

Rethinking Asset-Based Community Development Strategies in Post-Earthquake China: The Role of Social Capital

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To date, the discussion of asset-based community development strategies has focused on the ways in which tangible assets contribute to the material aspects of life. This paper adopts a different perspective by concentrating on the role of intangible assets, that is, social capital, in community development. Via semi-structured interviews with users of a resource center's services and leaders of nongovernmental organizations (NGOs) and a quasi-governmental organization, the author explores the ways in which social capital helps community redevelopment (especially rehabilitation) in post-earthquake China. The paper concludes that there is room for NGOs to adopt a bottom-up approach to community development provided they maintain an apolitical and knowledge-specific stance.

Introduction

Asset-based community development, the economic developmental approach masterminded by Michael Sherraden, has gradually caught the attention of development specialists in recent years. Based on Sherraden's definition, assets are defined as rights or claims related to property, both tangible and intangible (Sherraden, 1991). The former includes monetary savings, stocks, bonds and other financial securities, real property, means of production, durable household goods, natural resources, copyrights, and any other intellectual property. The latter includes access to credit, human capital, cultural capital, informal and formal social capital, and political capital (Nam, Huang, & Sherraden, 2008; Sherraden, 1991).

The discussion of asset-based community development has long focused on the ways in which tangible assets contribute to areas such as improved household stability and financial accounts, increased social connectedness, political participation, and the well-being of offspring in the form of social insurance or development funds (Sherraden, 1991; Zou & Sherraden, 2009). Recent studies have attempted to move on to examine how household assets, in addition to

economic ones, exert behavioral and psychological effects on health (Guo, Huang, & Sherraden, 2008). Successful empirical examples of the adoption of this asset-based community development approach include the UK's Universal Child Trust Fund, Singapore's Central Provident Fund, and Xinjiang's retirement insurance program. All relate to how financial and tangible assets contribute to the betterment of people's livelihood, and to tackling inter-generational poverty.

In a departure from this approach, the author of this paper argues that there is a need to extend the discussion of asset-based community development to the following dimensions. First, the scope of assets considered in this context needs to be widened. Some intangible aspects of assets, such as informal and formal social capital and access to credit, are rarely included within the ambit of formal academic and policy discussion (Campbell, Hughes, Hewstone, & Cairns, 2008). It is essential to understand the associations and individuals that exist in the community and to comprehend the relationships and linkages among different parties. For example, how do different parties such as the government, non-governmental organizations (NGOs), and citizens in general coordinate and interact among themselves? How does social capital, as a specific type of resource generated by social relationships, help create assets in the community and thus lead to community development?

Second, discussion of the asset-based community development approach has long focused on community construction (especially within a rural setting), while the reconstruction of areas destroyed by natural disasters has yet to be addressed. Differences in the circumstances of individual communities certainly lead to divergence in the mechanisms through which asset-based community development can be achieved. In areas destroyed by natural disasters, redevelopment of the local economy is a must, as is the betterment of health, rehabilitation, and psychological conditions.

Based on the foregoing introduction, the aim of this paper is to discuss how social capital assists in the redevelopment of areas struck by disaster with reference to an asset-based community development strategy. The key questions are as follows: In what ways and how well does social capital, the intangible asset shared among citizens in the community, help redevelopment of the local area? In what ways do individuals, NGOs, and associational membership contribute to community redevelopment and, ultimately, shed light on the development of a civil society in China?

