System Shock: Nonlocal Grassroots Response to COVID-19 at Ground Zero, Wuhan

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On January 23, 2020, two days before the Chinese New Year of the Rat (the new start in the twelve-year cycle of the Chinese zodiac), the central government of China announced the lockdown of Wuhan, a city with over eleven million people, due to the outbreak of COVID-19. It was an unprecedented crisis that neither the government nor the society had ever encountered. COVID-19 patients flocked to hospitals and soon discovered that there was a dearth of available beds. Essential community services were cut off, leaving vulnerable populations—the elderly, pregnant women, people with chronic diseases—desperately seeking support. The shortage of medical supplies was so serious that medical workers had to bypass the government and send out individual pleas for donations.[1] Indeed, the government's responses to COVID-19 in the first few weeks were inadequate; the emergency plan developed by the government to deal with "normal" disasters was simply insufficient for such a sweeping crisis.

When COVID-19 hit Wuhan, a city with no prior experiences of a pandemic, the whole society went into system shock.[2] Wuhan being the global ground zero for COVID-19, citizens did not know how dangerous and widespread the virus would turn out to be. The Chinese government was still collecting information in order to coordinate public health resources. Businesses were dealing with the beginning impacts of a looming economic shutdown. Nonprofits were trying to figure out how they could help—a tough order, given that they could not operate their normal disaster relief efforts on the ground. For two to three weeks after the emergency lockdown, things in Wuhan were chaotic. Heartbreaking stories broke on Chinese social media about frontline medical workers lacking medical supplies and unattended family members dying due to lack of care. Before February 21, 2020, when all the Fangcang shelter hospitals (hospitals built for COVID-19 patients) came into use, the situation was desperate.[3]

Given how severe and unprecedented the COVID-19 pandemic was, and the increasingly restrictive institutional environment facing grassroots nonprofits in China, it is not surprising that grassroot nonprofits faced many challenges during the initial stage of the pandemic in Wuhan.[4] The Ministry of Civil Affairs in the State Council authorized just a few government-organized nonprofits (GONGOs—government-organized nongovernmental organizations) to receive and distribute donations and medical supplies; nonlocal nonprofits were not allowed to enter or send volunteers to Hubei Province.[5] Some local GONGO chapters' exclusive access to raising public donations, coupled with lack of capacity, resulted in several scandals when they failed to effectively distribute medical supplies raised from the general public.[6]

China's policies and regulations vis-à-vis the nonprofit sector meant that very limited grassroots action took place during COVID-19's first stages, and most came from those social organizations heavily managed and coordinated by local government (e,g.for example, residential committees) or by citizen self-help groups. These local organizations indeed played an instrumental role in Wuhan's response to the crisis.[7] But it was a collection of nonlocal nonprofit organizations and volunteer groups with little professional experience in disaster relief and insufficient resources and local networks that in the end emerged and managed to deliver aid not only to Wuhan but also surrounding regions.[8] Despite the regulatory and information barriers, these groups managed to send masks and ventilators to hospitals in desperate need, and also to address medical needs not directly connected to the pandemic, such as supplying medication to people with other diseases, who were falling by the wayside due to the national focus on COVID-19.

How was it that these nonlocal grassroots nonprofit organizations were able to effectively deliver aid? Two critical, connected differences are at the very foundation of this organizational tier, which has its roots in close community work. First, the grassroots nonprofits that stepped up during the initial outbreak were able to emerge as key contributors during the pandemic as a result of their close relationship with their clients and partners, which supports their creative

leveraging of new technology platforms and their practice of constantly adjusting strategic priorities based on critical needs at the moment and their capacity to fulfill those needs. The success of these organizations, which lack government affiliation and big funding, is driven by their deep understanding of the changing needs of the communities they serve and their ability to mobilize quickly and effectively with whatever resources are at hand in the moment. This gave them a key advantage over organizations with superior financial and political resources.

