The role of values in social innovation transfer

What role do values play in knowledge transfer between social enterprises, and what are the factors which facilitate or inhibit the exchange of innovative practice? Those are the questions behind new research by Imran Chowdhury of Wheaton College in Massachusetts, USA. Looking at social entrepreneurship through the lens of a partnership to transfer a model of affordable eye-care services from India to South America, his work covers topics such as social entrepreneurship, corporate social responsibility, philanthropy, and community-focused organisations.

Dr Chowdhury is particularly interested in organisations that pursue joint social and economic goals and use business strategies and methods to achieve social objectives. Distinct from corporates which use profits to pursue philanthropic goals, and non-profits which fund services by developing revenue streams, these models of social entrepreneurship are true ‘hybrid organisations’.

Dr Chowdhury’s latest work looks at what happens when hybrid organisations seek to transfer their models of social innovation to partners with different institutional logics, when the rationality for generating social impact varies between organisations in a partnership. The research is based on a longitudinal, qualitative field study of three social enterprises that formed a partnership to scale-up social innovation and adapt a model of affordable eye-care services developed in India to a clinic in Paraguay, South America.

Dr Chowdhury’s focus is on how organisations manage relationships and resolve conflicting demands emanating from their internal and external environments. In addition, his research examines the factors that influence knowledge transfer between partners in different settings, particularly the role that values play in such transfer.

FIELD STUDY
Located in the city of Macka in southern India, the Aravind Eye Hospital has more than 45 years’ experience in providing eye-care services to poor people, with the aim of eliminating needless blindness. In 2017/2018, the hospital recorded more than four million outpatient visits and performed nearly half a million surgeries. Half of these were delivered at no cost to the patient.

Founded in 1992, Fundación Visión is based in Paraguay’s capital Asuncion and leads blindness prevention in the country. It is the only institution that provides ophthalmological outreach services in rural areas. Eye-care procedures can be expensive and to help patients fund the cost, Fundación Visión linked up with Fundación Paraguay, a leading microfinance provider with a network of local offices and contacts in remote areas of the country.

Aravind, Fundación Visión and Fundación Paraguay have formed a partnership to transfer expertise from India to Paraguay. Although both countries are emerging economies, Aravind is based in a population-rich setting and Fundación Visión and Fundación Paraguay work with dispersed populations in remote settings, where the cost of service delivery is high. Both clinical providers are faith-based organisations: Fundación Visión is a Christian organisation and Aravind’s work is rooted in Hinduism.

To learn more about their programme, Dr Chowdhury conducted a series of semi-structured interviews with managers and staff from all three organisations. This was supplemented by extensive fieldwork, on-the-ground observation, and detailed examination of documents and publications related to the project.

Negotiating in good faith with partners may result in positive outcomes that both parties can live with.

CHRONOLOGIES AND LOGICS
Analysis of the data gathered allowed Dr Chowdhury to identify key moments in the development of the partnership and code them according to how, as hybrid organisations, partners managed and aligned their social and economic logics.

The results showed the existence of multiple competing logics which reflect the organisation’s institutional complexity. The most variation between partners organisations was at the level of social logics, which Dr Chowdhury further identified as either spiritual or social welfare logics. He explains: ‘Whereas the social welfare logic obtains legitimacy by making products and delivering services to address local social needs, the spiritual logic obtains legitimacy by linking the provision of social services and goods to an association with deities and faith as its fundamental guiding mechanism.’

Despite the partners’ different religious backgrounds, the fact that Aravind and Fundación Visión had a values-driven spiritual logic and shared an underlying commitment to a ‘higher power’ was an important point of unity and common purpose. This helped to facilitate collaboration between the two clinical systems and mitigate clashes when there was a mismatch of economic logics.

In contrast, decision-making in Fundación Paraguay was informed by a social welfare logic which focused on the provision of products and services to address local social needs, but privileged those who ‘deserved’ support. In addition, a mismatch of economic logics between Fundación Paraguay and Fundación Visión was exacerbated by the fact that there was a lack of alignment between the two organisations’ social logics.

It was vitally important that common ground was found between Fundación Paraguay and Fundación Visión, because the microfinance organisation’s country-wide local network provided the clinic with access to a greater number of patients for outreach eye-care services.

THEORETICAL BACKGROUND
Dr Chowdhury’s analysis of the study data suggests that how organisations respond to and manage conflicting demands can be a function of their ethical backgrounds and the way it builds on the work of the American social psychologist Jonathan Haidt, who studies the psychology of morality. Dr Chowdhury comments: ‘The present study, by examining how varying social motivations (emerging from varied social logics) can manifest as tensions or conflicts in partnerships, builds on Haidt’s notions by providing a basis for developing mechanisms for resolving these organisational tensions as they emerge in practice.

In addition, the findings demonstrate that in practice, the alignment of the partners’ organisational logics and values facilitated the way in which they were able to transfer knowledge about social innovation from a densely populated urban setting in India to dispersed, rural populations in Paraguay. The alignment of values helped to build trust which, in turn, enabled...
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CONCLUSION
Dr Chowdhury's study helps us better understand how organisations, particularly hybrid organisations such as social enterprises, balance social and commercial imperatives to scale-up entrepreneurial innovations. It demonstrates how multiple logics influence inter-organisational processes and how different social logics can co-exist in partnerships between organisations with different motivations for creating social impact.

It reveals the important role that values alignment plays in international management and helping entrepreneurs to transfer social innovation to partners in distant settings, despite the barriers posed by geography, language, and culture. It further defines the concept of ‘social’ in the practice of social enterprises who have either a spiritual or social welfare approach to their work and sheds light on faith and entrepreneurship and the importance of organisational belief.

The study has interesting implications in the wake of the global pandemic.

Dr Chowdhury’s research illustrates the importance of partners modifying practice to fit the context in which they operate, particularly with regard to resources. He explains: ‘In a COVID-19 affected world, those constraints could well apply to the urban areas which have been hardest hit by the pandemic.’

In addition, the pandemic has shown how the universal acceptance of mask-wearing in countries such as Taiwan and South Korea – an alignment of values between individuals and the state – helped to inhibit the spread of infection, at least during the early stages of the COVID-19 outbreak.

Dr Chowdhury comments: "Focusing on values alignment may therefore be a means to overcome some of the resistance to measures such as vaccines and also help to rebuild trust in public health institutions and other organisations charged with preserving well-being."