

THE GEORGE WASHINGTON UNIVERSITY

Nomination for the 2011  
Delta Omega Innovative  
Curriculum Award

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Introduction to Social Entrepreneurship in Public  
Health

**Blaine Parrish & Amita Vyas**

**School of Public Health and Health Services**

**Overview of the Course:** *Introduction to Social Entrepreneurship in Public Health* is a newly developed graduate level course in the School of Public Health and Health services offered to all George Washington University students (or students in the Washington Metropolitan Area Consortium of Universities) and required for those enrolled in the Graduate Certificate in Community-Based Program Management. The course is designed to encourage learners to examine innovative organizations and organizational leaders who have created opportunities for entrepreneurship, while providing support for public health programs that improve people's lives and that contribute to their improved social and economic conditions. In this course, we examine social entrepreneurs and their role in leading for-profit and non-profit social enterprises. The course provides learners an opportunity to critically evaluate the current system of support for social and public health services, which funds non-profit organization to primarily provide goods and services, rather than partner with communities and empower them to develop, fund, and sustain services and program on their own terms. The core of the course is built on reflection of these two ideas: “Social entrepreneurs identify resources where people only see problems. They view the villagers as the solution, not the passive beneficiary. They begin with the assumption of competence and unleash resources in the communities they're serving.” --David Bornstein, author of *How to Change the World: Social Entrepreneurs and the Power of New Ideas*. “Social entrepreneurs are not content just to give a fish or teach how to fish. They will not rest until they have revolutionized the fishing industry.” --Bill Drayton, CEO, chair and founder of Ashoka.

**The Rationale Behind Teaching Social Entrepreneurship in Public Health:** The rationale for such an innovative course in public health is to build learners' skill sets to include the ability to examine the infrastructure in place to deliver public health services, messages, and interventions and to provide alternatives to the current system. We ask the question: If \$30 a day can support a village for a month, why haven't the billions of dollars already invested in social services led to villages supporting themselves? Public health students are yearning for new approaches to test in public health practice and we believe that development of social entrepreneurs is one new approach public health students will embrace. Finding alternatives to the current system is new and exciting, while also challenging and threatening to the status quo. Learners are asked to critically evaluate the non-profit system's ability to deliver on the promise to lift individuals out of their current undesirable state and to provide them with opportunities for community-sustained success. As a contrast, learners are asked to consider whether social enterprise is a worthwhile alternative to traditional social services. While innovative in its own right, the idea was even more beneficially examined in the context of the 2011 summer offering of the course. The summer offering provided learners an extraordinary opportunity to explore social entrepreneurship not only in the classroom in Washington, DC, but also in practice during a two-week trip to Mumbai and Delhi, India. The course used India as a case study to emphasize how such organizations are started, how they are sustained, and how various business models are adopted to achieve an organizational mission. India has a strong non-governmental and not-for-profit infrastructure that is constantly growing, expanding, and taking on new social, health, cultural, and economic issues arising throughout the country. *By combining classroom and in-world experiences, the course offers learners an exciting opportunity to examine the results of social entrepreneurship in one of the faster growing countries in the world: India.* Taking the new curriculum to this setting provided opportunities for student enrichment and practice in the field and also an opportunity to strengthen the course for its future offerings.

**Addressing Public Health Educational Needs through Teaching Social Entrepreneurship:** Social entrepreneurship is the nurturing and developing of ideas that leads to new programs or approaches to social issues identified in a community. The fundamental premises are that the program (1) is an innovative approach to solving a social issue, (2) is consistent with the broader mission of the organization, (3) benefits the civic life of the community, (4) benefits the clients of the program, and (5) is managed in a way that is operationally feasible for the organization. Class time is focused on taking an idea and developing it into a social response through the components of a solid business plan, including: planning, designing, implementing, monitoring, evaluating, and promoting the organization and its mission. The course focuses on the critical factors associated with a successful new venture initiation as well as the preparation of a business plan that can be used to begin operations in a new social enterprise.

