Useful Mutual-Aid Projects in Response to COVID-19,

Experiences from Chinese Volunteers in Response to Coronavirus Crisis in Wuhan

Dear Friends,

Over these months, we have received so much help from the other parts of the world, and we sincerely appreciated the generosity that has been offered to us. We have grown and have been learning a lot from this crisis. We are all connected, we have all been there before, and we absolutely understand your fear and your suffering at this moment... Therefore we would like to share with you some of the lessons we have learned. We share the world. We shall meet in a place where there is no darkness anymore.   3/27/2020

CONTENT

PART 1 - INSTRUCTION

- This file is contributed by volunteers in **China's mutual aid groups** for the response of COVID-19. It summarises the experiences and coping skills of many voluntary mutual aid groups and the work they have done from January to March. This file aims to **provide information and references for overseas voluntary teams;**

- This file includes the information of different situations based on the experiences that we have got, however, **there might be some shortages and drawbacks.** For overseas voluntary groups, when reading this file, **please try to create a more customized plan for the response of COVID-19, based on the actual conditions of your location.**

- This file does **NOT** include tasks that are not able to be finished by mutual aid voluntary groups alone. The combating of COVID-19 requires the cooperation between government power and local volunteer groups. **Usually mutual aid groups have their own limitations**. If something happens and it is beyond your ability to solve, please contact your local government or governmental organizations immediately, and **do not blame yourself for the flesh being weak.**

- If you have any questions, concerns or want to add more experiences, please provide your feedback **in comment.** Your feedback will be highly appreciated.

PART 2 - MEDICAL AND PSYCHOLOGICAL SUPPORT

1. Provide Online Medical Consultation for Patients in Different Situations

- **Applicable Situations:**
  a. Suspected Patients: People who were suspected already infected by COVID-19. However, due to the **risk of "cross-infection" in hospitals,** they were terrified to go to hospitals and wish to get medical advice with lower risk through online medical consultation .
  b. Confirmed Patients: People who were already diagnosed as confirmed cases for COVID-19, while **unable to be hospitalised** due to the **shortage of medical resources.** They have no choices but have to quarantine at home. They expected to communicate with doctors directly about the progression of their disease and methods that they can take to deal with it.
  c. Non-COVID 19-Patients with other diseases: They are afraid to go to hospital because of "cross-infection" , or their medical needs cannot be met due to the shortage of medical resources. They expected to receive online medical consultations to get medical advice support till they were hospitalized.

- **Coping Experience:** 【NCP Relief Network】 contacts hundreds of on-the-job doctors to **provide online medical consultations** for patients. At the same time, they connect many volunteers with professional backgrounds (social workers, psychology, social welfare) to **provide counselling and psychological support** for COVID-19 confirmed patients/ suspected patients.

- **Reference:** https://shimo.im/forms/GokLVJMBnQhBF032/fill "Primary Triage Form"

- **Created by**: 【NCP Relief Network】

- A summarized file of online medical consultation platforms which provide services for people who could speak CHINESE worldwide: https://shimo.im/docs/tjVdyR8HhCvXgycQ

