0.043)	-0.025 (0.058)	0.049 (0.053)	-0.040 (0.053)	
Constant	8.425*** (0.145)	8.362*** (0.146)	8.399*** (0.145)	8.437*** (0.145)	8.538*** (0.205)	8.424*** (0.145)	8.674*** (0.177)	8.394*** (0.163)	7.980*** (0.233)	8.088*** (0.203)	8.602*** (0.206)	
Regional dummies	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	
Observations	14,156	14,156	14,156	14,156	6111	14,156	8772	10,383	6030	7924	6088	

Table 1 continued

R^2	Panel 1—involvement			Panel 2—frequency			Panel 3—intensity			Panel 4—charity		
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	
0.122	0.121	0.120	0.120	0.122	0.120	0.120	0.123	0.112	0.111	0.120	0.120	

Our independent variables (our measures of volunteering and charity) are defined in each column as follows: Column 1 (Involvement 1): dummy variable equals 1 if respondent formally volunteered in the last 12 months, Column 2 (Involvement 2): dummy variable equals 1 if respondent either informally or formally volunteered in the last 12 months, Column 3 (Involvement 3): dummy variable equals 1 if respondent provided informal help in the last 12 months, Column 4 (Frequency 1): dummy variable equals 1 if respondent formally volunteered at least once a month, Column 5 (Frequency 2): dummy variable equals 1 if respondent provides unpaid help to others at least once a week in the last 12 months, Column 6 (Frequency 3): dummy variable equals 1 if respondent provides informal help to others at least once a month, Column 7 (Intensity 1): formal volunteering hours, Column 8 (Intensity 2): informal volunteering hours, Column 9 (Charity 1): dummy variable equals 1 if respondent, over the last 4 weeks, has given money to charity, Column 10 (Charity 2): dummy variable equals 1 if respondent, over the last 4 weeks, has given to local charities as opposed to national and international charities, and Column 11 (Charity 3): amount given to charity in the past 4 weeks. Robust standard errors in parentheses. *** $p < 0.01$; ** $p < 0.05$; * $p < 0.1$

variable, subjective wellbeing, we also present results for ordered logit estimations for robustness. Lastly, to further address potential issues of endogeneity, we also run Lewbel (2012) 2SLS estimations to account for endogeneity.

Results

Table 1 presents OLS results for the association between volunteering/charity and wellbeing. Panel 1 (Columns 1–3) presents results on the effects of various measures of involvement in volunteering activities. Panel 2 (Columns 4–6) presents results on the effects of frequency of involvement in volunteering activities. Panel 3 (Columns 7 and 8) presents results on the effects of respondent’s intensity of volunteering proxied by hours devoted to volunteering, while Panel 4 (Columns 9–11) present results on the effects of charity activities.

Quite robustly, we find a positive association between volunteering/charity and subjective wellbeing. From Panel 1, we observe a positive association between involvement in volunteering activities and subjective wellbeing. From Column 1, we find that the coefficient is 0.21, implying a 0.21 higher individual life satisfaction, on a scale of 1–10, if respondents formally volunteered in the last 12 months. From Column 2, the coefficient is 0.27, implying a 0.27 higher life satisfaction when respondents either volunteer formally or informally. Results from Column 3 are similar with a coefficient of 0.52, suggesting a 0.52 higher life satisfaction when respondents provide informal help to others.

The results from Panel 2 also show a positive association between frequency of volunteering and subjective wellbeing. We find that formal volunteering at least once a month and the provision of help to others at least once a week is associated with a 0.25 and 0.20 higher individual life satisfaction, respectively, on a scale of 1–10. Similarly, the provision of informal help to others at least once a month is associated with a 0.11 higher life satisfaction. The relatively larger effect of formal volunteering (Column 4) compared to informal volunteering (Column 6) could be associated with the measure of frequency of volunteering. Particularly, measures of frequency here are based on questions asking if respondents had volunteered at least once a month. Thus, this is a dummy variable which is unable to capture exactly how often in the last month respondents had volunteered formally and informally given that at least once a month could represent various frequencies including multiple times a week. Accordingly, if formal volunteers actually spend more time in a month volunteering than informal volunteers, this could explain the higher levels of wellbeing reported here, although this could also be an issue associated with measurement error

which our instrumental variable approach should deal with appropriately.