The course challenges learners to confront more advanced issues faced by today's social entrepreneurs. An emphasis on entrepreneurial teamwork, leadership, and risk versus reward is explored. As philanthropists, funders, and supporters become even more interested in what their money is buying, public health practitioners must be able to evaluate and measure health outcomes, but also be prepared to give an accounting of where the funds are used, how they are used, and provide a roadmap for funders to follow to give them confidence that their money is making a sustainable difference.

**Integrating Public Health Practice into Classroom Discussions and Experiences:** Students are given the opportunity to learn from experts in various aspects of social entrepreneurship including non-profit law, global philanthropy, cause-related marketing, and monitoring and evaluation. Significant class time is spent on listening to public health practice examples and discussing strengths and weaknesses of various strategies and systems. During the students' travel experience to India, the country became an active learning classroom. Students spent significant discussion time reflecting on meetings with organizational leaders, service learning through projects designed to test learners' public health practice skills, and site visits that provided hands and eyes-on experiences not possible in the classroom. Through examination of information presented during this course and personal contact with successful social entrepreneurs in the United States and abroad (specifically in this case, India), learners: (1) gain a working knowledge of the concepts, opportunities and challenges of social entrepreneurship; (2) discover the role of social entrepreneurship in creating innovative responses to critical social and public health needs; (3) engage in a collaborative learning process to develop a better understanding of the context and domain of social entrepreneurship; and (4) develop contacts with social entrepreneurs for a better understanding of the personal nature of entrepreneurship.

**Employing Public Health Practice/Scholarship to Highlight Successful Models:** In addition to site visits with public health organizations and social entrepreneurs, learners spent time with organizations that support social enterprises---**Acumen and Unlimited India**. In this more traditional classroom setting, the leadership teams of both organizations provided brief overviews of their work, but allowed the balance of time for learners to challenge the assumptions about the current models in place to support public health practice and to use knowledge gained through their readings, meetings, and lectures to highlight what they thought were best practices and possible solutions to challenges in the field. These interactions and the ideas developed during these sessions are heavily reflected in the blog writings each learner posted daily while on the trip. Learners highlighted specific topics each day for reflection, including: general thoughts on India as a nation and specifically on the people of India as they perceive them; what characteristics, knowledge, skills and/or abilities they observed in inspiring social entrepreneurs or NGO leaders in the field of social enterprise; how new ideas to address health and social issues are incubated and grown in a politically hostile or economically challenged community; and finally, the learners personal reflections on their experience being a public health student providing public health services in a country with such need. Blogging served as a diary and a tool for developing ideas for the final project. This process is intended for students to begin thinking further about the changes they hope to make through learning and reflection. Also, the blogging is an opportunity for students to practice writing, in preparation for submitting research for peer review.

**Emphasizing the Application of Public Health Principles and Science-Based Decision-Making:** The course takes a unique look at the 10 essential public health services – asking learners to identify where philanthropists and funders currently focus their support and where, based on the information learned in the classroom and in the field, support should be focused. Researching science-based decision-making should be at the top of the list of areas in need of support, yet organizations in the US and abroad continue to use untested home-grown interventions that have proven to be unsuccessful and unsustainable. The emphasis on the importance of **each** essential public health services and the development of ways to inform social entrepreneurs of the importance of the services and the evidence-based practices available (in public health interventions **and** in business practices) is the bases for skills building and instruction in the course. The need for these skills became evident when the senior leadership of **Population Services International (PSI)** challenged students, during a question/answer period, to critique their programs by applying what the students knew about public health principles and science-based decision-making.

Students were able to recall a significant amount of instruction from the classroom and to use that knowledge to provide substantial and constructive criticism of the programs – to the delight of the PSI senior staff! They were especially pleased that students understood the importance of mobilizing community partnerships to identify and solve health problems – an essential public health service and one used as the cornerstone of this course.