2. Provide Oxygen Concentrator for Patients Who are in Home Isolation

- **Suitable for these circumstances:**
  a. Because of the shortage of local medical resources, confirmed COVID-19 patients **were in home isolation without immediate medical support**. They find it difficult to breathe.
  b. To provide corresponding support for the rehabilitation of severe patients after being discharging from hospitals
  c. Our experiences show that: First, **getting oxygen treatment can hugely relieve patients' symptoms of shortness of breath**, as well as **reducing the risks of organ damage caused by prolonged hypoxia**. Therefore, this action can help us gain more time for them before they get treatment in hospitals. Second, providing oxygen concentrators at home can **reduce the possibilities of patients with mild symptoms deteriorating to severe symptoms.** Thus, this action can help relieve the problem of limited ICU resources squeezed by a large number of critically ill patients.
- **Coping Experiences:** In Wuhan, *Ginkgo Fellows in COVID-19 Relief Action* has worked with *NCP Relief Network* collaboratively to provide free oxygen concentrators and fingertip pulse oximeters for patients who were isolated at home. The application process is: First of all, patients fill online application forms to provide information of their status, including **CT images of their lungs**. Then these applications were **reviewed and rated by senior doctors**. Next, volunteer drivers will deliver these machines to patients' community, by following the **"no-contact delivery protocol".**
- **Reference of this application process:** https://shimo.im/forms/6DkxQY19nPTlF9Av/fill
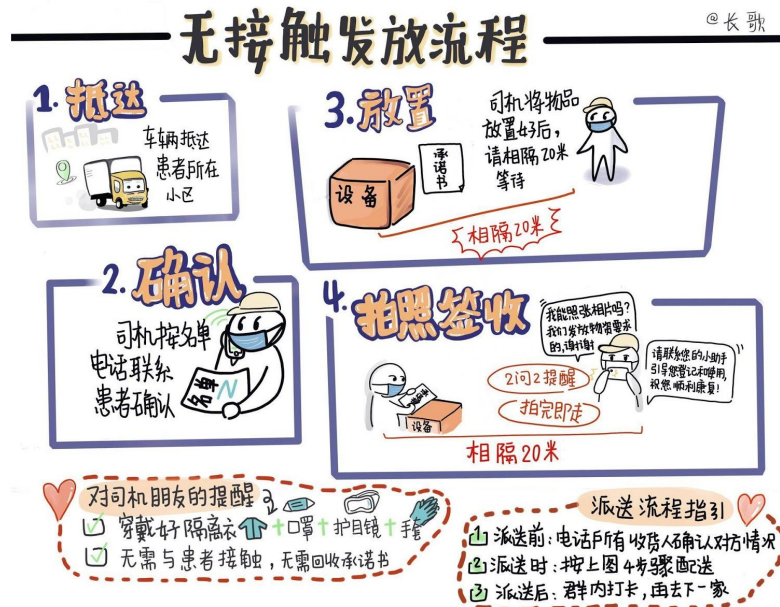- **Created by:**【NCP Relief Network】

Fig. "No-Contact" Delivery Flowchart

(provided by 【Ginkgo Fellows in COVID-19 Relief Action】, other languages versions are on their way)

3. Create Psychological Support-Kit During the Pandemic

- **Suitable for these circumstances:** During the outbreak of an infectious disease, usually there will be a **considerable number of patients and non-patients** suffering from mental issues with different levels. Since COVID-19 is an infectious disease, in-person mental support channels are being interrupted, the importance of online mental support methods **has increased significantly**.

- **Coping Experiences:**
  a. **Staffing:** 1 designer/illustrator. 1 information organizer, several information collectors
  b. **General Guidelines:** Resource integration and Guided allocation. On one hand, **gather all available online mental support resources**; On the other hand, **categorize different levels of mental health problems**. Guide people seeking online mental support to the most suitable channels.
  c. **Allocation Logic:** Methods of categorizing different levels of mental illnesses can refer to this [website](). According to different severities, the allocation logic can basically be summarized as following examples: guide suicidal patients to suicide prevention hotlines; point people with anxiety, mild depression, or moderate depression to mental support hotlines, etc.
  d. **People with Special Needs:** For people who consistently refuse to receive mental aid, volunteers can try to build up 【online recovery groups】 to reduce their resistance for receiving mental support; Besides, for volunteers and other people who may need it, it's

suggested to set a special module on the website/app for them and guide them to find suitable services.

    e. **Support Tools:** We suggest using **psychological assessment scales** that are **proven to be useful in clinical practices** on the homepage of the website, to help volunteers categorize patients. We can also use illustrations and graphs on the homepage of the website/app to help users to gain better understanding.

    f. **Notice:** It is important to <mark>consult with qualified counselors/psychiatrists</mark> to determine which methods, what kinds of assessment scales should be used.