From Panel 3, although we find a statistically insignificant association between formal volunteering hours and wellbeing, results suggest that an increase in informal volunteering hours is associated with higher levels of wellbeing with a coefficient of 0.003. Results from Panel 4 show a positive association between engagement with charities and wellbeing. From Column 9, we observe that giving to charities in general is associated with higher life satisfaction. We find a 0.09 increase in individual life satisfaction for respondents who, over the last 4 weeks, have given to charities. Additionally, from Column 11, we observe the amount of money given to charity also corresponds with higher life satisfaction, and thus, higher donations to charity are associated with higher levels of wellbeing.

Next, our results address the varying impact of the type of volunteer and charity work that people engage with on their wellbeing. Regarding the model of volunteering (formal vs. informal), while we find a statistically insignificant association between formal volunteering hours and wellbeing, we find that an increase in the number of hours spent volunteering informally is associated with higher levels of subjective wellbeing. This suggests a higher utility for volunteering to informal organisations compared to formal organisations if informal volunteering is done more intensely in terms of time devotion. Thus, when formal volunteers and informal volunteers put in the same average amount of time, there is more utility in terms of wellbeing for informal volunteers. This confirms our first hypothesis that people will perceive more utility in terms of wellbeing for informal volunteering, compared to formal volunteering.

Further, results from Column 10 suggest that individuals gain even higher utility by giving to local charities as opposed to national or international charities. Specifically, we find a 0.15 increase in individual life satisfaction for respondents who, over the last 4 weeks, have given to local charities as opposed to national or international charities. This is the case even though more people in our sample donate to international charities, and donate more money on average than those who give to local charity.⁵ We examine the summary statistics between the two categories of respondents (i.e. those who give to local charities vs those who give to national or international charities). Statistics show that on average fewer people donate to local charities and also donate less money on average. The results here confirm the theory of psychological distance and our second hypothesis that people will perceive more

utility in terms of wellbeing when they give to local charity compared to when they give to national/international charity.

Considering the magnitude of the coefficients found in this study compared with those reported in other wellbeing studies (see, for example, Awaworyi Churchill and Mishra 2017), the effects of volunteering and charity on wellbeing is not only statistically significant but also economically significant. Further, the control variables reveal that gender, marital status and income are positively associated with wellbeing. Thus, respondents with higher levels of income tend to report higher wellbeing and this is also the case for females as opposed to males, and married respondents as opposed to single and divorced. We observe a U-shaped relationship for age (i.e. a negative effect of age and positive effect of age squared). Additionally, respondents of Black ethnic origin as opposed to White report lower subjective wellbeing. This is also the case for individuals with tertiary education (as opposed to those that do not). Results also imply lower levels of wellbeing for respondents that self-assess their general health as bad/very bad. Other control variables are statistically insignificant.

Robustness Checks

As indicated earlier, the existing literature on the determinants of individual life satisfaction or subjective wellbeing uses either ordered logit regressions or OLS. To ensure that our results are robust to both estimation methods often used in the existing literature, we also present ordered logit estimates. These are reported in Table 2 where the definition of subjective wellbeing is still based on the 10-point scale evaluation of respondents' life satisfaction as defined earlier.

Further, it is likely that endogeneity might be a problem as there could be factors associated with both higher life satisfaction and participation in voluntary activities which are unobserved. As discussed earlier, endogeneity may also arise as a result of reverse causality between wellbeing and our measures of volunteering. Given the unavailability of external instruments in our dataset which meet the exclusion restriction, we resort to the use of the Lewbel (2012) 2SLS approach, which is often used in the literature in the absence of external instruments or as robustness checks on findings from 2SLS regressions using external instruments (see, for example, Awaworyi Churchill and Mishra 2017; Awaworyi Churchill and Smyth 2017; Awaworyi Churchill et al. 2016; Belfield and Kelly 2012; Buch et al. 2014; Emran and Shilpi 2012; Mishra and Smyth 2015).

Overall, both ordered logit and 2SLS regressions results reported in Table 3 show that the nature of the relationship between volunteering/charity and subjective wellbeing is not altered by the estimation technique used.

⁵ Local charities here refer to charities within a respondent's immediate locality or neighbourhood.

