

# A Study of In-Hospital Charitable Aid Resource Categories and Application Dilemmas: An Empirical Investigation Based on R Hospital

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**Abstract:** To better understand the challenges faced by public hospitals in implementing charitable medical assistance, this study examines Nanjing R Hospital as a case study. By combining literature review and field research, the current status and fundamental methods of charitable medical assistance at R Hospital are systematically analyzed. The findings indicate that medical social workers play a multifaceted role in the hospital's charitable assistance efforts. They contribute significantly to building assistance networks and addressing patients' multi-dimensional needs. However, challenges persist in the assistance process, including both external and internal obstacles. This study explores ways to overcome these barriers to enhance the efficient utilization of healthcare resources. Through empirical investigation, the study identifies the types of charitable aid resources available and highlights the practical difficulties in their application within public hospitals. These findings provide a valuable reference for optimizing resource allocation, improving the effectiveness of assistance programs, and fostering institutional collaboration.

**Keywords:** Public hospitals; Charitable medical aid programs; Charitable aid resource categories; Application dilemmas

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## 1. Introduction

The advancement of society and the economy, along with improved living standards, has led to an increasing demand for healthcare services. However, the uneven distribution of medical resources and rising healthcare costs have created significant challenges for financially disadvantaged families, often resulting in poverty caused or exacerbated by illness. Public hospitals, as primary providers of healthcare in China, face dilemmas in balancing their relief-oriented responsibilities with service-oriented applications. This imbalance highlights the difficulties in resource allocation and effective utilization of charitable assistance programs.

Public hospitals, in collaboration with charitable organizations, play a critical role in addressing these challenges by providing medical assistance. This collaboration reflects their social responsibility and aims to

meet the medical needs of impoverished patients. However, the mismatch between the supply and demand of medical resources limits the reach of charitable assistance programs, leaving many patients without adequate care. Furthermore, the lack of transparency and regulatory mechanisms in resource allocation often leads to inefficiencies and inequities.

At the national policy level, the government has repeatedly emphasized the importance of involving charitable organizations and other social forces in medical assistance initiatives. For instance, the “Opinions on Deepening the Reform of the Medical Security System” issued by the CPC Central Committee and the State Council highlights the goal of establishing a comprehensive medical security system by 2030. This system is envisioned to integrate basic medical insurance, medical assistance, and supplemental forms of insurance, including commercial health insurance and charitable donations<sup>[1]</sup>. Similarly, the “Guiding Opinions on Strengthening the Interface between Medical Assistance and Charity” calls for the establishment of mechanisms to integrate medical assistance with charitable efforts, ensuring effective coordination and implementation<sup>[2]</sup>.

Encouraged by government policies, charitable medical assistance programs in China have made significant progress. Public hospitals have explored innovative approaches to resource assistance, achieving notable outcomes. Despite these advancements, challenges remain in ensuring the equitable distribution and efficient utilization of resources to address the needs of disadvantaged patients effectively.

## **2. Literature review and analytical framework**

Research on medical charitable assistance spans multiple disciplines and has grown significantly over time. An analysis of publications using the CNKI database with keywords such as “charitable resources” and “charitable assistance” reveals that from 2002 to 2023, the literature predominantly focuses on themes such as “charitable organizations,” “medical assistance,” “social aid,” “strategy research,” “aid models,” and “aid recipients.”

### **2.1. Study on the types of resources for charitable assistance in hospitals**

Charitable resources constitute a vital component of the social security system and reflect broader social ideologies<sup>[3]</sup>. Historically, in Western countries like the United Kingdom, charitable practices in the late 19th and early 20th centuries were driven by collaboration between the public sector and private citizens. This cooperation was supported by material resources and legal frameworks provided by the government, ensuring the growth of charitable initiatives. In the United States, charitable resources are primarily derived from three sources: (1) private donations, including contributions from individuals, foundations, and enterprises; (2) service charges from charitable organizations, which have recently embraced commercialization trends; and (3) direct and indirect government subsidies.