Asset-Based Community Development and Its Relevance to Social Capital

To conceptualize how "assets" should be delineated in the post-earthquake community development of China, the author streamlines the definition of assets according to the following dimensions: First, they are the talents and skills of citizens in the community. Second, they represent the dedication of citizens' associations—culture groups, clubs, and neighborhood associations (self-help groups). Third, they are resources delivered by formal institutions—businesses, schools, hospitals, parks, and NGOs (Fisher, Geenen, Jurcevic, McClintock, &

Davis, 2009; Page-Adams & Sherraden, 1997). On the whole, the asset-based community development approach recognizes the strengths, gifts, talents, and resources individuals and networks harness to mobilize social and economic change (Fisher et al., 2009; Mathie & Cunningham, 2003). In this way, sustainable development—the ultimate goal of this approach—is guaranteed. Fisher et al. (2009, p. 71) rationalize this approach as follows:

By mobilising people through their passions and talents rather than their needs and wants, ABCD (asset-based community development) acts from a position of strength, not weakness. Mobilising from a position of skills and strength, communities, organisations and individuals can establish a future opportunity where networks of people can collaboratively achieve their collective goals... With its emphasis on existing assets and the development of social networks, the ABCD (asset-based community development) framework fosters empowerment and capacity building and reduces the establishment of dependent relationships.

As an intangible asset, social capital plays an essential role in retaining and developing other (tangible) assets in the community. The classical definition of the term can be traced back to Putnam, whose 1995 study suggests that social capital is divided into three main components: moral obligations (reciprocity) and norms; social values, especially the sense of trust; and social networks, especially within voluntary associations (Putnam, 1995). Bourdieu (1986) had defined the term similarly: First, it is a resource connected with group membership and social networks. Second, it is characterized by mutual recognition of members of a social group. According to this definition, social capital is indeed viewed from a micro perspective, describing features of social organization, such as networks of individuals or households, and the relevant norms and values that exert effects on the community (Grootaert & van Bastelaer, 2002).

Coleman expands the horizon of social capital by viewing it on a meso level (Coleman, 1998). To Grootaert and van Bastelaer (2002, p. 2):

A variety of different entities [which] all consist of some aspect of social structure, and [which] facilitate certain actions of actors—whether personal or corporate actors—within the structure (p.598) implicitly considers relations among groups, rather than individuals.

Coleman considers resources brought about by interaction among groups and firms to be social capital. Interaction between formal and informal associations (e. g., peer groups) and the resources generated by such interaction are the focus of meso-level social capital; it emphasizes networking among groups.

On the macro level, following Grootaert and van Bastelaer, social capital includes the social and political environment that shapes and enables norms to develop. The macro view includes formalized institutional relationships and structures such as the political regime and civil and political liberties. The

institutional perspective of social capital suggests that the quality of bureaucracy, civil liberties, and institutional performance determines the level of social capital in a region.

Whereas the micro perspective of social capital emphasizes trust among members within a group or an organization, the meso perspective of social capital highlights the interaction and trust among groups and organizations. Social capital, as described from these two perspectives, is regarded as an independent variable—group membership and social networks generate their own positive effects. Social capital is regarded as dependent upon macro-level factors in society, and the level of social capital directly reflects the degree to which the state actively promotes and encourages civil society (Campbell et al., 2008). These three levels of social capital influence each other. For example, macro institutions facilitate an environment in which local associations can flourish and develop, and thus enhance the level of cohesion among people within organizations. A strengthening of law and order resulting in better-enforced contracts may render local interaction and reliance on reputation and informal ways of resolving conflict less critical to enterprise development (Grootaert & van Bastelaer, 2002, p. 3).

Social capital can also be considered an asset that contributes to the development of other forms of capital, such as human capital, in the community, and as Putnam noted may directly affect individual well-being through its effects on health, emotional status, and welfare. It can provide both emotional support, such as through friendship, and instrumental support, such as via material aid and services, information, and new social contacts (Green & Haines, 2008). The better developed the community, the more social capital the community has. In sum, social capital enhances the level of trust in society and boosts the level of human capital and community building in general.