Table 2 Volunteering, charity and wellbeing (ordered logit regressions)

	Panel 1—involverment			Panel 2—frequency			Panel 3—intensity			Panel 4—charity		
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	
<i>Dependent variable: subjective wellbeing (life satisfaction)</i>												
Volunteering/charity	0.170*** (0.030)	0.103*** (0.037)	0.607*** (0.184)	0.216*** (0.032)	0.217*** (0.049)	0.086*** (0.031)	0.001 (0.001)	0.004*** (0.001)	0.093* (0.054)	0.163*** (0.055)	0.006*** (0.001)	
Female	0.188*** (0.031)	0.191*** (0.031)	0.109 (0.183)	0.191*** (0.031)	0.245*** (0.048)	0.188*** (0.031)	0.214*** (0.040)	0.201*** (0.036)	0.220*** (0.047)	0.181*** (0.041)	0.246*** (0.048)	
Age	-0.071*** (0.006)	-0.071*** (0.006)	-0.140*** (0.033)	-0.071*** (0.006)	-0.082*** (0.009)	-0.071*** (0.006)	-0.088*** (0.007)	-0.066*** (0.007)	-0.059*** (0.009)	-0.067*** (0.008)	-0.084*** (0.009)	
Age squared	0.080*** (0.005)	0.080*** (0.005)	0.149*** (0.033)	0.080*** (0.005)	0.092*** (0.010)	0.080*** (0.005)	0.099*** (0.008)	0.074*** (0.007)	0.066*** (0.009)	0.074*** (0.008)	0.094*** (0.010)	
Educational status	-0.126*** (0.034)	-0.107*** (0.034)	0.397 (0.261)	-0.124*** (0.034)	-0.182*** (0.052)	-0.100*** (0.034)	0.015 (0.042)	-0.105*** (0.039)	-0.140*** (0.051)	-0.143*** (0.045)	-0.189*** (0.052)	
Married	0.525*** (0.037)	0.534*** (0.037)	0.862*** (0.229)	0.525*** (0.037)	0.602*** (0.058)	0.538*** (0.037)	0.538*** (0.047)	0.541*** (0.043)	0.420*** (0.059)	0.420*** (0.051)	0.617*** (0.058)	
Single	-0.123** (0.048)	-0.116** (0.048)	0.151 (0.228)	-0.123** (0.048)	-0.091 (0.078)	-0.115** (0.048)	-0.157** (0.062)	-0.113** (0.057)	-0.077 (0.079)	-0.110* (0.067)	-0.097 (0.078)	
Unemployed	-0.081* (0.042)	-0.083** (0.042)	-0.563** (0.253)	-0.072* (0.042)	-0.117* (0.065)	-0.083** (0.042)	-0.118** (0.053)	-0.135*** (0.050)	-0.269*** (0.067)	-0.220*** (0.057)	-0.105 (0.065)	
Income	0.076*** (0.009)	0.077*** (0.009)	0.309*** (0.063)	0.077*** (0.009)	0.092*** (0.014)	0.079*** (0.009)	0.089*** (0.012)	0.063*** (0.011)	0.125*** (0.017)	0.119*** (0.014)	0.088*** (0.014)	
Asian	0.023 (0.081)	0.018 (0.081)	0.162 (0.470)	0.027 (0.081)	-0.094 (0.134)	0.011 (0.080)	-0.064 (0.103)	-0.009 (0.096)	0.103 (0.119)	0.112 (0.107)	-0.090 (0.134)	
Black	-0.252** (0.109)	-0.247** (0.109)	-0.231 (0.471)	-0.252** (0.109)	-0.320** (0.160)	-0.248** (0.109)	-0.251* (0.136)	-0.308** (0.135)	-0.065 (0.180)	-0.131 (0.146)	-0.316* (0.161)	
Other/mixed race	-0.031 (0.121)	-0.029 (0.122)	-0.570 (0.543)	-0.031 (0.121)	0.131 (0.192)	-0.032 (0.122)	0.028 (0.164)	-0.089 (0.143)	0.109 (0.188)	-0.003 (0.172)	0.141 (0.192)	
Bad health	-0.908*** (0.088)	-0.916*** (0.088)	-0.548** (0.222)	-0.907*** (0.088)	-1.137*** (0.166)	-0.922*** (0.088)	-1.038*** (0.127)	-0.994*** (0.112)	-1.097*** (0.144)	-0.947*** (0.119)	-1.137*** (0.166)	
Children	-0.010 (0.038)	-0.001 (0.038)	0.645** (0.299)	-0.005 (0.038)	-0.071 (0.057)	-0.001 (0.038)	0.043 (0.048)	-0.033 (0.044)	-0.044 (0.058)	0.004 (0.050)	-0.069 (0.058)	
Regional dummies	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	
Observations	14,156	14,156	14,156	14,156	6111	14,156	8772	10,383	6030	7924	6088	