In China, charitable resources are sourced through a combination of government-led initiatives, charitable organization programs, and social donations. These include the establishment of charitable funds and medical aid programs aimed at assisting impoverished patients who meet eligibility criteria for medical aid within hospitals.

Government-led medical assistance primarily addresses high out-of-pocket expenses that remain after health insurance reimbursements. Charitable organizations, however, provide aid that is more flexible and tailored to individual patient needs, often extending beyond the scope of government assistance. Charitable aid has shown notable advantages in fundraising scale and in targeting support for financially disadvantaged patients, thereby alleviating their medical burdens.

Medical aid, as a form of social support, addresses the healthcare needs of low-income individuals who cannot afford treatment for severe illnesses <sup>[4]</sup>. Together, charitable and government-led medical aid form China's medical assistance system, significantly mitigating the issue of "difficult and expensive access to medical care" for vulnerable populations <sup>[5]</sup>. Medical social workers play a crucial role in easing the financial burden on impoverished hospitalized patients by facilitating the involvement of social forces <sup>[6]</sup>.

Domestic scholars have extensively studied charitable assistance. Zheng identifies it as a key element in building a harmonious society, and promoting equitable access to healthcare services <sup>[8]</sup>. Yin emphasizes the shared public welfare objectives of charity and medicine, viewing medical charity as integral to the medical security system. Rapid development in this area helps address funding shortages in government-led medical assistance and promotes timely healthcare delivery <sup>[9]</sup>. Liang and Ye highlight the complementary value of charitable and government assistance in solving access issues for poor patients <sup>[10]</sup>. Similarly, Xiang and others argue that charitable aid and government-led assistance are interrelated, with both differences and synergies that can enhance the overall system <sup>[11]</sup>. Gu advocates for a government-led model supplemented by social forces to integrate medical and financial resources effectively, ensuring support for disadvantaged groups <sup>[12]</sup>. Shen describes charitable assistance as a critical mechanism to reduce the risk of "poverty caused by illness" <sup>[5]</sup>. Lin suggests that charitable aid supplements the health insurance system, enabling impoverished patients to access timely and necessary treatment <sup>[6]</sup>.

## **2.2. Study on the dilemmas in applying charitable assistance resources in hospitals**

Philanthropy in China remains in its developmental stages. The relevant systems and market norms are not yet fully mature, leading to insufficient public recognition and trust in charitable initiatives. Charitable organizations face significant challenges in raising funds, leaving limited resources available to support patients <sup>[13]</sup>. Charitable medical assistance in China is designed to integrate private resources to address gaps in the coverage and quality of government-led medical assistance <sup>[14]</sup>. However, the scope of assistance remains relatively narrow. Most domestic charitable medical programs rely on direct financial subsidies or material support. By contrast, mature medical assistance systems in other countries incorporate more comprehensive approaches, such as mental health interventions and social support. These measures aim to address not only financial and material needs but also the psychological and social challenges associated with illness, providing recipients with multi-dimensional support <sup>[15]</sup>.

Additionally, resource allocation in charitable programs is often imbalanced. For example, certain programs receive ample or even excessive funding, such as those supporting women with breast and cervical cancers, while assistance for other cancers remains significantly underfunded <sup>[16]</sup>.

Overall, domestic and international research on charitable aid resources in public hospitals primarily employs empirical methods. Qualitative studies often use first-hand interviews and second-hand discourse from textbooks, analyzed through content analysis, discourse analysis, or case studies. Quantitative studies typically rely on primary data collected through surveys and analyzed using techniques such as analysis of variance (ANOVA), linear regression, and structural equation modeling.

The development of charitable resources in China has become increasingly diversified and comprehensive. Efforts by the government, hospitals, civil society organizations, and various stakeholders contribute collectively to advancing the field of medical assistance and enhancing the availability of resources.

