

# Three Stories, Three Paradigms, and a Critique of Social Entrepreneurship

## Remarks Delivered at the Skoll World Forum 2008

A new year, early in the third millennium, dawns. New plagues—AIDS, drug-resistant tuberculosis and hospital-acquired “superbugs” of all sorts—sweep rapidly across vast swathes of land, blurring national boundaries; old maladies that should have been history remain rooted in long-standing and increasingly unjust social and economic structures. Malaria, hookworm, and other parasites claim lives or simply drain energy from hundreds of millions; it’s hard to work when you’re tired and anemic or pregnant a dozen times before the age of 30. There are still rich people and poor people, but most economists agree that social inequalities, both global and local, have grown rapidly over the past three decades. The earth itself is tired and malnourished. Man-made environmental crises dry up lakes, wash topsoil into the seas and smother reefs, and—from what we can tell—spark huge storms. A billion people do not have safe drinking water. A war of choice fought for unclear goals lingers on and will cost, one Nobel laureate economist tells us, three trillion dollars.

What cause have we for hope? As a doctor working in Africa, contemplating the problems of our wounded earth, I acknowledge that the butcher’s bill is high. Yet here we are, a a movement of what are termed “social entrepreneurs,” and we *are* full of hope. Some of that hope is tied to risk—with risk come results. Some of it is tied to an increasing awareness of the opportunities of the great world around

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*Dr. Farmer is a 2008 recipient of the Skoll Award for Social Entrepreneurship.*

## **A Rwandan Story of Hope**

People like Faustin, a child I met in rural Rwanda in 2006, are the chief victims of this violence, which is never really local and has almost nothing to do with his culture. On a Wednesday morning in March 2006, two boys, herding cows, picked up a landmine.

Both of the boys survived and were brought to the local hospital. The hospital was built and once owned by a Belgian mining company, which left Rwanda decades ago, having extracted what it came to extract. After the war and genocide in 1994, the facility fell into disuse, essentially abandoned, until May 2005, when Partners In Health, the Clinton Foundation, and the Rwandan Ministry of Health rebuilt it. By the following March, we had cobbled together a medical and nursing staff consisting mostly of Rwandan professionals and a handful of expatriate volunteers. The hospital, the only one in the region, serves more than 200,000 people, most of them resettled refugees and internally displaced persons, and almost all living in poverty.

I met Faustin that Wednesday morning, as I was headed out of the hospital to a clinic a couple of hours away. One of my colleagues, a physician from Cameroon, stopped me, saying, "Come quickly to the emergency room. Two children have picked up a grenade." At that moment I did not think it unlikely that someone in the region would have picked up a grenade and pulled the pin: after all, the boys live in a region hit hard by war and genocide. Ordnance hangs around for years. The boys said that they merely picked the thing up and threw it toward the cows they were herding; the cows took the full force of the mine and two were killed. It was an hour or so after seeing the boys that I began to think about the object itself, what it was and where it had been manufactured—

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us. There is, as is often reported by cheerleaders of commerce, vast and rapid growth in the global economy. China and India, not so long ago poor and agrarian, are already economic powerhouses and their economies continue to grow rapidly, if unevenly (and fueled by coal and oil). With fifty years of peace, Europe is more prosperous than ever. In spite of trade imbalances, a recession, and imprudent wars, the United States remains rich. Our citizens, if famously ill-informed about the world, are generous: almost half of American households responded to a tsunami in Asia, more than any other nation, and even more tried to respond to the worst hurricane ever to hit our country's Gulf coast.

This is a time of great problems, some new and some old, and a time for novel solutions. It's a time for social entrepreneurs.

When Sally Osberg and others at the Skoll Foundation called me last summer to let me know that, after a thorough work-up, diagnostic testing had proven that I was of this special breed of innovator, I was driving along a road in southeastern Rwanda. I pulled over to express my deep gratitude for the honor and the support of our work.

certainly not Rwanda. In the meantime, neither I nor my colleagues were thinking about anything other than trauma care, which is, of course, precisely what trauma victims need most. In this case it meant splinting fractures, debriding wounds, and applying dressings. We worked attentively and in near silence.

Of the two boys, one was not seriously injured. The other, Faustin, sustained multiple fractures, and many fragments had been blown into his skin. I splinted him, pulled the plastic fragments out of him, and prepared him for transport. Although we had just rebuilt the operating room, we did not have an orthopedic surgeon on staff, and Faustin needed to have his fractures set in the operating room with what is called an external fixator. Faustin, in the course of interviews conducted at home after the device was placed, did not wish to speak of his experience. "What I'd most like to do," he said a few days after surgery, "is to go to school." It turned out that he was not an orphan after all, but that his mother, poor and bereft after the genocide, had struggled for years with mental illness and had finally placed him with another family in 2004. "My mother is not well," he told me later. "She can't take care of me, so she brought me to a relative and I live here now. I would like to go to school, but [my adoptive family] has no money. So I herd cows every day, make sure they eat, move them to new grass." When I asked him about the landmine, he was, astonishingly to me, apologetic: "I didn't mean to pick up the grenade. I'm sorry I did it. I didn't mean to kill the cows. I'm sorry. It was an accident. We didn't know what we were doing, it was not our intention to kill the cows."