Setting the Scene

The basic context of this study is as follows: On May 12, 2008, Sichuan experienced a disastrous earthquake. According to Chinese state officials, the earthquake caused 69,180 known deaths, including 68,636 in Sichuan Province; 18,498 people were listed as missing, and 374,176 as injured.¹ A resource center which was funded by the HKSAR government and had its practical operations set up by an NGO in Hong Kong (HKNGO) started intervening in early 2009, when members of the center attempted to establish collaborative networks with local institutions. The resource center aimed to provide services in areas ranging from health, education, livelihood, social aspects, and empowerment to relief for the needy.² The overriding goal of the resource center was to achieve community rehabilitation. After months spent establishing a collaborative network with local and international NGOs, a local hospital, and a quasi-governmental organization, the resource center started its intervention programs. The partnerships it formed basically involved the joint organization of activities and the sharing of venues and activities with local NGOs and governmental organizations. In early 2009, the

center also launched rehabilitation therapy and community-building services in five communities badly affected by the Sichuan earthquake.

In the implementation of its rehabilitation programs, the resource center needs to integrate its resources with those of different types of organizations. The idea behind such pooling of resources is that once the resource center has to leave the community (perhaps as a result of a lack of project funding), local NGOs and quasi-governmental organizations will be able to continue with the development of local capacity. Therefore, it represents a way of aggregating material resources on an associational level to establish and strengthen the capacity of the resource center and its service users.

Aims of the Article and Relevant Key Questions

This paper is aimed at exploring how social capital contributes to asset-based community development. The core idea is to explore how social capital, as an asset on the micro, meso, and macro levels, leads to the redevelopment of sustainable communities. Thus, the author addresses the following key questions:

1. In what ways do individuals, NGOs, and other institutions serve as assets that contribute to community redevelopment? How does the trust that individuals place in organizations and that between individuals in an organization (the micro level), cooperation among nongovernmental organizations (the meso level), and institutional orientations such as the level of openness to a civil society (the macro level) contribute to the development of human capital, and ultimately to community redevelopment?
2. What exactly are the challenges faced by a community that has suffered a disaster? The author believes that before locating social capital in the asset-based community approach discussion context, the challenges faced during redevelopment should first be identified.

Methodology

Semi-structured interviews are the best research method to achieve answers to the questions the author raised in the previous section. This method provides a rich source of data, which emerge from the daily life experiences of the interviewees. The author thus selected this method with the intention of determining the ways in which social capital leads to community redevelopment. Such information is beyond the scope of a survey in which the respondent is asked, for example, to tick yes or no, to agree or disagree, or to rate a statement on a scale from 1 to 5. Above all, the author expected to derive finer details from the interviewees (Berg, 2001).

Individuals from four different populations were interviewed between August 2010 and October 2011: service users, collaborative partners of the resource center, organizers of the resource center, and frontline practitioners. Table 1 summarizes the details of each targeted population.

Table 1. Summary of Data Collection Methods

Type of Population	Data Collection Methods	Sampling/Number of Interviews	Data Collection Period
Service users	Case study—home visit and semi-structured interview	16 Case studies in four regions	Aug 2010–May 2011
Collaborative partners	Semi-structured interviews	3	Oct 2011
Co-organizers of the resource center	Semi-structured interview	1	Oct 2011
Frontline practitioners	Informal talk and presentation	11 Local community rehabilitation coordinators (CRCs)	Aug 2010–May 2011

The author identified four communities for the implementation of fieldwork: Mianyang, Dujiangyan, Chenjiaba, and Deyang. In each community, the author conducted a total of 16 case studies comprising semi-structured interviews and home visits for people disabled by the 2008 earthquake and their family members. The author spent a total of nine months observing and keeping a track record of the interviewees. Interviews were scheduled over three periods: August 2010, January 2011, and May 2011. The author visited Dujiangyan and Mianyang twice each in January and May 2011 when the residence relocation process was in progress. Home visits and interviews for the other communities were completed in May 2011. The case studies were aimed at tapping into the actual needs of interviewees, their talents and skills, their social connections (intangible assets), and their interaction with the resource center and other organizations.

Three collaborative partners of the resource center were interviewed in Sichuan in October 2011. The aim was to ascertain their perspectives on cooperation with the resource center and the effectiveness of their collaborations with other NGOs. The interviewees were senior managers of a local quasi-governmental organization, an international NGO, and an NGO from Taiwan.