### 3. Research methodology

This study employs qualitative research methods. The researcher engaged in a six-month professional internship in the medical social work department of R Hospital, with full immersion in the charitable relief program. During the internship, the researcher participated in all stages of the program, focusing on relief assessments in departments such as pediatrics, hematology, and cardiothoracic surgery. Interactions involved collaboration with the medical team, patients, their families, foundation staff, and medical social workers. The subsequent follow-up survey incorporated participatory observation and semi-structured interviews for data collection. An inductive approach was used to analyze the data, leading to the formulation of research conclusions.

#### 3.1. Basic approaches to charitable medical assistance at R Hospital

**Table 1.** Medical assistance patient information form

Targets of assistance	Age	Gender	Department	Disease type	Type of aid*	Length of illness (years)
M1	16	Female	Gynecology	Pineal tumor	a	5
M2	2	Female	Gynecology	Malignant muscle or bone tumors	b	1
S1	6	Male	Gynecology	Leukemia	a	3
T	3	Female	Gynecology	Neuroblastoma	c	2
Z	5	Male	Gynecology	Severe aplastic anemia after pneumonia	b, d	1
B	68	Female	Hematology	Thrombocytopenia	d	8
C	53	Female	Cardiology	Heart aortic stenosis	d	7
W	65	Female	Hematology	Malignant lymphoma	e	3
S2	58	Female	Hematology	Neoplasms	f	4

\*Type of aid: a, China Red Cross Foundation Central Special Lottery Public Welfare Fund Children’s Relief Project; b, Jiangsu Women and Children’s Foundation “I Help Women and Children” – Major Diseases Relief Project; c, Little Angel Foundation; d, Water Drops Fundraising; e, People’s Aid Project of China Social Aid Foundation; f, Jiangsu Ruihua Charity Foundation Ruihua Medical Aid Program.

As of 2023, R Hospital’s charitable medical aid programs primarily operated under two frameworks: bilateral cooperation and tripartite cooperation.

- (1) **Bilateral cooperation:** This model involves direct agreements between the hospital and foundations. Typically, the hospital serves as one of the designated medical aid program centers for the foundation. For example, the China Red Cross Foundation Central Special Lottery program includes numerous designated hospitals nationwide, while the Jiangsu Ruihua Charity Foundation has 18 designated hospitals within the province.
- (2) **Tripartite cooperation:** This approach involves agreements among the hospital, foundations, and third-party organizations such as Shidi Company. In this model, public foundations (e.g., the Women and Children’s Welfare Foundation) launch fundraising projects, with Shidi Company facilitating public engagement to generate traffic and raise funds. The collected funds are allocated to patients in designated hospitals. Key third-party partners include the China Social Aid Foundation and Jiangsu Women and Children’s Welfare Foundation.



See **Table 1** for an example of the medical assistance patient information form and **Table 2** for the 2016–2023 summary of R Hospital’s charitable medical assistance program.

**Table 2.** 2016–2023 Summary of R Hospital charitable medical assistance program

Serial no.	Foundation name and program	Target beneficiary	Subsidized diseases
1	Jiangsu Ruihua Charity Foundation Ruihua Medical Assistance Program	Low-income individuals, special hardship dependents, orphans, key beneficiaries, and patients impoverished due to illness with proof of financial difficulties	Congenital heart disease, myocardial infarction, aortic dissection, heart valve disease, premature babies, spinal fractures, scoliosis, organ transplants, others
2	Jiangsu Women and Children’s Foundation “I Help Women and Children” Major Disease Relief Program	Urban and rural low-income households, special hardship case households; children aged 0–18 with serious illnesses; female urban and rural low-income households with proof of financial difficulties	50 major diseases common to children, female malignant tumors
3	China Social Relief Foundation People’s Relief Program	Low-income households, poor households with established credit cards, and patients impoverished due to illness with proof of financial difficulties	Diseases listed in the “Catalog of Major Diseases”
4	Chinese Red Cross Foundation Central Special Lottery Fund Relief Program for Children with Major Diseases	Children with leukemia aged 0–18 hospitalized in the Maternal and Child Branch of Jiangsu Provincial People’s Hospital	Leukemia
5	Major Disease Relief for Urban and Rural People with Special Needs, Jiangsu Ren Medical Foundation	Urban and rural poor patients	Diseases listed in the “Catalog of Major Diseases”
6	Little Angels Relief Fund	Children with leukemia aged 0–14	Leukemia
7	Amity Foundation, Beijing New Sunshine Charity Foundation, Angel Sunshine Foundation, Spring Seedling Foundation, Jiangsu Provincial Charity Federation	Urban and rural low-income households, special hardship case households, and children aged 0–18 with serious illnesses who meet eligibility criteria	Diseases listed in the “Catalog of Major Diseases”

