

# Reflections and Suggestions on the "Community + Volunteer" Model of Epidemic Prevention and Control

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**ABSTRACT.** The outbreak of Newcastle Pneumonia is characterised by its pandemic nature and uncertainty, which makes the prevention, control and management of the epidemic much more difficult. The epidemic prevention and control model of "community + volunteers" was implemented in the community to effectively improve the efficiency of epidemic prevention and control. This model is community-led and identifies the needs of the community: social organisations are the main actors, organising volunteers and integrating public resources to provide efficient and low-cost epidemic prevention and control services for the community. The paper analyses the effectiveness and problems of the "community + volunteers" epidemic prevention and control practice in community H in Bayannur, summarises the experience and makes feasible recommendations to improve community epidemic prevention and control governance.

## 1 INTRODUCTION

"Community management refers to the self-management of various public affairs and public welfare undertakings of the community by social functionaries, community units and community residents under the guidance of the government. The content of community management includes various public affairs and public welfare undertakings of the community, including community culture, community education, community economy, etc." [1]

The "community social organization + volunteer" model is a long-term, stable service model between social organizations and the community. It is a community-led micro-governance model in which social organizations recruit volunteers through projects to meet community governance needs. The community provides social organizations with clear community governance objectives. Social organizations use their social work expertise to plan volunteer services, sub-divide service activities and recruit volunteers to provide low-cost and efficient social services to the community. Volunteers choose activities that suit their needs through the project characteristics of the social organizations, and contribute their time and skills for free to practice the volunteer spirit of "friendship, dedication, mutual help and progress".

## 2 "Community + Volunteer" Epidemic Prevention and Control Practice in Community H

H community is Bayannur city station office under the jurisdiction of a community, the total area of jurisdiction

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of about 0.3 square kilometres, the existing residents' households 1938, 5047 people, the total number of party members 264 people, including 222 members in service, in the district unit 6, the community existing staff 4 people. The community has a party activity room and an activity centre for the elderly. The community has a party branch, two branches (community branch and branch of non-economic organizations), a community committee, a residents' representative assembly and other organizational bodies. The various types of organizations are sound, with a clear division of responsibilities, orderly operation of the organization, complete systems and orderly management, so that the community resources have been fully developed and rational use, to achieve sustainable development of the community. [2]

The organization was registered with the municipal civil affairs department on 1 October 2016, with the service purpose of "practicing the spirit of Lei Feng and dressing up the city window", and the mission of leading the new style of the industry and bringing into play the positive energy of the society, with more than 100 people and 15,000 hours of service.

From August 9 to August 20, 2021, under the leadership of the H community, L social organizations, while coordinating the epidemic volunteer services, to care for others, care for the community as the main content, extensive volunteer services, and actively mobilize and organize college student volunteers to participate in Bayannur City H community epidemic prevention and control volunteer activities. L social organizations have called on more than 20 college student youth volunteers to participate in doing a good job. The epidemic prevention and control work, college student youth volunteers in the epidemic prevention and control period to play the role of

force, in their respective positions to assist the community to carry out personnel registration, information mapping statistics, telephone interviews, community-based epidemic prevention and control and other work. The total number of service hours exceeded 1700 hours. The L Organization has now started cooperation with Community H to ensure a regular, long-lasting service model to effectively improve community autonomy and promote social services.[3]

### **3 Effectiveness of the "community + volunteers" model of epidemic prevention and control**

#### **3.1 Improving the ability to integrate resources and reducing the work pressure of community workers**

Community social organizations and volunteers formed a synergy of participation, guiding all parties in the community to combine their strengths in scientific participation to form a strong synergy in stemming the epidemic. "Pioneering role". Always actively cooperate with the community to participate in the epidemic prevention and control, donating materials, conducting publicity and volunteering ..... When the volunteer recruitment order was issued this time, Social L was the first to send staff to participate in the community's staff screening, temperature scanning and propaganda guidance, which greatly alleviated the problem of insufficient community strength for epidemic prevention and control.

