

The New Face of Global Giving

A new humanitarianism is emerging as private donors and governments respond to the world's needs.

BY HOLLY YEAGER

IN A BIT OF CRACKLING NEWSREEL FOOTAGE from May 1946, a headline declares “President Buys Food Packages for Starving!” and Harry Truman is seen handing over a \$1,500 check to a representative of CARE, the international humanitarian group. President Truman explains that the new organization will “act as a means for the whole country to provide a hungry person in Europe with food enough for three or four weeks,” and urges the American people to join the effort.

It is remarkable to see Truman, so closely associated with the grand, national-level response of the Marshall Plan, making a plea for this kind of small-scale action. But the clip also shows how much our humanitarian impulse—and the structures through which we express it—has evolved.

Truman seemed to be introducing the very notion that a check written in one country could help someone on another continent (though Americans had already donated generously to relieve famine in Europe after World War I and for other causes). Today, that idea is embedded in the public consciousness. The humanitarian and relief organizations established during World War II and its aftermath—including Oxfam, CARE, and World Vision—have expanded their reach and been joined by hundreds of others.

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The result is a public that thinks nothing of clicking on NothingButNets.net and, for just \$10, joining the fight against malaria (“your bed nets will be added to our next delivery to Africa”), or using GlobalGiving.com (“a marketplace for goodness”) to help finance an irrigation system for 7,000 Gambians or computer skills for 100 Sri Lankan students. Indeed, the humanitarian sector appears to be at a turning point. Today, with private money overtaking public funding and a host of fledgling organizations defining their roles, a new generation is becoming convinced, rightly or wrongly, of its ability to affect the lives of others. These groups have reached a critical mass, prompting them to look anew at how they do business and interact with government, multilateral organizations, and those they serve.

International philanthropy from 22 wealthy nations in the Organization for Economic Cooperation and Development reached \$42 billion in 2006, according to *The Index of Global Philanthropy 2008*, published by the Hudson Institute’s Center for Global Prosperity. By adding remittances—the funds migrant workers send back home—and foreign direct investment, the center put total private flows to the developing world at \$332 billion. That far exceeded official assistance—humanitarian assistance, disaster relief, and development aid—from those countries,

which totaled \$104 billion. (In the United States, official development assistance totaled \$23.5 billion in 2006; private philanthropy destined for similar uses, including funds from universities and religious groups, was \$34.8 billion.) According to the *Index*, “The numbers underscore the dramatic change in how the developed world is now engaging

which now works to fight poverty in 69 countries, as well as smaller ones. Taken together, he said, “it’s actually a sizable response to some of the world’s biggest problems.”

What Worthington calls the sector’s “collective impact” has given the private humanitarian community new sway among governments, businesses, and multilateral organi-

zations. He pointed to a meeting in late May at the World Bank in Washington about the emerging crisis caused by soaring food prices. Top officials from the Bank, the International Monetary Fund, UNICEF, and the UN Food Crisis Task-force participated, along with leaders of 30 civil society

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with the developing world—through a large and diverse private sector that is shaping economic growth and social patterns in dramatic and lasting ways.”

Many of the everyday good works carried out by humanitarian and development groups around the world are low profile, and often they have been under way for decades, but they still epitomize the spirit of the movement. The recent documentary *A Walk to Beautiful*, for example, tells the story of a hospital in Addis Ababa, Ethiopia, founded by two Australian doctors who arrived in 1959 and wound up staying for a lifetime once they saw a compelling problem. Surprising numbers of poor, undernourished women from the Ethiopian countryside suffered from a condition called fistula, a tear in the bladder or intestine during childbirth that leads to poor hygiene and very often to the complete ostracism of these women by even their closest family. Their lives were ruined. But now they have a place to go for a cure.

While there are countless such small-scale examples, big money, bigger organizations, and ever-bigger roles are forcing the new humanitarianism to confront an entirely novel set of prospects and challenges.

As president and CEO of InterAction, a coalition of 165 U.S.-based relief and development nongovernmental organizations (NGOs) working overseas, Samuel Worthington is in the middle of the changes sweeping the humanitarian movement. His group includes large players such as CARE,

groups that work on food delivery and security. “Fifteen years ago, that wouldn’t have happened,” Worthington said. “Now we’re at the table for that conversation.”