The resource center is actually a product of cooperation between an NGO in Hong Kong and a local Sichuan hospital. Via the interview with the head of the local hospital, the author was able to ascertain the perspective from which the resource center organizers assessed the effectiveness of the entire program and cooperative activities.

Rather than organizing formal interviews with frontline practitioners (i.e., community rehabilitation coordinators and therapists), the author talked to them informally in August 2010, January 2011, and May 2011. These informal conversations and consultations enabled the author to pinpoint the finer details of the practitioners' daily work and their community-based rehabilitation (CBR) practice challenges and achievements.

Methods of Data Analysis

The author was accompanied at each interview by at least one native Sichuan speaker in case it was hard to record the exact wording used by the interviewee.

The author jotted down detailed notes during each interview and summarized the major points derived immediately following its conclusion. The author also tape-recorded (in MP3 format) each interview for a clearer record and completed the transcript afterwards.

Key Findings

The redevelopment of Sichuan in the post-earthquake period has encountered three major challenges: the physical conditions, emotional security, and material deprivation of its citizens. The 2008 earthquake in Sichuan caused almost 380,000 injuries, and the communities the author studied are in regions that suffered severe casualties. Two years after the earthquake, even when some interviewees had recovered from their injuries, they were still in desperate need of medical rehabilitation. Moreover, some service users were suffering from persistent pain as a result of their injuries. For example, Mrs. Xu³ (aged 53) from Chenjiaba has suffered from long-standing pain in her right leg. She broke her right leg during the earthquake and underwent an operation. Nevertheless, she has had trouble walking ever since:

See, my leg is severely swollen [she lifted up her trousers and showed us her right leg]. It's so painful and I can only walk a short distance. The Tai Chi group helps a bit, but I still feel the pain every day. (Mrs. Xu, aged 53)

Emotional insecurity brought about by the loss of relatives and friends, physical injury, or the collapse of one's residence is a common symptom among people who have undergone trauma.⁴ The majority of interviewees told the author that they had been suffering from nightmares and felt very scared since the earthquake. Some of them had recovered from these experiences, while others still lived in the shadow of the earthquake. The majority of service users also had encountered financial difficulties. For some of them, their difficulties were short term (e.g., their dwelling had been damaged by the earthquake and they needed money to construct a new home), whereas others had faced poverty for a long time. For example, Mrs. Zheng (aged 51) of Mianyang was very worried about obtaining money for resettlement, as she needed another RMB 50,000 to buy a new flat. She cried every day, hid at home, and was reluctant to leave home or participate in any activity organized by the resource center, in spite of encouragement.

The Role of Social Capital on the Micro Level

The severe damage caused by the earthquake has led to grievance, distress, and emotional insecurity. Home visits have been successful in persuading victims to speak out about their grievances. One of the essential components of asset-based community development is the generous provision of all kinds of resources

to facilitate mutual help. In regions severely damaged by the earthquake, mutual help is particularly invaluable in bringing together all kinds of resources. The resource center started to establish mutual aid groups among people with disabilities in 2010. The nature of these mutual aid groups varies depending on the situation in the community in question and the type of population.

Social capital, which is expressed in the form of experience and information sharing, constitutes an important component of resources catering for the rehabilitation needs of local citizens. A couple of mutual aid groups have been established to exchange knowledge and experience of rehabilitation for people with disabilities. As Putnam (1995), Coleman (1998), and others point out, group membership offers a source of social capital for individuals.