Definitions of variables in each column are consistent with notes in Table 1

Robust standard errors, adjusted for heteroskedasticity in parentheses

Coefficients here are ordered log-odds with standardised coefficients in brackets

*** $p < 0.01$; ** $p < 0.05$; * $p < 0.1$

Table 3 Volunteering, charity and wellbeing (Lewbel 2SLS regressions)

	Panel 1—involvement			Panel 2—frequency			Panel 3—intensity			Panel 4—charity		
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	
<i>Dependent variable: subjective wellbeing (life satisfaction)</i>												
Volunteering/charity	0.933* (0.537) [0.022]	0.677** (0.327) [0.159]	1.484*** (0.448) [0.367]	0.125 (0.193) [0.029]	0.920** (0.429) [0.250]	0.925* (0.529) [0.226]	0.164 (0.203) [0.014]	0.774** (0.321) [0.181]	0.005*** (0.002) [0.047]	0.007*** (0.002) [0.058]	0.003*** (0.001) [0.044]	
Female	0.186*** (0.035)	0.200*** (0.032)	0.237*** (0.037)	0.191*** (0.032)	0.241*** (0.047)	0.134*** (0.047)	0.171*** (0.046)	0.171*** (0.044)	0.209*** (0.043)	0.192*** (0.038)	0.176*** (0.035)	
Age	-0.080*** (0.006)	-0.079*** (0.006)	-0.072*** (0.006)	-0.079*** (0.006)	-0.081*** (0.009)	-0.082*** (0.006)	-0.058*** (0.009)	-0.072*** (0.008)	-0.080*** (0.008)	-0.091*** (0.007)	-0.068*** (0.006)	
Age squared	0.088*** (0.006)	0.087*** (0.006)	0.079*** (0.006)	0.088*** (0.006)	0.088*** (0.009)	0.090*** (0.006)	0.065*** (0.009)	0.080*** (0.008)	0.088*** (0.009)	0.100*** (0.007)	0.075*** (0.006)	
Educational status	-0.083 (0.076)	-0.042 (0.038)	0.050 (0.047)	-0.083* (0.044)	-0.165*** (0.050)	-0.089** (0.038)	-0.126** (0.053)	-0.107** (0.047)	-0.162*** (0.048)	0.041 (0.041)	-0.051 (0.038)	
Married	0.555*** (0.046)	0.568*** (0.038)	0.550*** (0.040)	0.553*** (0.039)	0.550*** (0.057)	0.575*** (0.040)	0.422*** (0.057)	0.417*** (0.052)	0.576*** (0.053)	0.539*** (0.045)	0.533*** (0.041)	
Single	-0.076 (0.058)	-0.061 (0.052)	-0.035 (0.056)	-0.071 (0.053)	-0.077 (0.078)	-0.110* (0.058)	-0.048 (0.080)	-0.077 (0.071)	-0.072 (0.075)	-0.115* (0.062)	-0.067 (0.058)	
Unemployed	0.015 (0.045)	0.022 (0.043)	0.047 (0.046)	0.003 (0.045)	-0.041 (0.071)	-0.023 (0.049)	0.147** (0.065)	0.148*** (0.057)	0.028 (0.059)	0.038 (0.051)	0.065 (0.048)	
Income	0.098*** (0.012)	0.103*** (0.010)	0.117*** (0.011)	0.099*** (0.010)	0.108*** (0.014)	0.101*** (0.010)	0.115*** (0.018)	0.140*** (0.015)	0.094*** (0.013)	0.103*** (0.011)	0.076*** (0.011)	
Asian	-0.001 (0.082)	-0.007 (0.078)	-0.096 (0.085)	0.006 (0.079)	-0.030 (0.118)	0.008 (0.080)	0.088 (0.111)	0.093 (0.102)	-0.101 (0.113)	-0.058 (0.094)	-0.024 (0.088)	
Black	-0.232** (0.113)	-0.221** (0.112)	-0.268** (0.119)	-0.224** (0.112)	-0.257* (0.153)	-0.240** (0.114)	-0.033 (0.172)	-0.121 (0.150)	-0.284* (0.148)	-0.184 (0.134)	-0.279** (0.131)	
Other/mixed race	-0.106 (0.125)	-0.112 (0.126)	-0.094 (0.132)	-0.114 (0.125)	0.013 (0.177)	-0.085 (0.125)	-0.013 (0.181)	-0.046 (0.166)	0.012 (0.178)	-0.009 (0.148)	-0.129 (0.137)	
Bad health	-0.965*** (0.114)	-1.000*** (0.101)	-1.143*** (0.112)	-0.960*** (0.101)	-0.975*** (0.166)	-0.910*** (0.109)	-1.131*** (0.159)	-1.019*** (0.136)	-1.027*** (0.165)	-1.013*** (0.133)	-0.998*** (0.118)	
Children	0.031 (0.046)	0.046 (0.039)	0.088** (0.043)	0.041 (0.040)	-0.044 (0.055)	0.014 (0.044)	0.009 (0.059)	0.036 (0.052)	-0.042 (0.053)	0.068 (0.046)	-0.008 (0.043)	
Constant	8.468*** (0.150)	8.576*** (0.175)	9.095*** (0.247)	8.451*** (0.143)	8.371*** (0.245)	8.263*** (0.182)	8.227*** (0.262)	8.111*** (0.222)	8.613*** (0.203)	8.649*** (0.177)	8.380*** (0.163)	
Regional dummies	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	
Observations	14,156	14,156	14,156	14,156	6111	14,156	8772	10,383	6030	7924	6088	