The day I spoke with him, Worthington had joined a group of NGO and business leaders for a morning meeting at the White House on relief efforts following the Chinese earthquake. Worthington led the first session, about short-term responses to the emergency, and President George W. Bush quizzed him: “How do you coordinate yourselves?” Worthington explained that because his group’s members operate all over the world, they are often among the first responders to emergencies. With that capability, and the sector’s growth, the humanitarian community now brings deep expertise in coordinating relief.

The sector has also become increasingly professional. While an American teenage girl and her mother may still spend two weeks in the summer painting the interior of an African orphanage, and the two-year Peace Corps stint remains very much in vogue, humanitarian organizations are now attracting people who work in the field for decades and others who have built their careers elsewhere—in the military, in business, in diplomacy.

Indeed, there is a growing sense that mere enthusiasm is not a sufficient qualification for would-be humanitarians. As Tony D’Souza, a Chicago native whose Peace Corps experience in Côte d’Ivoire was the basis for his first novel, *Whiteman* (2006), explained, even the best-intentioned newcomer may find it difficult to be effective.

“You hear that proverb in the Peace Corps all the



A Congolese woman holds her malaria-stricken child at a hospital run by Médecins Sans Frontières. Of the estimated one million people who die from the disease each year, 90 percent are African children under the age of five.

time, ‘Give a man a fish, feed him for a day; teach a man to fish, feed him for a lifetime,’” D’Souza said. But when he arrived in a rural Muslim village, “people knew how to fish. They knew how to feed themselves. I was the one who didn’t know how to do a thing.” It took 18 months for D’Souza to learn the local language and mores he needed just to begin the AIDS education he was sent to do. And when all was said and done, “the person who benefited most from that experience was me.”

Discussions of effectiveness in this sphere take many forms—and reports of weakness are easy to come by. A U.S. Government Accountability Office report earlier this year about international efforts to halve hunger in sub-Saharan Africa by 2015 found that Washington had increased food aid funding for emergencies but failed to address underlying conditions—such as low agricultural productivity—and thus to help break the African cycle of food insecurity.

This emphasis on accountability, to both funders and the people aid efforts are supposed to serve, will likely increase, as the humanitarian community competes for support in an increasingly crowded field. But

debates about effectiveness also extend to areas where funding is relatively strong.

Most people in the public-health community are thrilled to see the new energy behind the fight against malaria, which claims the lives of almost one million people a year, most of them Africans. The battle against the disease has been boosted by donors large and small, from schoolchildren who send \$10 to buy bed nets treated with insecticide to the Bill & Melinda Gates Foundation, which has pledged to spend millions. Many other high-profile efforts, at the White House, the World Health Organization, and in other quarters, have improved mosquito control, increased supplies of medicine, and made progress on vaccines. But a recent, ambitious call by the Gates Foundation for the eradication of the malaria parasite has prompted concern among some in the field that such a campaign—which would require massive investments in initiatives such as genetically modifying mosquitoes to resist the disease—may detract from effective current efforts that are instead focused on controlling the spread of the scourge and treating those who have it. Critics note that the World Health Organization launched an eradication campaign in 1955 but formally abandoned it 14 years later after the extreme costs of traveling the “last mile” became clear.

Professionals involved in the fight against malaria generally welcome the public attention showered on their cause in recent years—even *American Idol* did its part, contributing a portion of the proceeds from special charity fundraising broadcasts—but they say it may be most valuable not for the number of mosquito nets sent to Africa but for what it does to build public will. “You’re getting people to care, and you’re getting them to be invested stakeholders in the cause,” said one person who works in the global health community. Over the longer term, solid support will be needed for the unglamorous work that remains, including expensive improvements in basic public-health systems in poor countries—improved supply chains for medicine, staff for clinics, and so on.

The rise of many new groups, often with disparate priorities and views about how to tackle such challenges, may at times lead to fierce debates and set organizations working at cross-purposes. But these are growing pains. As Worthington put it, organizations like those he represents “are no longer just a sideshow on the international scene.” ■