- **Reference:** https://shimo.im/docs/kQdXRWWYWRjpvcwQ/read
- **Created by:** 【NCP Relief Network】

4. Create End-of-Life Support Handbook

- **Applicable Situations:** When hospitals have provided the notification of critical illness to patients' family members, they would inevitably experience losing their loved ones. This is the time to write an end-of-life support handbook to help patients with critical illness and their family members to get through this difficult time.
- **Coping Experiences to With It:** Recognize the needs→Research→Draft and finish the handbook under the supervision of qualified counselors/social workers.
- **References:**
  - <End-of-Life Support Handbook (for family members)> → https://shimo.im/docs/dQkEVzgv0VCKFn
  - <End-of-Life Support Handbook (for volunteers)> → https://shimo.im/docs/6gcPvdhtrqV989JX/
- **Created by:** 【NCP Relief Network】

5. Provide Mental Support for Volunteers

- **Suitable for these circumstances:** As volunteers are exposed to disaster response scenarios, they may have **stress reactions,** such as insomnia, stressed mood, anger, etc, as a result of receiving and dealing with emotions like anxiety and depression from their service users.
- **Coping Experiences:** Provide recovery tips/group chats/online tutorials/webinars for volunteers. Ask for supervisions from senior counselors/social workers.
- **Reference:** <Volunteers' Self-Care: How to deal with Compassion Fatigue during Epidemic>
- **Created by:** 【NCP Relief Network】

6. Protect Pregnant Women, New Moms and Infants Against COVID-19

- **Suitable for these circumstances:** Considering the risk of cross infection and a running of medical resources in some regions, hospitals and medical institutions may **NOT** provide regular pregnancy and childbirth services. Therefore, it is essential to create **online support groups** to **provide consultations** on everyday living, medical support and mental health support **to ensure the physical and psychological wellbeing of pregnant women**, new moms and their babies.

- **Experience in response to the situation:**
  a. Start online support groups dedicated to different stages of pregnancy or women's physical conditions. **DO NOT involve topics related to COVID-19**. **Only discussions on knowledge of pregnancy and topics of daily life** are allowed in groups.
  b. **Start a special group for those who are approaching labor (ex. in 45 days).** Experienced volunteers are needed to assess qualifications of maternity departments. Besides, in order to **reduce long hospital stays** among pregnant women, **obstetricians are essential online to provide consultations.**
  c. **Start a special group for post-delivery women.** Obstetricians and pediatricians are needed online to provide guidance for postpartum care and breastfeeding.
  d. Create **work shifts for volunteers**. Volunteers should **be available 24 hours a day** to deal with emergencies and help those who need pregnancy check-ups. It would be better for volunteers to have relevant experience of pregnancy and child rearing, In addition, **<u>good emotion management is also required</u>.**
  e. Considering an overwhelming workload, experienced volunteers can lead training for new ones on how to detect pre-labor signs and symptoms. <u>Volunteers and team leaders can also create online groups to share experience, discuss typical cases as well as schedule shifts.</u>

- **Reference:** Protect pregnant women, new moms and infants against COVID-19
  [疫情孕妇及新生儿照管建议.docx](#)

- **Compiled by:**【NCP Relief Network】

7. Assist with Community Needs During Coronavirus Outbreak

- **Applicable under these circumstances:** Considering the lack of knowledge on COVID-19 among residents and manpower shortages in communities, volunteers can assist with local community needs in efforts to curb COVID-19. Tasks may involve COVID-19 updates, isolation and quarantine monitoring, clerical and manpower support.