One of the most representative mutual aid groups is the Tai Chi group in Chenjiaba, which was established in late 2010. During each practice session, participants spend one hour on Tai Chi practice and another hour sharing their emotions. Initially, local practitioners arranged the meetings, but two active participants now take the lead in coordinating them. According to a local practitioner, the resource center aims to have these two participants serve as leaders of the Tai Chi group in the future. In general, mutual aid groups such as this one have been successful in that leadership has been established and participants are able to maximize the benefits accruing to the group each time in terms of rehabilitation and emotional recovery. According to Mr. Chen, aged 70, the emotional sharing session after each Tai Chi class is very effective in helping to bolster his psychological well-being:

Some people were disabled [during the earthquake] and some people lost their relatives. We all felt pessimistic. When people of these types hung out together, we found encouragement. (Mr. Chen, aged 70)

Mr. Chen's words imply empowerment in a collective sense: Mutual encouragement and sharing make the members of the group feel empowered and emotionally strengthened. Associational membership provides members of the group with a platform for emotional recovery in the post-earthquake period.

Ms. Wong was the project manager of an NGO based in Taiwan. The NGO had collaborated with the resource center for a couple of months at the time of her interview. To Ms. Wong, the most impressive aspect of the cooperative relationship was that the resource center managed to maintain the emotional status quo of its service users. She pointed to one situation as a vivid example:

When I first arrived in Dujiangyan, I saw a lady at a karaoke event. She had lost her leg. Perhaps she was a longstanding service user. That lady looked very refreshed and bright, and she wore light make-up. She really had a high level of self-efficacy. If you love life, the love can be articulated through your outlook. I appreciated the entire situation so much in how you guys [staff members of the resource centre] brought about such an astonishing situation. I think there must be a lot of hard

work and effort involved. When I saw her again, I could sense that she wasn't a burden to her family and society. She was able to inspire a lot of confidence in other people! (Ms. Wong, a project manager of an NGO in Taiwan)

The author does not seek to argue that mutual aid groups can replace the functions of family or other social ties completely. Rather, it is suggested that associational membership provides an alternative way to seek emotional support. Some service users have established and maintained very good spousal and familial relationships in the pre- and post-earthquake periods, relationships which appeared as harmonious as others. Familial relationships have helped them to withstand frustrations in times of trauma. For example, Mrs. Jiang was the only member of her family injured during the earthquake. With the intensive emotional and material support provided by her husband, and by her parents and sisters who live next door, she is better able to focus on her craftwork, and this has helped to give her a greater sense of emotional relief.

The Role of Social Capital on the Meso Level

As mentioned above, partnerships and collaborations are commonly seen among NGOs and quasi-governmental organizations involved in post-earthquake recovery. According to Mr. Li, the cooperative partner of the resource center and the leader of a quasi-governmental organization, there are eight organizations with 100 frontline practitioners providing rehabilitation services in one of the earthquake regions. The number of service users is about 200,000. To achieve community rehabilitation, the organization needs to mobilize a growing social support base and a widening social network:

We cannot do much with regard to our own resources, but the key to achieving community rehabilitation is to intensively integrate resources from society. Cooperation among different agencies is the prerequisite for rehabilitation, and such cooperation has been successful. (Mr. Li, the head of a quasi-governmental organization)

The success of collaborations between different organizations, or joint efforts, has led to successful community rehabilitation in Sichuan. To establish a sustainable pattern of rehabilitation, Mr. Li believed there needed to be more condensed, closer cooperation among different organizations such as quasi-governmental organizations, the provincial government, the Ministry of Health, and the HKNGO.

Joint efforts between organizations help rehabilitate the community in the following ways. First, they clarify the concept of community rehabilitation. The most invaluable part of such cooperation lies in its clarification of the rationale for and the concept of rehabilitation. This is explained by the fact that the long-standing difficulty of practicing community rehabilitation is the ignorance of the

concept of rehabilitation, and this leads to policy being implemented ineffectively. In Sichuan, based on the specific situation in each region affected by the earthquake, organizations have managed to learn the service model and how to implement rehabilitation strategy. This has been of substantial assistance in supplementing their previously inadequate understanding of rehabilitation, and has served as a milestone in community rehabilitation practice.