The second critical difference has to do with ethos. Compared to the scale of resources the Chinese government had at its disposal, the resources the grassroots organizations were able to mobilize during the pandemic were trivial. But it was left to these organizations to fill the gaps in care for already marginalized groups that became further marginalized during the COVID-19 outbreak. People with rare and chronic diseases, pregnant women experiencing complications, the economically disadvantaged, the elderly, people with disabilities, and even people simply living outside of the immediate Wuhan metro area were not able to enjoy the same level of administrative and medical resources devoted to Wuhan and COVID-19. As it did all over the world, COVID-19 systematically worsened the conditions of already marginalized groups in Wuhan.[9] Without grassroots organizations committed to whole community care, many in these groups would not have survived.

Below are some examples that showcase how nonlocal grassroots nonprofit organizations were able to respond quickly and effectively during the early stages of the COVID-19 crisis[10], complementing our existing knowledge about the critical roles local community-based organizations played in different stages of pandemic control in China.[11] They offer important implications for a world ill-prepared for global crises.

Meeting Critical Needs While Rapidly Adjusting Strategic Priorities
In a time of an unprecedented crisis, nonprofit organizations must decide whether to act immediately or wait to see what/who will emerge in response, and then move in to fill in any gaps. When COVID-19 broke out in Wuhan, most organizational staff members were at home

because the Chinese New Year was imminent. Therefore, when news of the pandemic broke, it was impossible to run through the normal administrative procedures regarding what should be the level of organizational involvement. Moreover, getting involved in the early stages of a crisis presents significant risks for such organizations. fseWill there be financial and legal risks for those organizations that will only come to light later on? Could local volunteers come to harm? As the city of Wuhan had gone straight into lockdown and the general public had limited information about what was actually going on inside the city, those nonlocal grassrrot nonprofit organizations had many more reasons to stay put until more information was forthcoming rather than actively engaging with the crisis. However, a number of these organizations went into action and were effective in addressing the moment's critical needs by rapidly adjusting their strategic priorities based on their mission, expertise, and how other organizations were involved.

Beijing Chunmiao Charity Foundation, a foundation that focuses on providing professional social services for children and families in need, did not have much experience in responding to a public health crisis.[12] But when the pandemic hit, they quickly realized that their public fundraising know-how could serve other nonprofit organizations. They pivoted to become a fundraising platform for civil organizations providing direct services and aid to Wuhan.[13] During the initial stage of the COVID-19 breakout, one of the most critical challenges that faced many organizations was a mismatch in timing between fundraising and the purchase of key supplies, as the pricing of such supplies was volatile. Oftentimes, by the time funds had been raised for a key item, the price had already increased. To solve this problem, Chunmiao established a funding pool of one million RMB to facilitate the synchronous purchase of key supplies. They then raised funds to cover the costs. During their initial response to COVID-19 in Wuhan, Chunmiao raised more than eighty million RMB, and they became one of the most essential funders and backbone organizations for other nonprofits during the pandemic.

The Beijing Ginkgo Foundation, a private foundation famous for its fellowship program in supporting social entrepreneurs and leaders of grassrrot nonprofits played an important role in

supporting their fellows and partner organizations during the pandemic.[14] They understood that compared to other major private foundations and the government, the amount of funding they could provide for COVID-19 responses would be minimal and would not generate the social impact they desired. Instead of following the practices of other foundations or fundraising platforms, they identified three areas as their core grantmaking strategy: (1) establishing the Ginkgo Instant Action Fund[15] to support the administrative expenses of nonprofit organizations; (2) building supportive networks among Ginkgo fellows to better coordinate their efforts for COVID-19 response; and (3) carrying out an action-research program to help nonprofits systematically document and reflect on their responses during the crisis. By quickly understanding the need for frontline nonprofit organizations and adjusting their strategic priorities, the Ginkgo Foundation was able to leverage its financial and human capital for a larger social impact during the crisis.

