

From lone ranger to team player

When I accepted the invitation to head up World Vision's ministries in Hong Kong and China back in 1996, little did I know what kind of challenge I was stepping into. While I was prepared for arduous journeys into remote villages deep in the interior of China, I was not at all ready for rounds of alcohol strong enough for disinfection purposes over dinners with government officials. And I have never grown used to giving speeches in Putonghua before a large audience.

It did not take me long to realise that my past years of neurosurgical training might be more of a hindrance than help. My new role required more patient listening and participative teamwork than individual snap decisions. Unlike performing a brain operation where the keyhole approach does not allow room for too many surgeons, fighting poverty is a huge task; it calls for a team approach and takes as many like-minded people as one can get. I had to quickly give up the lone ranger kind of working style and develop a caring and consultative form of leadership.

In medicine I received highly specialised training, but the new job called for general knowledge in almost every other subject—sociology, politics, anthropology, economics, communications, operational management, human resource development, financial control...the list goes on. Finally, I resorted to heeding the advice of Mr CH Tung on lifelong learning. I reinvented myself through business school, learning such topics as marketing, communications, financial and personnel management.

I soon found out that the notion of using my surgical skills to help the poor and needy was in fact a bit naive. The really poor in rural China cannot afford to go to hospital, let alone pay for expensive treatments like neurosurgery. Prevention of diseases through public health campaigns proved to be the most cost-effective intervention. With regret, I found that much of my knowledge of social medicine was outdated; the hottest subjects in developmental health nowadays such as HIV/AIDS and avian flu were not in our textbooks.

After spending a few years in the "Great Northwest", as the nation's outback is known, one starts to recognise its inhabitants by their costumes. Many of the rural poor in this most impoverished region are ethnic minorities, and soon one learns to differentiate a Miao from a Yao or a Hani by the clothes they wear. This brings a sense of satisfaction, letting one feel like an old hand in rural development.

After travelling through different provinces, one begins to realise what a daunting task it is for the Chinese government to run such a diverse nation. Each province has its unique geographical landscape, sociological make up, and economic challenges. Inaccessibility and poor infrastructure are common causes of poverty. To date, some 23 million Chinese still live in abject poverty in those inland provinces of "Outback" China. Other problems these inhabitants face include a low level of education, poor nutrition, lack of health care and frequent natural disasters like earthquakes, floods, and droughts. NGOs like World Vision carry out relief operations for acute disasters and long-term development programmes to address these problems. While the provision of hardware like building schools, clinics, and water systems brings obvious benefits, we believe the



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true success of a development project lies in building the human capacity and social capital of the local community.

Looking back, my past ten years of rural development work has been an eye-opening experience. Travelling, meeting people living in different areas, has broadened my perspectives, while struggling with the issues of poverty and justice calls for deep reflections on one's philosophy of life. As a new tier of leaders in World Vision China emerges to take charge, my sojourn in the outback of China may soon be over. But I am sure these fond memories will stay with me in the years to come.

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