#### **3.2 Enriching the forms of organization and improving the efficiency of epidemic prevention**

Compared to the direct recruitment of volunteers by Community H, the recruitment of volunteers by Organization L is much more varied, with the organization making full use of its social work expertise to set clear requirements for the volunteers to be recruited, and to set out specific plans, divide the organization's internal structure and clarify the service content of the group before the project or service is carried out. In the course of the service, strict rules and regulations are in place to ensure that the volunteer team can complete the service. No household or person is left out. The grid was carefully divided to promote joint prevention and control of the epidemic.[4]

#### **3.3 Increasing public cooperation in epidemic prevention**

Volunteers put up posters on the entrance of buildings, cottage areas and bulletin boards and other prominent places in each community, as well as a letter to the residents; they set up door magnets for people in isolation at home, delivered all kinds of living materials and threw away waste rubbish; they set up registers and temperature detectors in the halls and at the entrances of each

community, registered and tested people who came to do business, and other kinds of volunteer services to serve the community residents and draw closer. They also set up registers and temperature testers at the lobby and at the entrance of each community to provide various volunteer services to the community residents, so as to promote mutual understanding and establish a good relationship with them and raise their awareness of epidemic prevention. At the same time, volunteers are able to understand the needs of the residents through telephone enquiries, house-to-house checks and face-to-face verification services, meeting their sense of access and constantly enhancing their awareness of participation in epidemic prevention work. Community residents are promoted to sign up as volunteers to enhance their enthusiasm for volunteering and participating in specific epidemic prevention work.[5]

### **4 Problems of the "community + volunteer" epidemic prevention and control model in practice**

#### **4.1 Digital governance in community outbreak prevention and control practices needs to be strengthened**

Community digital management hardware and software are lacking, the community digital incentive mechanism has not yet been established, the progress of building community digital websites is slow, information resources are integrated slowly, information publication is slow, and most communities are unable to open official websites to make special announcements about the epidemic situation. Thirdly, basic community information is incomplete and not made public in a timely manner. During the epidemic, many communities adopted the form of propaganda vehicles to broadcast audio recordings to promote prevention knowledge, which achieved certain results, but residents who were at home behind closed doors did not listen well and could not achieve the expected effect.[6]

#### **4.2 The volunteer mechanism is still immature and lacks incentives**

During the fight against the Newcastle Pneumonia epidemic, most of the volunteers were able to respond positively to the call of the organisation and the needs of the community to prevent and control the epidemic, but there were also cases of insufficient voluntarism. At the same time, the channels for volunteers to participate in volunteering were not smooth enough and the publicity channels were relatively single. Most volunteers do not know how to participate in volunteer services and how to communicate about service matters. The community itself lacks a care and incentive mechanism for volunteers to carry out volunteer services. For community volunteers, participation in volunteering is partly to reflect their own values, to bring psychological and emotional pleasure and satisfaction through volunteering, and to gain the necessary social work skills and experience. However,

community volunteering work still needs financial support. For a long time, due to the lack of financial support, volunteers have been participating in volunteer services with serious formalism, simplistic service forms, low-end service quality and single service content, resulting in some volunteers being physically and mentally exhausted and lacking passion. At the same time, although volunteers are mainly volunteers, they have invested a lot of time and energy for a long time, and even if they do not seek to get material rewards, they still want to be spiritually satisfied, and there is a lack of work protection and incentive mechanisms for volunteer services at all levels.

### 4.3 Lack of awareness and capacity of volunteers to serve

Community volunteering work requires a certain level of expertise, physical strength and ability, so there is a greater demand for younger volunteers. The delivery of epidemic prevention materials and temperature testing often require male volunteers with better physical conditions, but in specific practice it was found that the proportion of female volunteers participating in community H was higher than that of male volunteers. Although some male volunteers, such as workers who have stopped working and ex-servicemen, have joined, they still cannot meet the needs of epidemic prevention and control. At the same time, there were problems such as some elderly people who did not have smartphones and could not scan the codes independently, which required volunteers to record flexibly. [7] However, most of the volunteers do not have professional knowledge and skills, resulting in a lack of heart to meet the service needs. This shows that volunteers are not only lacking in their own professionalism in helping to prevent and control epidemics in the community, but also lacking professional guidance from the community, streets and other higher authorities.[8]