To me, as grotesque as it is to hear a child apologize for a landmine built in God knows what country, this is a story of hope, for the desire to go to school is as hopeful as it is universal. Faustin is now in school.

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My puzzlement I kept to myself: what, exactly, is a social entrepreneur? I know I'm a doctor and an anthropologist—and I will touch on culture below—but part of me winced as I acknowledged that we live in an era in which simply seeking to provide high-quality medical care to the world's poorest is considered innovative and entrepreneurial. Thus the diagnosis came with both honor and shame. Shouldn't we have long ago offered such services to those who need them most? Shouldn't we have designed systems to get around or solve the health problems faced by the world's bottom billion?

Having had the chance to connect with others similarly diagnosed, I think I get it now. Social entrepreneurship means many things, and those diagnosed do many things. But all of us carrying the diagnosis of social entrepreneur display certain symptoms that suggest not only the diagnosis, but also, a danger of infection. Indeed, we may soon see a global pandemic of social entrepreneurship.

Here are some of the classic symptoms of the disease: refusal to accept the world the way it is and the direction in which we're going. An unwillingness to say, no, this can't be done. Persistence. A certain amount of righteous anger about the

injustices done unto others, especially the poor and marginalized, and a willingness to fight back against unjust systems. And also hope. Blood tests I've done on social entrepreneurs, clandestinely, of course, and while the patients slept, show that all have alarmingly high serum levels of hope.

I for one am not embarrassed by these high serum hope levels, as long as our entrepreneurship remains grounded in solving real problems, especially the problems of those left behind or, worse, *damaged* by the unsustainable development that we have promoted, often aggressively so, over the past two centuries. Some

have been far more damaged than others. There are positive stories about transformations—personal, institutional, and political—that I've had the good fortune to witness in Rwanda, of all places. Rwanda has come back from the brink of hell and is the most social entrepreneurial country I have ever seen. Epidemiological studies suggest a pandemic of entrepreneurialism is breaking out there. But I also believe there's an Achilles heel of our nas-

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cent movement as social entrepreneurs, which I'll discuss below. I also will speak briefly of culture, although not in the way one might expect.

Hope in Rwanda. A surprising concept. If there is one continent on which economic growth is slow or stalled or uneven, it's Africa. This is also the continent with the highest burden of the diseases mentioned above and, accordingly, the shortest life expectancy, the highest rates of maternal mortality. There is no shortage of diagnoses and prescriptions for the ills of sub-Saharan Africa, and many are discrepant.

But many diagnoses and prescriptions are *not* discrepant. Can we break the cycle of poverty and disease? *Yes, we can.* Science, innovation, sound policy, and good governance, along with the needed financial resources, offer the promise of closing the gap between rich and poor, of promoting genuinely sustainable development, which means development with social justice and less inequality. This will lead to a dampening of the violence that continues to afflict hundreds of millions, most of them poor.

Every day in our work we meet people who are desperately ill, but they too have hope or they would not have come to see us. Sometimes, of course, they are

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almost without hope, so we go to see them. One patient, John, had three of this century's worst diseases: TB, AIDS, and poverty—all at once. We cured his TB with antibiotics, but he also received the only known treatment for hunger: food. It is stunning that we have to spend an endless amount of time arguing that food is the proper treatment for malnutrition? Yet we do. With the proper nutrition, John regained his strength and told me, several months later, that what he most wanted was a cow. John has hope because he feels well enough to work; it's what he wants to do.

John's and other individual stories are not to be discounted. Yet social entrepreneurs and our supporters are all obsessed, it would seem, with something called *scale*. The fetishization of scaling-up our work is a source of both anxiety and hope. Bringing a new, innovative project to scale often feels like the only way to leave a footprint (of the good kind) in an afflicted world in need of new ideas. In fact, Partners in Health has worked with the Rwandan government to scale up comprehensive care in three of the four districts in which there were no district hospitals. The biggest obstacle is still funding the growth. This includes again grotesquely, in my mind, the huge and ongoing battle over paying community health workers. There's no real argument about paying Western doctors and other medical professionals. It's the poor who are asked to volunteer. This simply doesn't work. We continue to search for the modest funds, or new models of financing, to pay them.