The second way in which collaborative arrangements help with rehabilitation is by spreading skills and expertise across regions. Experience gained in Hong Kong has helped to ensure the success of the program. The community rehabilitation experience of the HKNGO has been a key success factor, especially when the program was initiated. This is because the experience of rehabilitation in Hong Kong has helped to save a lot of time when transferred to the mainland. As Ms. Chu, the senior officer of an international NGO, observed:

In any case, the experience of [community rehabilitation] in Hong Kong is the key to success. Now we have saved a lot of time [in the implementation process]. We don't have to waste time searching for a rehabilitation model. Of course, there are many cultural differences between the mainland and Hong Kong, but the rich experience of the HKNGO has helped to implement community rehabilitation, whether in a physical or psychological sense. (Ms. Chu, senior officer of an international NGO)

On the one hand, the collaborative efforts of organizations have brought information and rehabilitation resources to service users. These information and rehabilitation resources include knowledge of self-management (physical and emotional) and the availability and advice of frontline therapists. On the other hand, collaborative efforts have strengthened the capacity of participating organizations, as mentioned previously.

The third contribution of collaboration is the exchange of managerial skills. Dr. Hu, the head of a local hospital and a collaborator with the resource center, provided a further explanation. He had found the exchange of management styles between the resource center and managers of his hospital in Sichuan highly rewarding. This was also an exchange of skills and culture—being able to import international management standards into a locality. The two regions had encountered new cultures and new ways of thinking. This was, in fact, the greatest achievement of their cooperation—to explore how community rehabilitation could be localized in this specific region.

The author suggests that the resource center has also had other positive effects on the local hospital. These include recognition of the role of therapy (e.g., physiotherapy and occupational therapy) and psychiatric training in rehabilitation, and the importance of medical social work in hospitals. Recognition of the importance of all of these services has laid the foundations for the development of a regular curriculum for professional rehabilitation services in China in the future.

The Role of Social Capital on the Macro Level

The author observed the presence of institutional support in post-earthquake Sichuan. There are some barrier-free facilities in some schools in communities affected by the disaster. For example, in a school in Dujiangyan, the manner in which some school buildings have been constructed indicates an awareness of the need for barrier-free facilities. This is a pioneering step not only in promoting the rights of those disabled by the earthquake but also in providing a platform and infrastructure to strengthen community integration.

The advocacy of community integration is certainly likely to meet the emotional needs of service users on an institutional level. A representative example of such advocacy is that in recent years, local NGOs, the local government, a hospital, a rehabilitation center, and the resource center have organized a number of large functions such as a cultural performance, a walkathon, and sharing activities. In spite of these activities, Ms. Chu observed that the sustainability of community development and community rehabilitation depended on the relevance of social policies, noting it was important to implement relevant policies to supplement community rehabilitation. Without governmental help, the NGO would find it very difficult to implement community rehabilitation:

Let's make an analogy: it is a separate matter when you use a shovel to sweep and use a water cannon to rush. If governmental policies provide support, the development of services overall is bound to speed up. (Ms. Chu, a senior officer of an international NGO)

To Ms. Chu, the most specific and distinctive element of such cooperation was that it broke through the existing medical system in China, where medical services are rigid: People rarely receive medical services unless they stay in a clinic. It is actually quite rare in China for resources to be integrated via joint efforts among organizations. However, more policy advocacy is needed. Indeed, Ms. Wong had a similar view: One of the biggest challenges of the program was that governmental support was inadequate, as shown by the comparatively low level of governmental intervention. Although a lot of resources were transferred to Sichuan after the earthquake, all of the organizations involved were responsible for themselves only.

Each organisation looks after number one. None of the regional governments reached out and integrated all resources from different sources—otherwise it would really be better. We don't have enough time and resources, and we can't expect too much change. (Ms. Wong, a project manager of an NGO in Taiwan)

The call for governmental support also extends to the issue of infrastructure. According to frontline practitioners, transportation could be a big problem if

service users lived in rural areas. Frontline practitioners in these areas often need a couple of hours to travel or walk to the service user's premises. There is an urgent need to establish reasonable infrastructure in some rural areas.