Table 3 continued

	Panel 1—involvement			Panel 2—frequency			Panel 3—intensity			Panel 4—charity		
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	
R^2	0.121	0.114	0.032	0.122	0.083	0.081	0.087	0.120	0.120	0.120	0.112	
First stage												
J-statistic	28.5	32.7	22.4	27.3	20.1	22.1	25.3	17.3	15.2	12.4	15.6	
J P value	0.389	0.121	0.168	0.054	0.269	0.181	0.087	0.432	0.578	0.775	0.555	

Definitions of variables in each column are consistent with notes in Table 1

Robust standard errors, adjusted for heteroskedasticity in parentheses

Standardised coefficients in brackets

*** $p < 0.01$; ** $p < 0.05$; * $p < 0.1$

Consistent with our main results, we find that a positive relationship between volunteering/charity and wellbeing. However, in most cases, we find that OLS results understate the effects of volunteering and charity on wellbeing. This is evident given the coefficient sizes, which are mostly larger for ordered logit and 2SLS regressions. The emerging conclusions, based on the direction of coefficients, however, remain the same.

Lastly, Table 4 presents results for alternative measures of subjective wellbeing. Here we reported results for the effects of volunteering/charity on wellbeing using a self-assessed measure of happiness as well as a measure on feeling about life activities being worthwhile. We also capture wellbeing as a composite index which is the mean of the responses to the three single item measures of subjective wellbeing. Our results remain robust as the emerging conclusions from these regressions are the same.

Discussion and Conclusions

Our study provides evidence on the impact of volunteering and engagement in charity on subjective wellbeing. Using UK’s Community Life Survey data, we show that volunteering and engagement in charity are positively associated with subjective wellbeing, measured by individual life satisfaction. Our findings are consistent with past research which suggest that charity donation and volunteering positively affect subjective wellbeing (Bekkers and Wiepking 2011; Choi and Kim 2011; Wilson 2000).

Compared to existing research that focuses on either volunteering work or charity work in isolation, we examine both volunteering and charity activities in this study and find they both positively impact wellbeing. Our study shows that increased frequency and time donated towards volunteering work as well as increased frequency and value of monetary donations to charity positively impact wellbeing.

Further, our results show that the type of volunteer and charity organisation that people engage with affects their wellbeing differently. Specifically, we find that people who engage in informal volunteering report higher wellbeing than those who engage in formal volunteering. Research has identified lack of time, lack of interest, health and social network and capital as possible barriers to volunteering to formal organisations (see, for example, Sundeen et al. 2007). In this study, we identify a possible psychological dimension—psychological distance—that may serve as a barrier to volunteering to formal organisations. We argue that people do not perceive formal organisations as being psychologically close because of its formal structures compared to informal organisations. The perceived benefits—*intrinsic reward of satisfaction and*