Partners In Health now works in nine countries and has trained and provided stipends to thousands of community health workers serving millions. I can't imagine anything more cost-effective than that. We have established formal training programs in global health equity at Harvard and one of its affiliated teaching hospitals. These were, to our knowledge, the first such training programs, but there will be plenty more. We're living in a time in which entrepreneurship and new ideas are not only needed but valued. Global health is now almost a fad in most American universities. I hope it's not a passing trend.

Medicine and public health will not solve the world's problems, but can offer part of the solution. What's been shocking to me over the past 25 years is the lightning speed at which many policymakers, themselves shielded from the risks faced by Faustin or John, decide that a complex intervention is "too difficult," "not cost-effective," or "not sustainable." In microfinance parlance, many of my patients are "poor credit risks," but aren't they the very people we claim to serve in the first place?

This is why I titled this discussion "a critique" of the social entrepreneurial movement: we need to be aware that each of the terms and concepts and tools we've developed can be used to deny the destitute access to goods and services that should be rights, not commodities. They are not full participants in the market, after all. How many times have you heard that people will value something more if they pay for it? Yet how many times have you seen data showing this is so regarding vaccines, bednets, or external fixators after picking up a landmine? Does any-

one really believe that a mother loves her newborn more if she's had to pay some sort of users' fee to access prenatal and obstetric care?

Such claims are piffle, of course, but they are also deeply reflective of an ideology that has crept into the social entrepreneur movement. Indeed, this may be the Achilles heel of the movement. And so—surprise—the culture I wish to speak about is our own. Among some entrepreneurs, it's not popular to talk of rights. We speak, instead, of “product” and “brand.” Patients and students—children!—become “clients” or even “customers.” The notion of “sustainability” becomes a

blunt instrument used against the poor. I've seen it time and time again.

This way of seeing the world has deep roots, but one's own culture is always hard to see. It envelops us. It is the culture we created and continue to shape. We need to be aware of the limitations of any culture that sees all services as commodities and very few as rights.

Let me be clear: this is not some sort of “anti-market” stance. It's merely the argument that the market alone will not solve the problems we face. It's the argument that, like all cultural constructs, that of social entrepreneurship needs to be understood. It's the argument that even though we're not from the public sector, we need to do everything in our power to make

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sure that the public sector does not shrivel and die. Why? Not only because a functioning public health or education system is often the only way to bring a novel program to scale, and not only because we need the participation of governments to address the current environmental crises at the transnational scale needed to make a difference. There is another reason to fight the neoliberal gutting of the public sector, and that is this: only governments can confer rights. The right to health care and the right to education can be moved forward by people like us, but non-government organizations, universities, foundations, and forward-thinking businesses are not, alas, in the business of conferring rights. And without basic rights—to water, security, health care, the right not to starve—then the world's poor do not have hope of a future.

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Looking around the room at the Skoll World Forum—or, indeed, at almost any conference focused on development—you will see a conspicuous absence of poor people. You'll see people of every hue and background, but not the poor. This is not really a critique: what matters is less that we invite the poor to participate and more that we fight for their right to survive and to become themselves social entrepreneurs. Without them, the movements we seek to build, and the entrepreneurship we seek to foster, will not succeed. If a movement can have two Achilles heels—and I know I've mangled the metaphor—this is the second one. We cannot build an environmental movement or a movement for sustainable development that does not have the social and economic rights of the poor at the center of the movement. They are decidedly not there yet (indeed, the environmental movement has for too long been a movement of the privileged).

In our culture of entrepreneurs, there are several complementary paradigms upon which to draw. I've already spoke about rights paradigms, and many progressive people are comfortable with this approach. The notion of a right to health care and clean water and education is largely an Enlightenment idea, but one that retains great potency. The irony is that, among self-proclaimed human-rights experts, these rights tend to be the neglected stepchildren. President Carter, speaking at the Skoll World Forum in 2008, said as much: when he began working in villages in Africa, he heard less about civil and political rights and more about the right to water, food, and health care. We've had the same experience. The focus in what we call "the West" is largely upon civil and political rights. We hear a similar focus among some mysterious portion of the population called "civil society." But in Haiti and in many of the places I've worked as a physician, the term "civil society" is in fact one that means those other than the poor. It means educated people, professional people, but it does not include those who live on less than a dollar a day and who have no social and economic rights. We should not give up on the rights paradigms, but rather enlarge them to include what many call the rights of the poor. Water. Food. Health care. Jobs. Education.

There are also public-health paradigms. These are more timid, but very useful among the powerful who are frightened or embarrassed by all this talk of rights. Let me give an example. When effective treatment for tuberculosis was developed, it would have been a good idea to make it available to anyone with tuberculosis, regardless of social station. To *sell* treatment for an airborne disease was not smart, since those who could pay might get better but those who could not would buy what they could and then develop drug-resistant TB. All this came to pass in the decade after the Second World War, so public health experts, uncomfortable with the notion of a right to health care, began speaking of "public goods for public health." Here was an airborne disease; it was a public problem, not a private one. A hard-won lesson.