- **Experience in response to the situation:**

a. **Raise awareness of COVID-19 in public**. Cooperate with the local media to communicate COVID-19 updates **via all media channels.** Do the promotion within certain areas to ensure the effectiveness. Wemedia is also preferred in order to help people learn more about COVID-19.

b. **Investigate household transmission.** Community should send staff and volunteers to investigate travel history and health conditions (look out especially for symptoms such as fever, cough and shortness of breath) in the residential unit. Besides home quarantine, it's necessary to keep monitoring the contact history and physical conditions, **ideally through internet-based means of communication.** Students should report their health conditions to schools every day.

c. **Provide manpower support.** If people in the community have no concerns of getting laid off, inadequate supplies or medical resources, persuade residents to travel less using public transport and limit in-and-out numbers with use of community pass or health codes which are either being delivered to people by authorities or applied by residents. These are all effective methods to contain the spread of COVID-19, however, there could be a shortage of manpower in the community so volunteers could help relieve the burden.

- **Compiled by:**【NCP Relief Network】

PART 3 - OPERATE AN INFORMATION SYSTEM AGAINST COVID-19

1. Make an Information Sheet on Numbers of Beds Available in Designated Hospitals

- **Applicable Situations**: If there is a running of medical resources and a delay in information disclosure, suspected cases could **have a difficult time to locate the suitable medical resources.** In this circumstance, volunteers can help **collect information** and **organize** it in information sheets.

- **Coping Experience:**

a. **Staffing:** Form Designer(1-2); Consultant with medical background(1); Poster Designer(1-2); Volunteer responsible for collecting and processing information(2); Volunteer responsible for verifying information by phone(For example, each volunteer needs to verify 15 contacts.)

b. **Preparations Stage:**

i. **Download and assemble the lists of hospitals:** According to China experience, **the lists of designated hospitals** will be released on official websites. Please check your local websites to get updates. (**Notice:** <mark>three most common needs in China</mark>: suspected cases are waiting to be tested; confirmed cases need to be hospitalized; confirmed patients with special health condition, eg. pregnant women ask for pregnancy check-ups and patients with kidney failure have to do hemodialysis regularly.

ii. **Collect information of hospitals :** Find out telephone numbers, addresses, etc. of designated hospitals and enter the information into the information sheet.

iii. **Staff coordination:** Having filled most information in the sheet, the next step is to assign volunteers to different tasks:

   ○ Assign volunteers to **verify information of hospitals by telephone.** The numbers of volunteers depend on how many calls need to be made.

   ○ **Decide how frequently a volunteer has to make a call** according to the level of emergency.

   ○ **Collect questions from people with different needs.**

iv. **Create a shift schedule:** Usually, there will be large amounts of phone calls to make. Therefore, in order to verify information without any delay, **shifts must be scheduled.** Make sure that every volunteer confirms the shift one day before. The following items can be listed on the schedule:

   ○ **Numbers of volunteers** to make phone calls; **frequency** of making the phone calls; **when to finish all information verification;**

   ○ Questions collected from different people.

c. **Adjustments Stage:**

i. Share experience on how to make phone calls: invite experienced phone call volunteers to share call scripts in group chat. Members could discuss and revise the scripts and release a comprehensive version in groups for everyone's reference.

ii. Please refer to the first and second points in Adjustments of The Medical Resources for Non-coronavirus Patients.

iii. Form design: Forms should be taken seriously as a product and should be designed meticulously.

   ○ **Advantages of online sheets:** mature platforms are usually steady so volunteers do not need to build and test the forms from the scratch. It is <mark>time-saving</mark> and convenient to design different forms online. Those who will adjust the form content frequently should use these platforms.

- ○ Disadvantages of online sheets: depending on the choice of online platforms, the readability, visualization effectiveness and user experience could be inferior to Apps and H5 pages.
- ○ The main idea is to **integrate resources, sort requests and categorize information** with a <u>straightforward design</u>. Given that the information sheet contains large amounts of information, a navigation menu must be present on the home page to help people quickly find the information they need. If there is too much information in one page, then child pages should be used to provide more details.

d. **Work Flow:**

    i. **Information integration:** See b. **Preparations Stage**

    ii. **Requirements clarification and information classification:**

        1. **Clarify the target audience:** Confirmed/suspected COVID-19 case or volunteers? Then put the information in different categories accordingly.