Shanghai Hand in Hand Life Care Developing Center, one of the first nonprofit organizations in China to specialize in hospice care and psychological counseling, quickly became involved in sending key medical supplies to Wuhan when the city locked down.[16] Due to their strong connections to volunteers and donors both overseas and in China, they achieved an impressive record of raising funds and medical supplies for hospitals in Wuhan. However, as more organizations became involved in such work, particularly government organizations, Hand in Hand became aware that sending medical supplies to hospitals was no longer a critical gap they needed to fill. What became apparent was that there was a big void in the psychological counseling for Wuhan citizens dealing with the unexpected death or quarantine of family members. Hand in Hand leveraged the network they had built in the initial stage of their response as well as their expertise in hospice care to speedily design psychological counseling programs for patients and their families. The pandemic surfaced a need for people's deeper understanding of life and death, and Hand in Hand is currently exploring ways to integrate life education into their traditional hospice care program, after the pandemic.

Scaling Up Existing Organizational Networks through Cross-Sectoral Collaboration

No single organization or individual holds the solution to the problems when a whole city faces an unprecedented pandemic and lockdown. Implementation of all the strategies needed requires a network of organizations across sectors. Thus, grassroots nonprofit organizations must quickly develop reliable cross-sectoral partnerships with individuals and organizations that they previously may have never worked closely with. Such a wide network connecting suppliers, donors, hospitals, patients, and the government cannot be built overnight. Organizations must leverage their existing networks and quickly scale them up by identifying and working with key partners who can help them connect to their current and emerging clients and potential resource suppliers.

The Beijing Illness Challenge Foundation (ICF), an organization serving patients with rare diseases,[17] proved to be an exemplar in building partnerships and scaling their existing organizational networks. After the Wuhan lockdown, ICF received requests from patients with rare diseases in Wuhan and Hubei Province who were running out of drugs and having difficulties getting treatment and prescriptions. ICF was determined to help these patients, but they recognized that they did not have sufficient channels to purchase and deliver the drugs. ICF decided to collaborate with the China Alliance of Rare Diseases (CHARD)—a GONGO affiliated with the National Health Committee, which had comprehensive information on and access to hospitals, drug stores, pharmaceutical companies, and medical associations. The collaboration with CHARD ensured the supply of medicines. In addition to CHARD, ICF partnered with patient support groups for each rare disease to verify the information and needs of patients. In total, through CHARD and patient-support groups, ICF connected with over thirty pharmaceutical companies and drug stores and served patients with thirty-four rare diseases. ICF became the hub of the collaborative network during the lockdown period of Wuhan as a result of its reputation in providing high-quality services to rare disease patients, and the network they built with CHARD and patient support groups. With these key partners, ICF was able to speedily scale up their existing network with hospitals and patients who need their services and pharmaceutical companies that could provide the medications. ICF filled a

significant overlooked gap in services that faced patients with rare diseases when the whole country became unilaterally focused on COVID-19.

Building a Social-Media-Facilitated Decentralized Information-Flow System

During a major crisis like COVID-19, information can become chaotic and volatile. During the first two weeks after the lockdown in Wuhan, not even the government had all the information it needed about what hospitals would need to service a pandemic. This made it challenging to coordinate donations and the logistics of medical supplies even when organizations were successful in obtaining those resources. The traditional information-flow systems based on hierarchical control no longer functioned, as no individual or organization could verify and cope with the ever-changing information. With the use of social media by these nonlocal nonprofit organizations, a social-media-facilitated decentralized information-flow system emerged. This innovation coordinated the instant feedback between the needs of the hospitals and the supply from donors and volunteers.

ACE Youth, a nonprofit organization dedicated to building communications platforms for youth development, became involved in obtaining face masks and sending them to local hospitals.[18] Instead of controlling the information flow between the donors and local hospitals, ACE Youth brought together the doctors and hospitals needing face masks and donors who were interested in supporting them via WeChat, a Chinese social media platform. Doctors were able to send messages directly to the WeChat group regarding their needs, and donors could reply and then send the requested masks. The doctors then confirmed the arrival of the masks via photo. ACE Youth set the ground rules for how the WeChat group operated and encouraged the donors and doctors to be directly in touch with each other via the platform and to post updates of the process. By directly linking the donors and doctors on a platform where all users actively monitored the program status, ACE Youth was able to organize timely support to local hospitals and doctors.