Table 4 Robustness checks with alternate measure of wellbeing

	Panel 1—involvement			Panel 2—frequency			Panel 3—intensity			Panel 4—charity		
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	
<i>Dependent variable: subjective wellbeing (happiness)</i>												
Volunteering/charity	0.194*** (0.037)	0.182*** (0.043)	0.122*** (0.039)	0.251*** (0.039)	0.152*** (0.054)	0.150*** (0.047)	0.134*** (0.038)	0.181*** (0.064)	0.003*** (0.001)	– 0.001 (0.002)	0.004*** (0.001)	
Regional dummies	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	
Observations	14,156	14,156	14,156	14,156	6111	14,156	8772	10,383	6030	7924	6088	
R ²	0.081	0.080	0.080	0.082	0.071	0.082	0.080	0.083	0.071	0.079	0.077	
<i>Dependent variable: subjective wellbeing (worthwhile)</i>												
Volunteering/charity	0.326*** (0.032)	0.349*** (0.039)	0.259*** (0.034)	0.386*** (0.033)	0.308*** (0.044)	0.082* (0.042)	0.010 (0.057)	0.317*** (0.032)	0.201*** (0.058)	0.009*** (0.001)	0.002*** (0.001)	
Regional dummies	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	
Observations	14,156	14,156	14,156	14,156	6111	14,156	8772	10,383	6030	7924	6088	
R ²	0.079	0.078	0.076	0.080	0.059	0.078	0.078	0.068	0.077	0.058	0.068	
<i>Dependent variable: subjective wellbeing (composite index)</i>												
Volunteering/charity	0.245*** (0.027)	0.234*** (0.034)	0.167*** (0.029)	0.295*** (0.029)	0.221*** (0.039)	0.120*** (0.036)	0.065 (0.049)	0.190*** (0.028)	0.006*** (0.001)	0.181*** (0.051)	0.003*** (0.000)	
Regional dummies	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	
Observations	14,156	14,156	14,156	14,156	6111	14,156	8772	10,383	6030	7924	6088	
R ²	0.124	0.123	0.121	0.125	0.110	0.123	0.122	0.113	0.122	0.110	0.114	

Definitions of variables in each column are consistent with notes in Table 1

Robust standard errors, adjusted for heteroskedasticity in parentheses

Standardised coefficients in brackets

*** $p < 0.01$; ** $p < 0.05$; * $p < 0.1$

wellbeing, and the extrinsic rewards such as status and social capital—are therefore perceived more concretely when volunteering for informal organisations compared to formal organisations.

Consistent with research that shows that psychological distance on social issues can be changed by shifting perceived social distance, we recommend that formal organisations induce feelings of closeness among volunteers by instating a communal organisational culture and a sense of egalitarianism. This will create a familial feeling among volunteers and increase their sense of belongingness and wellbeing for their volunteering work in formal organisations. Additionally, we recommend that formal organisations model their processes and volunteering activities to mimic those of informal volunteering to encourage stronger engagement. This may require working in smaller teams, giving volunteer teams reasonable autonomy, operating flatter organisational hierarchies and encouraging member initiative taking without resorting to bureaucratic processes. These measures can reduce the abstractness of formal volunteering organisations, concretising engagement and increasing the perceived wellbeing utilities of volunteering.

We also find that people who donate to local charities report higher wellbeing than those who donate to national/international charity. These results are consistent with the construal-level theory of psychological distance which suggests that spatial and social distance affect how people perceive the utility they gain from volunteering and charity donations (Trope and Liberman 2010). Based on these findings, we recommend that local charity organisations emphasise their location in the fabric of the local community and their proximity to local people when attempting

to increase engagement and donations. National and international charities will therefore also need to adopt a narrative that can localise their operations in order to engender engagement. For example, using local stories, events, people and places in their marketing communication is more likely to resonate with people than emphasising their national and global outlook.

Consistent with our findings, Liberman and Förster (2009) found that people estimated larger psychological distance when a target was presented as global, but the perceived psychological distance was reduced when the target was presented as local. However, the authors found that this effect disappeared when participants were made not to think of themselves as the reference point of psychological distance. This is because psychological distance is egocentric, and people often think of distances as the gap between the other and them (Trope and Liberman 2010). This has an important theoretical and practical implication for our findings because definitions of local or international charity assume the location of the donor as the point of origin. If donors to charity can be influenced to consider donation as not about them but about the other, then the perceived psychological distance between the donor and the charity is likely to diminish. We recommend that international charity organisations frame messages to be more about the charity goal and the recipients, rather than emphasising the messianic role of the donor as is typical in many charity communications (Moro 1998).