        2. Make a detailed plan to **classify information** based on local spread of COVID-19 and *Diagnosis and Treatment Protocol for Novel Coronavirus Pneumonia (Trial Version 7)*. For example, Chinese volunteers <u>refer to categorizations of hospitals and different levels of symptoms </u>(severe or mild) released by the National Health Commision of PRC while doing the work.

        3. People may have severe symptoms or mild symptoms. **Guide them to different medical institutions.**

        4. To ensure the effectiveness of information and positive feedback loop, a message board could be used so that users could provide more real-time updates on COVID-19 or hospitals.

        5. For those who are not sure whether they are infected, we can provide **a self-test page** for them (Direct them to different medical resources according to the diagnostic results).

    iii. **Supplies Sorting:**

        1. Have a clear view of relevant information that can be provided to people;

        2. **Plan ahead for future target groups** and information needs when the current requests for information are mostly fulfilled.
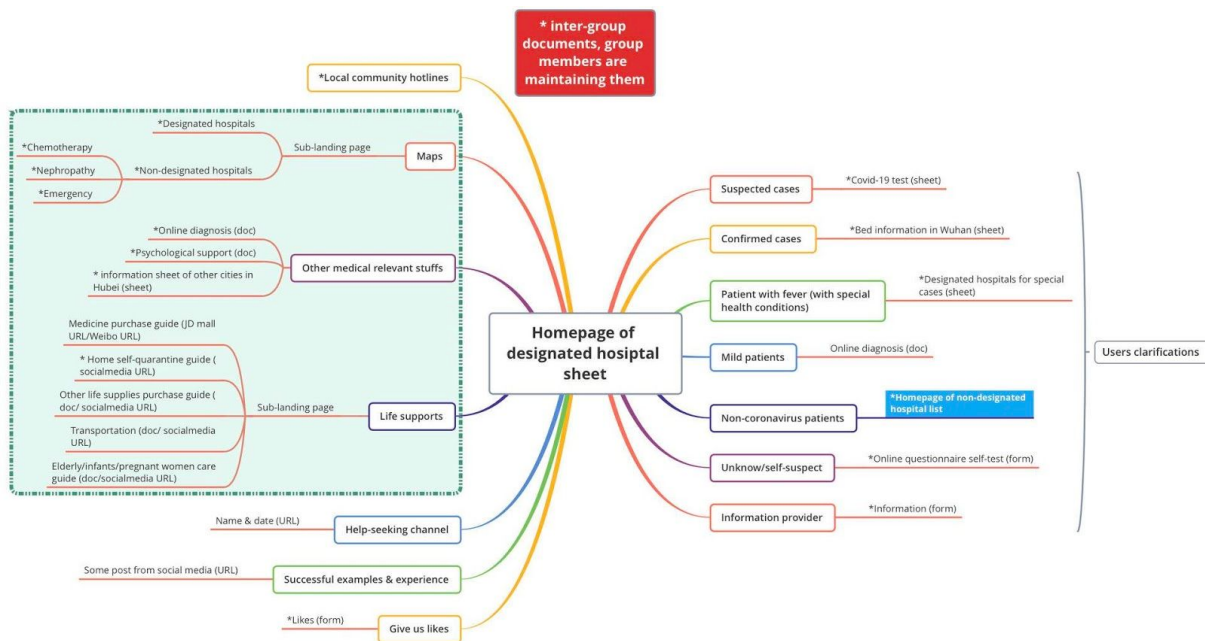
Fig. A mindmap of workflow: the graph above is just for reference.

e. **Page Design:**

Given the fact that most people will access the material on mobile devices, the user interface **should be mobile-friendly.** To avoid any malfunction, the sheets/materials need to be run and tested under different OS (Android, ios, iPad OS, etc) with different models and brands before release.

○ Create a clear layout of content in the sheets, and try to use hyperlinks to connect related sections.