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Nonprofit organizations have historically been key contributors when disaster hits a community. Their ability to pivot as needed comes from the agility it takes to survive in not always secure financial and, in the case of China, political environments. This agility proved to be a critical aspect of Wuhan's recovery from the pandemic's first wave, when the government was stymied for a time while figuring out how to mobilize its resources. The crisis pushed grassroots nonprofits, particularly those that were nonlocal, to make multiple adjustments and to innovate in order to rise to the needs of the people in Wuhan. It also stimulated wider participation of nonprofit organizations and volunteer groups that didn't necessarily have much experience in disaster relief.

Down the line, we will need to assess the consequences for these grassroots nonprofit organizations that stepped up without government backing during the initial outbreak of COVID-19. Will the system in China reward or punish their engagement? In their reflection reports, quite a few nonprofit leaders stated that the worst barriers they encountered during and after their response were not in fact the information and access problems as discussed in this article but rather the endless paperwork they had to prepare for subsequent auditing requirements, which affected their morale and wasted valuable time. But for funders that decided to go beyond those normal procedures in order to more effectively fund the COVID-19 responders—for example, the Beijing Chunmiao Charity Foundation— they had to take enormous efforts to keep their excellent performance rating. The financial reporting and auditing requirements during and after the initial pandemic relief cost some organizations enormous amounts of staff time and created burdens for grassroots organizations with tight administrative budgets. More importantly, it created a risk-averse incentive structure both for funders and frontline grassroots nonprofits to quickly engage in pandemic relief efforts when the social demand was the greatest. A grantor–grantee relationship that facilitates flexibility and prioritizes the expertise and voice of those who truly understand their client communities rather than solely the accountability requirements and control from the funders is needed. If we do not learn from these critical lessons that emerged from the COVID-19 crisis, we will continue to struggle when other crises hit.

It may be too soon to tell whether these innovative responses by nonlocal grassroots nonprofits prove to be a short-term phenomenon or if they will have long-term implications for the state-society relationship in China. That is beyond the scope of this article, and only time will tell. However, what has become clear in this systematic analysis of nonlocal grassroots nonprofits' responses to the pandemic is the value of a relatively independent and autonomous nonprofit sector. The success of the sector should be judged not only by the financial or medical resources they were able to mobilize but also for whom and how they were able to mobilize them. These grassroots nonprofits created a full array of public values, including broad citizen participation and support for marginalized populations, during the pandemic. As mega-disasters like the COVID-19 crisis become a new normal for our times, our governments need to recognize and leverage the unique values these groups can create, instead of treating them exclusively as a means to achieving or tool for governmental goals and purposes.

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Notes

[1] Anoop Misra, "Doctors and healthcare workers at frontline of COVID 19 epidemic: Admiration, a pat on the back, and need for extreme caution". *Diabetes & Metabolic Syndrome* (2020), 14(3), 255-256.

[2] Jiangang Zhu, Building community resilience during the pandemic relief" [in Chinese], *Explore and Free Views* 4 (2020): 216–23.

[3] Juan Li et al., "Fangcang shelter hospitals during the COVID-19 epidemic, Wuhan, China," *Bull World Health Organ* (2020): 830–841.

[4] Ming Hu and Mark Sidel, "Civil Society and COVID in China: Responses in an Authoritarian Society," *Nonprofit and Voluntary Sector Quarterly* 49, no. 6 (October 21, 2020): 1173–81.

[5] Chinese Ministry of Civil Affairs, Public Notice No. 476. And see Holly Snape, "China Alters Civil Society Rules, Allowing More Groups to Respond to Coronavirus," The China NGO Project, March 5, 2020, chinafile.com/ngo/analysis/china-alters-civil-society-rules-allowing-more-groups-respond-coronavirus.