Discussion and Conclusion

The discussion of social capital in this paper makes two key contributions to the understanding of asset-based community development policy: First, it points to how social capital, an intangible asset, is the key element of community redevelopment on a number of levels. The author specifically analyzes how social capital serves as an asset that assists emotional and physical recovery, one of the prerequisites for community redevelopment. Second, post-earthquake China, with its urgent physical and emotional rehabilitation needs, serves as a very specific context to discuss the role of social capital.

Based on the discussion of how social capital has been mobilized on micro, meso, and macro levels, this paper illustrates how such capital has been articulated in the asset-based community development process in post-earthquake China. The resource center described in this paper serves as a generator of social capital in the community. On the micro level, users of the resource center's services obtain information on rehabilitation and receive emotional support via associational membership. On the meso level, the collaboration of NGOs and quasi-governmental organizations led to the establishment of the resource center, which has provided free physical and emotional rehabilitation services to people in need. On the macro level, the provincial government has scheduled the construction of some essential barrier-free infrastructure, though NGOs are still calling for better policy planning. The social capital examined in this paper has been built upon the foundations provided by the resource center, a collaborative effort between the HKNGO and a local hospital, and was further developed when it established partnerships with other organizations such as international NGOs and quasi-governmental bodies.

The resource center and other NGOs have clearly done a good job in initiating emotional and physical recovery in the aftermath of the earthquake. However, issues of manpower and responsibility, which relate to provincial governmental input, have also arisen. The key questions are as follows: Will there be sufficient staff members who are persistent enough to become involved in relevant services in the future, and which unit should be responsible for these services thereafter? Should they be the responsibility of regional government, quasi-governmental organizations, or NGOs? Collaborative partners suggest that the government has relied on NGOs to date, but is this a sustainable solution to community redevelopment in China? One possible solution is mandatory collaboration among these different types of institutions. This would mean local government being responsible for making policy providing general directions to frontline practitioners such as medical staff, social workers, and therapists, and NGOs exploiting their expertise in community rehabilitation to overcome bureaucratic barriers and assist in the genuine practice of rehabilitation at the community level.

In practice, the Sichuan earthquake of 2008 has led to the rapid development of NGOs in China and has changed their nature. In the past, the Chinese government required all NGOs to be state-led: All NGOs had to be supervised by a governmental unit to ensure that they were managed and monitored adequately. The establishment of the resource center, a collaborative effort between a provincial hospital and an NGO from Hong Kong, and the subsequent cooperation with other NGOs and quasi-governmental organizations show how governmental control has been loosened and a culture of cross-regional partnerships among different sectors has developed. However, it should be noted that this rise in partnership and cooperation is apolitical in nature, and that the emphasis is on the exchange of skills and expertise among the organizations involved. The programs discussed in this paper demonstrate how NGOs can be developed in China and how regional governments can cooperate with NGOs in the Chinese context.

This paper argues that in communities where citizens frequently interact with the government, there will be a greater likelihood of public trust in local government and the accountability of public officials. It is suggested that in contemporary China, where the general public feels disengaged from local government and public policy is designed through a top-down approach without much grass-roots-level consultation, NGOs function as supplementary but crucial institutions in enhancing the level of confidence among people in the community and raising the level of community trust among the general public.

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Notes

1. "Casualties of the Sichuan Earthquake" (in Chinese), June 8, 2008; <http://news.sina.com.cn/pc/2008-05-13/326/651.html>.
2. The community-based rehabilitation (CBR) intervention model based on the World Health Organization's community-based rehabilitation (WHO-CBR) matrix has been adopted as the guiding framework of the intervention.
3. All names in this article are fictitious.
4. For example, a study conducted in Sichuan earthquake areas suggests that a high level of posttraumatic stress disorder symptoms exists among people who suffered damage and losses in the earthquake. Their losses can be expressed in the form of personal and material well-being (Chan, Wang, Qu, & Lu, 2011).

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