## 5 Conclusion

In summary, based on the problems identified above, the following optimization paths are possible: 1. Strengthening the implementation of digital governance and improving information platforms; 2. Improving community service systems and sound incentive policies; 3. Enhancing the service awareness and comprehensive quality of epidemic prevention personnel and strengthening volunteer training.[9]

Firstly, faced with the problems that arise in community practice of epidemic prevention and control, communities should accelerate the improvement of digital community management and construction. Relying on modern information technology, the organic combination with the community governance model breaks the limitations of the traditional face-to-face approach to crisis management, and provides multi-level and all-round protection for epidemic prevention and control, fully realizing the registration, collection, aggregation and reporting of information in a "no-touch" situation by means of WeChat mini-programs, QR code scanning and mobile phone APPs. The information can be registered,

collected, summarized and reported without any physical contact.[10]

Then, social workers and volunteers, as the two main bodies of the linkage model, cannot carry out services for their clients with their own problems. Therefore, in the face of the lack of professional ability of volunteers, it is essential to establish a perfect training system for volunteers. In the linkage model, volunteer organizations can maintain their original team groupings, but they cannot stick to the same groupings as before. It should be understood that after the establishment of the linkage model, social workers and volunteers should exist as a whole, with a common identity. In the process of volunteer training, social workers should make use of their professional strengths to take responsibility for the training of volunteers and work together with the community to work out a complete training schedule and basic theoretical and technical training for all volunteers, and then provide targeted and individualized group training for volunteers to meet the service needs in the linkage process. The establishment of a sound training system will lay a good foundation for the subsequent linkage services, and the cooperation between social workers and volunteers will be smoother and the linkage structure will be more stable and effective.

## REFERENCES

1. Xi Jinping: "Speech at the Congress to Celebrate the 100th Anniversary of the Founding of the Communist Party of China", Seeking Truth, No. 14, 2021.
2. Wang, H., Wei, N., and H., H.. Community Management [M]. People's University of China Press: 21st Century Public Management Series, 2012.7
3. Yu Ke, Fan Jinping, Zhou Zhixing, Yang Juan. A study on community grid-based governance model from the perspective of epidemic prevention and control: a case study of Leiyuqiao community in Zhangjiajie[J]. Intelligent Building and Smart City, 2022(07):4143. DOI:10.13655/j.cnki.ibci.2022.07.012.
4. Kong, Nana, Zhu, Jie. A study on the collaborative governance of multiple subjects in the community from the perspective of the prevention and control of the new crown pneumonia epidemic[J]. Journal of Henan University of Technology (Social Science Edition), 2022, 23(04):4248. DOI:10.16698/j.hpu(social.sciences).1673-9779.2022.04.007.
5. Liu, Minghui, Hu, Xia. Research on the long-term mechanism of urban community volunteerism in the context of the new era--a case study of C district in N city of J province[J]. Economist, 2022(02):118-120.
6. Yu Zucheng, Cheng Jiwei, Huang Jia Chen. Volunteer mobilization in community epidemic prevention and control: the role and its optimization strategy--a case study of Chongchuan District, Nantong City[J]. China Social Organization Research, 2020, 19(01):86-107+260-261

7. Qi Yanpo. Research on improving community governance countermeasures in H city in the context of the new crown pneumonia epidemic [D]. Hebei University, 2021.
8. Liu Tao. Prevention and control strategies of major rural epidemics and their governance logic under risk society [J]. *Journal of Tianjin Administrative College*,2020,22(03):87-95.
9. Zhang Jun, Liu Yu. Service effectiveness of the "volunteer+community social organization" model in the prevention and control of the new pneumonia epidemic and its reflections[J]. *Journal of Tianjin Administrative College*,2020,22(03):79-86.
10. Tang Yixuan. Research on the long-term mechanism of "social worker + volunteer" community service model[D]. Anhui University,2018.