[6] See, for example, Gabriel Corsetti, *As the Red Cross faces criticism for its handling of coronavirus medical supplies, donors turn to the Han Hong Foundation* (China Developoment Brief, February 3, 2020).

[7] Ting Zhao and Zhongsheng Wu, "Citizen–State Collaboration in Combating COVID-19 in China: Experiences and Lessons From the Perspective of Co-Production," *The American Review of Public Administration* 50, no. 6–7 (August 2020): 777–83.

[8] Xiaoyun Wang and Yuan Daniel Cheng, "Cross the river by feeling the stones: How did nonlocal grassroots nonprofits overcome administrative barriers to provide quick responses to COVID-19?," *Public Administration and Development* 41, no. 2 (May 2021), 91-98.

[9] For more on inequities in China's healthcare, see Daniel Alan Bey, "Omicron Shows Corporate Media Critics of China's Zero-Covid Strategy Are Way Off the Mark," Common Dreams, November 29, 2021,

www.commondreams.org/views/2021/11/29/omicron-shows-corporate-media-critics-chinas-zero-covid-strategy-are-way-mark.

[10] The examples and materials used in this article all came from an action research project that was built on the reflections of the leaders of these grassroots nonprofits. The Beijing Ginkgo Foundation carried out a grant to help establish this action research project. There were two stages. In the first stage, facilitated by the foundation staff and researchers, those nonprofit leaders wrote their reflections based on their involvement in the pandemic relief. In the second stage when the authors and other researchers are involved, they conducted a comprehensive analysis of those reports to find common themes, coupled with additional interviews if needed. Detailed methodology of this study see Xiaoyun Wang and Yuan Daniel Cheng, "Cross the river by feeling the stones: How did nonlocal grassroots nonprofits overcome administrative barriers to provide quick responses to COVID-19?," *Public Administration and Development* 41, no. 2 (May 2021), 91-98. Without specific and additional notice, all facts discussed in the illustration of examples came from practitioners' self reflection reports or facilitated reflections in this research project.

[11] Yuan (Daniel) Cheng, Jianxing Yu, Yongdong Shen, and Biao Huang, "Coproducing Responses to COVID-19 with Community-Based Organizations: Lessons from Zhejiang Province, China," *Public Administration Review* 80, no. 5 (September–October 2020): 866–73.

[12] Beijing Chunmiao Charity Foundation, accessed December 2, 2021, www.cmjjh.org/WebSite/Index.

[13] Chuanjin Tao, "Action Research Report for Social Organizations' Involvement in the COVID-19 Pandemic Control, " [in Chinese] *Beijing Ginkgo Foundation*, accessed December 6, 2021, http://www.ginkgofoundation.org/blog/975dd0d955e

[14] "Ginkgo Foundation in Brief," Who We Are, Beijing Ginkgo Foundation, accessed December 2, 2021, ginkgofoundation.org/who-we-are; and see "Investment in Emerging Entrepreneurs," *China Daily (Hong Kong),* February 22, 2017, www.pressreader.com/china/china-daily-hong-kong/20170222/282218010556840.

[15] More detailed information about the Ginkgo Instand Action Fund see http://www.ginkgofoundation.org/5, accessed December 6th, 2021.

[16] For a detailed description of the Shanghai Hand in Hand Life Care Developing Center, please see https://www.pdswa.org/new/ji-gou-feng-cai-shang-hai-pu-dong-shou-qian-shou-sheng-ming-guan-ai-fa-zhan-zhong-xinSLUG-cuqwF52s, accessed December 6, 2021. For their involvement in the pandemic control in Wuhan, see https://gongyi.ifeng.com/c/7tysWexKuw4, accessed December 6, 2021.

[17] The Illness Challenge Foundation, accessed December 2, 2021, chinaicf.org/category/info/id/42.

[18] "I think. I change.," Ace Youth, accessed December 2, 2021, aceyouth.org/.