In the latter half of 2023, changes in the social environment and the impact of departmental restructuring within the hospital led to substantial adjustments in charitable aid resources. As of 2024, the primary charitable aid programs include:

- (1) Ruihua Medical Aid Program: Managed by the Jiangsu Ruihua Charity Foundation.
- (2) Central Special Lottery Funds of the China Red Cross Foundation: These funds provide assistance for children with serious illnesses and birth defects. The birth defects relief program, funded by the Central Special Lottery Fund, is overseen by the China Birth Defects Intervention and Relief Foundation and targets children with congenital malformations, functional birth defects, and hereditary metabolic diseases in designated medical institutions.

Programs such as the Jiangsu Women and Children’s Foundation’s “I Help Women and Children” major disease assistance program and the Chinese Social Assistance Foundation’s “People’s Assistance Program” were discontinued by the end of 2023. These programs have not yet resumed. See **Table 3** for the summary of R Hospital’s charitable medical assistance programs.

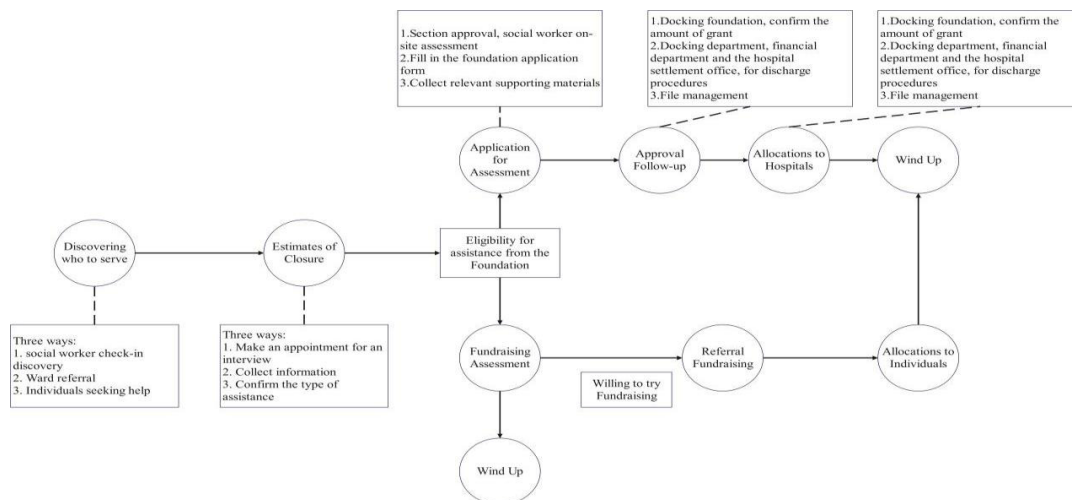
**Table 3.** 2024 Summary of R Hospital charitable medical assistance programs