Appendix

See Tables 5 and 6.

Table 5 Description and summary statistics of variables

Variable	Descriptions	Mean	S.D.	Min	Max
Wellbeing (life satisfaction)	On a scale of 0–10, where 0 is not at all satisfied and 10 is completely satisfied, overall, how satisfied are you with your life nowadays?	7.77	1.91	0	10
Wellbeing (happiness)	On a scale of 0–10, where 0 is not at all happy and 10 is completely happy, overall, how happy did you feel yesterday?	7.37	2.26	0	10
Wellbeing (worthwhile)	On a scale of 0–10, where 0 is not at all worthwhile and 10 is completely worthwhile, overall, to what extent do you feel the things you do in your life are worthwhile?	7.80	1.98	0	10
Wellbeing (composite index)	Composite index based on mean response to questions on life satisfaction, happiness and life activities being worthwhile	7.55	1.77	0	10
Involvement 1	Dummy variable equals 1 if respondent formally volunteered in the last 12 months	0.40	0.49	0	1
Involvement 2	Dummy variable equals 1 if respondent either informally or formally volunteered in the last 12 months	0.69	0.46	0	1
Involvement 3	Dummy variable equals 1 if respondent provided informal help in the last 12 months	0.58	0.49	0	1
Frequency 1	Dummy variable equals 1 if respondent formally volunteers at least once a month	0.25	0.45	0	1
Frequency 2	Dummy variable equals 1 if respondent provides unpaid help to others at least once a week in the last 12 months	0.33	0.48	0	1
Frequency 3	Dummy variable equals 1 if respondent provides informal help to others at least once a month	0.36	0.48	0	1
Intensity 1	Formal volunteering hours	7.74	16.77	0	330
Intensity 2	Informal volunteering hours	5.80	15.73	0	340
Charity 1	Dummy variable equals 1 if respondent, over the last 4 weeks, has given to local charities as opposed to national and international charities	0.25	0.43	0	1
Charity 2	Dummy variable equals 1 if respondent, over the last 4 weeks, has given money to charity	0.76	0.42	0	1
Charity 3	Amount given to charity in the past 4 weeks	20.36	31.17	0	284
Female	Dummy variable equals 1 if respondent is female	0.58	0.49	0	1
Age	Age of respondent	52.02	18.59	16	95
Age squared	Square of age/100	30.51	19.72	2.56	90.25
Educational status	Dummy variable equals 1 if respondent has a tertiary education (both degree and non-degree)	0.30	0.46	0	1
Married	Dummy variable equals 1 if respondent is married	0.46	0.49	0	1
Single	Dummy variable equals 1 if respondent is single (never married)	0.21	0.40	0	1
Unemployed	Dummy variable equals 1 if respondent is unemployed	0.47	0.49	0	1
Income	Nine-point income scale	4.46	2.02	0	8
White	Dummy variable equals 1 if respondent is of White ethnic origin	0.88	0.32	0	1
Black	Dummy variable equals 1 if respondent is of African ethnic origin	0.03	0.16	0	1
Asian	Dummy variable equals 1 if respondent is of Asian ethnic origin	0.06	0.24	0	1
Other/mixed race	Dummy variable equals 1 if respondent is of other ethnic origin or Mixed race (not Black, Asian, White)	0.03	0.16	0	1
Bad health	Dummy variable equals 1 if respondent self-assesses their general health as bad/very bad.	0.07	0.26	0	1
Children	Dummy variable equals 1 if respondent lives in a household with children	0.29	0.45	0	1

Table 6 Summary statistics of volunteering/charity by wellbeing levels

Variable	Low wellbeing	Medium wellbeing	High wellbeing
Involvement 1	0.36	0.39	0.45
Involvement 2	0.65	0.69	0.73
Involvement 3	0.52	0.60	0.62
Frequency 1	0.20	0.24	0.31
Frequency 2	0.30	0.33	0.37
Frequency 3	0.36	0.34	0.41
Intensity 1	6.78	7.39	9.04
Intensity 2	6.25	5.66	5.60
Charity 1	0.26	0.26	0.24
Charity 2	0.64	0.75	0.78
Charity 3	16.72	18.71	23.40

Low wellbeing (respondents with scores 0–4)

Medium wellbeing (respondents with scores 5–7)

High wellbeing (respondents with scores 8–10)

Reported values are means

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