○ Keep the language **clear and instructive.** Add notes to allow the readers to easily understand how to use the materials, e.g. [Click Here] [Zoom In to View]

○ **Be clear and fully aware of the linkage between pages** before creating a new sub-page, such as how to direct to this page from a relevant page. If the logic is complex, mindmap could be a helpful tool to visualise the relations between pages.

○ Create a message board to allow quick submission of new information (please refer to Part 3.(1).Coping Experience Point d.ii.3). The link to the message board should be easily accessible in all pages considering its importance.

○ An experienced designer is needed to balance the visual and functional benefits.

● **Reference:** https://shimo.im/sheets/hPg9t9xT6GtkC3p8/MODOC

● **Compiled by 【**BRIDGE bed team**】**

2. The List of Hospital Resources for Non-coronavirus Patient during the Pandemic

- **Situation:** The shortage of healthcare in hospitals happens because a large number of patients are confirmed with coronavirus. However, the authority cannot give a list of hospitals for non-coronavirus patients, so patients with other diseases can **NOT** receive the treatment in time. At this time, volunteers can **make a list of hospitals nearby for NON-coronavirus Patients.**

- **Experience applied to this situation:**

  a. **Staff:** Form Designer(1-2); Consultant with medical background (1); Poster Designer(1-2);Assistant responsible for collecting and processing information (2);Assistant responsible for verifying information by phone(normally, each assistant is responsible for verifying 15 calls.)

  b. **Preparation**

      i. **Be clear about what the patients need:** <u>make a list about treatment that can **NOT** be delayed,</u> such as dialysis, radiotherapy and chemotherapy (The list can be made by the medical consultant and information from on-line help messages. The specific details depend on the local situation.)

      ii. **Be clear about which department the patients should ask for help:** <u>find out the apartment which corresponds to your symptoms.</u> For example, Urology Department is for dialysis and Oncology is for radiotherapy and chemotherapy.

      iii. **Make a list of hospitals available for non-coronavirus patients:** <u>Search the hospital with departments listed above and</u> **make a cross-comparison** <u>with designated hospitals for coronavirus treatment,</u> then <u>make a list about hospitals for non-coronavirus patients.</u>

      iv. **Collect information about these hospitals:** related information such the phone number and address should be attached to the list of hospitals available for non-coronavirus patients. The list should be copied and include all related information.

      v. **Coordination for details about the list:**

          1. Arrange volunteers (depends on how many hospitals need to contact) for verifying the information

          2. Plan how frequently the contact should be made with the hospital by the urgency

          3. **Summarize the information that need to be verified** according to help message and the condition of departments that can provide treatment

  c. **Adjustments**

      i. Adjustments made by the updated help information:

          ○ Is there any change about the hospitals on the original list of hospitals available for non-coronavirus patients?

- ○ Are there any departments that should be added to the list and verified for the existing hospital?
- ○ Is there any new information that should be verified?
- ○ Evaluate how frequently the information should be verified. The verification can decrease as the need declines, and vice versa.
  - ii. **Make a guideline by information listed above and needs from patients (strongly recommend):**
    - ○ **Advantage of the poster:** as a picture, the post should be easily spread.
    - ○ **Disadvantage of the poster:** the information cannot be updated, which means some posters need to be revised as frequently as possible when the information changes. Plus, sent out posters cannot be monitored or revised.
    - ○ **Suggestions:** the date of posting should be emphasized, and the QR code which contains updated information should be shown on the poster.
    - ○ To decide the guidelines
- **Case study**
  - a. Guideline for patients who needs dialysis
  - b. Guideline for patients with cancer
- **Reference:** https://shimo.im/sheets/r53JVWge4LsjFe3m/32n1D
- **Compiled by** 【BRIDGE bed team】