Serial no.	Foundation name and program	Target beneficiary	Subsidized diseases
1	Jiangsu Ruihua Charity Foundation Ruihua Medical Assistance Program	Low-income individuals, special hardship dependents, orphans, key beneficiaries, and patients impoverished due to illness with proof of financial difficulties	Congenital heart disease, myocardial infarction, aortic dissection, heart valve disease, premature babies, spinal fractures, scoliosis, organ transplants, others
2	Chinese Red Cross Foundation Central Special Lottery Fund Relief Program for Children with Major Diseases	Children with leukemia aged 0–18 hospitalized in the Maternal and Child Branch of Jiangsu Provincial People’s Hospital	Leukemia
3	Chinese Red Cross Foundation’s Central Special Lottery Public Welfare Fund Supports Birth Defects Relief Program	Individuals under 18 years of age who can provide original documentation of family financial hardship, such as a statement issued by the village or neighborhood committee, low-income certificate, or special hardship certification	Diagnoses of congenital structural anomalies (74 types in seven systems), functional birth defects, genetic metabolic disorders
4	Major Disease Relief for Urban and Rural People with Special Needs, Jiangsu Ren Medical Foundation	Urban and rural poor patients	Diseases listed in the “Catalog of Major Diseases”

### 3.2. Process of charitable medical assistance at R Hospital

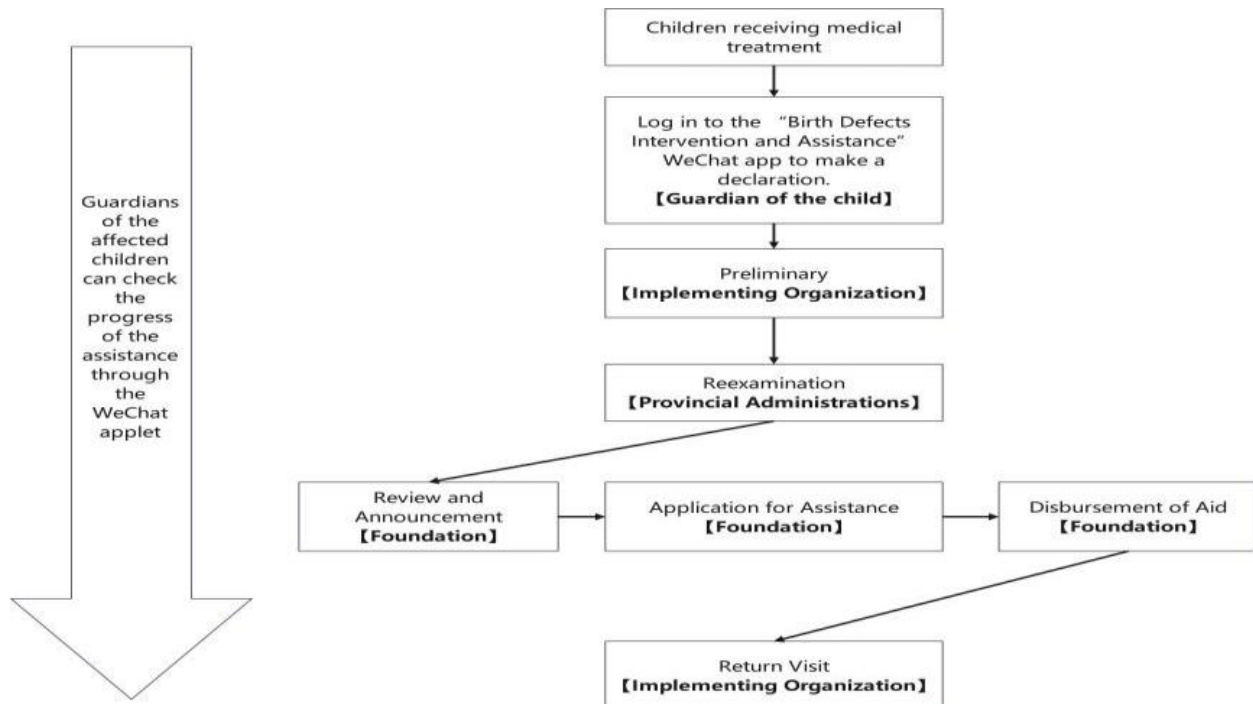
The charitable medical assistance process at R Hospital is carried out through three main channels (**Figure 1**): identification by medical social workers, referrals from departments, and direct patient applications. The basic procedure involves the patient submitting an application, followed by an evaluation by medical social workers. This evaluation includes completing a charitable assistance assessment form and gathering detailed information about the patient’s economic situation, including family composition, fixed assets, major expenditures, and liabilities. Verification of the family’s actual financial situation is conducted via telephone interviews with local authorities.