But we still haven't learned. Look at the last couple of decades. Instead of "health for all by the year 2000," we had "structural adjustment," imposed by the international financial institutions that today claim amnesia regarding these events. There is still no admission that it is wrong, in settings of great squalor, to

insist on “user fees” or “cost recovery” from the poorest for medical or social services. This not only makes no sense, but it is inconsistent with our own experience. In the United States, where I once lived in a trailer park, there was never any doubt that I would go to public school as a right, not a commodity. It didn’t matter that my mother was a grocery store cashier with six children. It never occurred to me that I would not go to school and even on to university. Granted, I never thought I’d end up at Harvard, much less become a professor there. But I knew I’d go to

school, even though I knew nothing at all about taxes and the public sector.

Beyond rights and public health paradigms lie the development paradigms with which many of us are familiar. I’ve spoken already of the perversion of the notion of “sustainability”—anything can be sustained for us, but almost nothing can be sustained for the poor. Example: pay a Harvard professor a big consulting fee to work on community health care in rural Africa but refuse to pay the village health workers because it is “unsustainable.” This we must reject outright. True development will not occur without basic investments in public health and public education. A woman who will have,

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on average, eight pregnancies, no education, and malaria three times a year must not be expected to contribute to development; she, as often as not, will not survive to the age of 50.

We need to link our rights-based arguments to more subtle and honest notions of sustainable development, and to sell these to leaders of good will. I have met so many in Rwanda, the nation of hope of which I spoke earlier. It is a well-managed nation, for all its tragedies and great poverty. Most of the countries with the lowest life expectancies at birth are poor. Some are mismanaged, as are some of the wealthy countries, including, as recent events attest, my own. Still, many of the poorest countries are led by officials seeking to promote what is loosely termed development. Social entrepreneurs need to help them respectfully and without undermining the public sector. Sadly, it took me over 10 years to learn this.

Let me close by reflecting on how social entrepreneurs can be part of genuine, broad-based social movements. When we look back over the next quarter of a century, we’ll be consoled most by our contributions to a movement that continues to

grow not only in villages, slums, and squatter settlements, but also on campuses. It's a movement that will come to include a growing concern with the way in which the earth itself has been damaged, polluted by greed and war and feckless policies handed down from on high. But it's a movement that pays heed not only to the environment but also to the poor who are the chief victims of greed, war, and unjust policies.

A social-justice movement that links the rich world and the poor, Oxford to a village in Rwanda, the movement that links concern for the earth with respectful solidarity towards its poorest inhabitants, is our last great hope for a world marked by less suffering and violence and premature death. It's our last great hope for the generations to come, and for our own children, privileged though they may be.

We may be leaders of this movement but must also be humble participants. Some have not been as quick to see the boundaries and dimensions of this movement. That's because it's fluid, as all real social movements are. It's a chaotic movement, just now coalescing, but with the promise of lessening the hurts and insults of an unequal world. And it demands a little more militancy. Paul Hawken wrote in *Blessed Unrest* (Viking, 2007)

"It is time for all that is harmful to leave. One million escorts are here to transform the nightmares of empire and the disgrace of war on people and on place. We are the transgressors and we are the forgivers. "We" means all of us, everyone. There can be no green movement unless there is also a black, brown, and copper movement. What is most harmful resides within us, the accumulated wounds of the past, the sorrow, shame, deceit, and ignominy shared by every culture, passed down to every person, as surely as DNA, a history of violence and greed. There is no question that the environmental movement is critical to our survival. Our house is literally burning, and it is only logical that environmentalists expect the social justice movement to get on the environmental bus. But it is the other way around; the only way we are going to put out the fire is to get on the social justice bus and heal our wounds, because in the end, there is only one bus."

Sometimes entrepreneurs need to learn to be quiet passengers on this bus. Sometimes we'll take our turn at the wheel, sometimes we'll be the mechanic. But all of us need to get on the social-justice bus. That's the bus on which the real sustainable, green movement will be traveling. It's on that bus that we'll have epiphanies of social entrepreneurship. Don't get on the chartered plane.

We have a lot to offer. But, as a friend of mine likes to say, "hope is not a plan." We need hope and courage and a plan to end, for example, an unjust war. We need hope and energy to tackle the diseases that should have been wiped out decades ago or never allowed to spread so rapidly. We need hope to counter the policies that have weakened and even wrecked public-sector institutions without ever delivering on the promise to lift all boats. We need hope to speak to people in powerful positions whose hearts, unlike the polar icecaps, show little signs of melting. We need hope and we need each other.

I'll see you on the bus.