3. Guidelines for Hospitalization Procedure

- **Situation:** Hospitals are overcrowded in certain areas, so a large number of patients in critical condition or close to the critical condition can NOT be hospitalized. Many patients have no idea about **hospitalization procedures** or **have difficulties in communication with community** workers. They also need **more clear information** about home quarantine and medicine purchase.
- **Experience applied to this situation:** The essential information should be extracted through the communication between patients and their family, community and hospitals. Take Wuhan for example, their guideline mainly covered hospitalization procedures and communication within their communities. Details are included in the reference.
- **Reference:** 《梳理入院流程》
- **Compiled by** 【NCP-Network Relief】

PART 4: AUDIT, DISPATCHMENT AND MANAGEMENT EXPERIENCE WITH DONATED ITEMS

1. Quality Control for Medical Materials

- **How it works:** During the outbreak, many people want to donate medical materials to hospitals. At the same time, numerous medical equipment suppliers or intermediaries send out sourcing information in various groups. Donors who are **not familiar with the standards of medical supplies** may not be able to tell the authenticity of the source information and may buy supplies that do not meet the requirements of the donation

- **Response experience:** We **MUST** require the suppliers to **provide clear pictures showing the appearances of the commodities**, as well as the **"THREE certificates (product inspection report, business license copy, medical equipment business license).** We should also pay attention to the following:

    a. The subject of the three certificates must be **consistent**, and the product, production unit and record number can be checked in the website of the State Food and Drug Administration (if not found in the website of SFDA, you can go to Qixinbao or other provinces and cities food and drug administration website in the [data query] inquiry menu);

    b. According to the registration record, the **appearance of the product** shall be consistent with its Chinese medicine license number (registration number), product name and manufacturer;

    c. Make sure that there is NO alteration, forgery, muddling through and misplacing of the three certificates;

    d. **Pay extra attention** when the supplier demands a deposit without showing the supply of goods!

- **Reference:** *"medical materials screening (everyone can understand)"*
- **Production Team:** 【Huhai UNI】

2. Dispatchment and Management for Medical Materials

- **Applicable situation:** In the process of dispatching donated materials, volunteers need to communicate with multiple stakeholders such as the donor, recipient, transportation party, warehouse party, etc., and to collect and follow up the material information. This section of the document tries to clarify the flow of material dispatching and management, taking Wuhan as an example, as a reference to foreign partners.
- **Coping experience:**

a. **At least 4 volunteers** are needed to contact the donor, recipient, transport and warehouse respectively. The division of labor is as follows:
   i. Contact with donors: the volunteers may receive a large amount of donation information in a short time. In order to facilitate sorting, it is suggested to **remind the donors to fill in the information in a certain format;**
   ii. Docking the receiver: **verify the information of the receiver** and **determine the mode of transportation;**
   iii. Docking carrier: **provide receiver information** and **record carrier information;**
   iv. Docking warehousing party: **provide information of the transport party**, so that the warehousing party is ready to pick up the car;
b. Donation management: including information collation and logistics tracking. Among them, the material information can refer to the material dispatching management record form (template), can also use Guanjiapo and other software to operate;
c. During the material dispatching process, the volunteers should **save pictures or videos for verification in time**, and **publicize** the relevant donation information **on a regular basis.**

- **Reference:** Guide to material donation scheduling management
- **Production team:** 【Huhai UNI】

PART 5: COLLECTIVE FILES OF OTHER EXPERIENCES

Ginkgo Foundation: the Interviews of Relief Experience in Wuhan

- **Interviewee**: LIN Hong, one of the founders of Ginkgo Foundation.
- **Content**: the organization, execution, and verticality of the Ginkgo volunteer operations in Wuhan.
- **Link** to the Article: https://mp.weixin.qq.com/s/wFhphfZG72M-xjZ7KUi68A
- **Production team:** 【Ginkgo Foundation】

Catalogue for Local Mutual-Aid Communities worldwide

- **Content**: Collect the local mutual-aid projects in different countries.
- **Link**:https://docs.google.com/spreadsheets/d/1Fw6ru83MuRaerWTCyPPjbcwIhXaXIqy_SbE_8bAyB2M/edit#gid=0
- **Production team:** EPU-JSV, BRIDGE Bed Team

THANK YOU!