In practice, medical social workers face significant challenges in verifying family financial difficulties due to incomplete and outdated documentation. Issues such as obtaining necessary stamps for low-income insurance documents or hardship certifications are particularly problematic. These administrative complexities often prolong the application process, potentially delaying much-needed assistance.



**Figure 1.** Flow chart of charitable aid at R Hospital

The foundation’s application process is largely similar across programs (**Figure 2**). For example, under the 2024 Birth Defects Relief Program, guardians of children meeting the eligibility criteria for birth defect assistance can apply online. After completing and submitting the necessary materials, the application undergoes an initial review. Once approved, the foundation allocates aid and conducts a follow-up visit.



**Figure 2.** Application process for the Chinese Red Cross Foundation’s Special Lottery Public Welfare Fund supporting birth defects assistance

Currently, the assistance resources available are categorized into three types: formal resources, informal resources, and market resources:

(1) Formal resources:

- (a) RenMed Foundation Relief Program: Funded by social donations, this program provides a fixed assistance amount of 20,000 yuan per eligible patient. However, due to limited funds, the total amount of relief is relatively small. In 2023, the foundation also introduced clinical research innovation awards.
- (b) Ruihua Charity Foundation: In 2024, this foundation expanded its regular patient relief programs and allocated additional funding for research, technology, and talent training. It also introduced scholarships for regulatory students at the hospital. While the foundation relaxed its application criteria for children (0–18 years old) by removing the low-income insurance requirement, adult applicants are still required to provide proof of low-income insurance.
- (c) Chinese Red Cross Foundation: Resources from the Central Special Lottery Public Welfare Fund are allocated for two main projects: relief for children with serious illnesses and assistance for birth defects.

(2) Informal resources: Informal resources primarily involve proactive efforts by medical social workers to connect patients with various foundations, such as the New Sunshine Foundation and the Amity

Foundation. While these resources are flexible, they are often unstable due to external factors.

- (3) Market resources: Market-based charitable aid is a growing trend, with institutions adopting commercial management practices to enhance both social and economic benefits. Platforms such as Water Drops Fundraising and Easy Fundraising are examples of market resources in medical charitable aid. However, there is an imbalance between the supply and demand for aid, with a disproportionate focus on specific diseases and insufficient assessments of recipients' family situations.

## 4. Conclusion

This study provides a comprehensive analysis of in-hospital charitable aid resource categories and the application challenges, with a specific focus on R Hospital. The findings reveal a diverse range of charitable assistance programs encompassing formal, informal, and market-oriented resources. Each type of resource plays a crucial role in addressing the medical and financial needs of vulnerable patients, yet significant challenges persist in their implementation.

Key issues identified include the administrative complexity of verifying patients' financial difficulties, an imbalance in resource allocation across diseases, and the instability of informal aid channels. Furthermore, while the introduction of market-driven initiatives has enhanced the fundraising capacity of charitable programs, gaps in comprehensive family assessments and targeted assistance remain evident.

To improve the efficacy of charitable aid programs, it is essential to streamline administrative procedures, enhance transparency in resource allocation, and foster closer collaboration between hospitals, charitable foundations, and government agencies. Developing a robust and standardized framework for assessing patients' financial needs and expanding the scope of support to include mental health and social assistance services will further ensure holistic care for beneficiaries.

This study underscores the need for a balanced and sustainable approach to managing in-hospital charitable resources. Future research can explore the long-term impact of specific aid programs on patient outcomes and evaluate the scalability of successful initiatives in other healthcare institutions. By addressing existing dilemmas and leveraging collaborative strategies, charitable aid can better fulfill its mission of reducing healthcare disparities and promoting equitable access to medical services.

## Disclosure statement

The author declares no conflict of interest.

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