两个月以来，我们得到了来自全球各地人们的关怀与帮助，也在灾难中成长。此刻我们亦与你们同在，一同承受恐惧、焦虑，我们愿分享之前的所有经验，陪伴此刻的你，一同寻找走出困境的门。

兩個月以來，我們得到了來自全球各地人們的關懷與幫助，也在災難中成長。此刻我們亦與妳們同在，一同承受恐懼、焦慮，我們願分享之前的所有經驗，陪伴此刻的妳，一同尋找走出困境的門。

두 달 동안, 우리는 세계 각지의 사람들의 관심과 도움을 받으며 재난속에서 성장하기도 한다. 지금 이순간 우리도 너희들과 함께 있어 같은 우려와 두려움을 견디고 있습니다. 우리는 이전의 모든 경험을 공유하고 함께 난국을 헤쳐나갈 문을 찾기를 바란다.

この2ヶ月間、私達は世界各地の方々からご関心とご支援いただき、災難の中で成長しています。今、私達は皆様と共に、恐怖と不安を耐え、今までの全ての経験を共有し、今のあなたと一緒に、苦境から抜け出す扉を探します。

Durantes los últimos dos meses, hemos recibido el apoyo y la solidaridad de la gente de todo el mundo. Al mismo tiempo, hemos aprendido mucho del desastre. En este momento, estamos juntos con ustedes, sufriendo el temor, la ansiedad. Entonces estamos dispuestos a compartir las experiencias que hemos ganado para acompañarlos a buscar un camino para sacarnos de esta catástrofe mundial.

Over these months, we have received so much help from the other parts of the world, and have appreciated the generosity that has been offered to us. We have grown and have been learning a lot from this crisis. We are all connected; we have all been there before- we absolutely understand your fear and your suffering at this moment...Therefore we are willing to share with you some of the lessons we have learned. We share the world. We shall meet in a place where there is no darkness anymore.

Pendant ces derniers deux mois, nous, La Chine et le peuple chinois, avons été préoccupés et aidés par le peuple du monde entier, et nous nous sommes en même temps améliorés avec le processus de cette catastrophe. En ce moment, nous sommes toujours là avec vous, en partageant la peur, l'angoisse et sûrement l'expérience avant. Que vous réussissiez à sortir de ce dilemme et détresse, accompagnés par nous.

Seit zwei Monaten haben wir Fürsorge und Hilfe von Menschen aus aller Welt bekommen. Wegen des Coronavirus haben wir viel erlebt und gelernt. Jetzt stehen wir zusammen, und wir werden die Angst teilen. Wir wollen die Erfahrungen, die wir schon gesammelt haben, mit euch teilen. Hoffentlich können wir die Schwierigkeiten bewältigen.

Negli ultimi due mesi abbiamo ricevuto tantissima assistenza da tutto il mondo e abbiamo imparato molto dal disastro. In questo momento siamo anche con voi. Comprendiamo la vostra paura e ansia perché l'abbiamo provata. Siamo qui, disposti a condividere tutte le nostre esperienze e ad accompagnarvi, cercando insieme la chiave per contenere i contagi. Tutti uniti ce la faremo.

За эти две месяцы мы получили так много помощей и забот от людей со всех концов мира и многому научились от этого кризиса. В этот момент мы с вами. Мы сочувствуем вашим страхам и переживаниям и готовы подели ться опытом и советами, чтобы найти выход из тупика вместе.

طی دو ماه گذشته ما همدلی و کمک مردم همه ی جهان را دریافت کردیم و در میان سختی ها پیشرفت کردیم. در حال حاضر نیز ما با همدلی و همدردی کنار شما ایستاده ایم و حاضریم که تجربیات مقابله با کودک 19 را به شما به اشتراک بگذاریم و با شما همراه باشیم تا با یکدیگر مشکلات را پشت سر بگذاریم.