**Strengthening Skills Development through Public Health Practice:** Many of the best ideas come from the least expected places. Each of us has a dream to make a difference either in our personal world, our larger community (demographic and/or geographic), or other world communities. This difference starts with ideas for change. Learners are asked, using the skills they develop through this class, to write an outline of an idea for change. The project will require the student to support the need for change through the eyes of a social entrepreneur – not as a critical look at the feasibility of such an idea, but through the need for change the idea can inspire. The final project is **not** just an idea paper. The project is a well thought out description of a social issue and supporting documentation that leads the reader or reviewer to believe the author has the ability to make the case for change. The social enterprise/non-profit final project focuses on an innovative idea in India or any other part of the world—the idea/innovation **MUST** address a public health issue. The project is evaluated based on the level of innovation, the expected impact and description of metrics, and the details that indicate that it is evidence-based. The details include: (1) the problem; (2) the solution; (3) the innovation; (4) the proof it is evidence-based; (5) the expected impact on outcomes; (6) the marketing and/or cause-related marketing and media approach; and (7) the management and financing of the enterprise to ensure it is a sustainable venture.

**Involving Community-Sector Partners in Teaching:** To test their ability to develop such a project, students developed skills in the field by implementing public health practice through several service learning projects in India (two are highlighted here). First, students assisted the medical and public health staff from **AmeriCares** by providing support to the mobile van as it extended health services to mostly women and children seeking services in the slums of Mumbai. Students participated in gathering medical information and observed the staff as they triaged patients in an abandoned storage unit, in the driving rain. Second, students developed a curriculum and oral presentations for two distinct groups supported by **Aastha Parivaar**. One group presented information on breast cancer, menopause, and menstruation to women who work with commercial sex workers. The second group presented the same information (and an impromptu discussion and demonstration of the female condom) to commercial sex workers. Students also toured the largest slum in all of Asia, Dhavari, and experienced firsthand the work **Acorn** provides to individuals working in waste management. One highlight was working with **Impact India** to hand out vitamin packets to school age girls and to observe the girls measuring each other's BMI to record as a part of their own public health education. Each service project provided learners the opportunity to test their own assumptions, put their own work out in the field for testing, and to open up their ideas and their practice to support and critique. Finally, each day, the students and instructors participated in yoga taught by **Ritu Sethi** as a way to experience other forms of exercise and medication as part of learning another culture and using other strategies for taking care of our bodies and our minds.

**Presenting Case Studies and Other Examples of Inter-Disciplinary Projects:** Finally, students analyzed two specific case studies outside of the India case study. The first case, *Venture Philanthropy and Social Entrepreneurship in Community Redevelopment*, explored how one man and his determination to improve an entire community, led to significant changes for the community in health, education, and revitalization, while capitalizing on his relationships with business men and women and using his own wealth as a catalyst for inspiring others to support his enterprise. The second case, *Non-Profit Activist Public Relations and the Paradox of the Positive: A Case Study of Frederick Douglass*, required students to look at public health in an innovative way: through an approach, rather than a message, as delivered by Frederick Douglass in his “Fourth of July Address” denouncing slavery. The case analysis requires significant critical thinking and asks students to examine how social entrepreneurs take an unpopular position and turn public sentiment into a force of change. The assignments require that learners do more than present papers on the studies. They require learners to apply the lessons learned in the case studies

to their own experiences before and during the class. By applying these lessons learned, students take from the class the ability to see social entrepreneurship in public health practice as a possible key to effecting public health outcomes in a positive way in the future.

<p>THE GEORGE WASHINGTON UNIVERSITY MEDICAL CENTER WASHINGTON DC</p>	<p>School of Public Health and Health Services Department of Prevention and Community Health</p> <p><b>PUBH 6590.60</b></p> <p><b>Introduction to Social Entrepreneurship: A Case Study of India</b> <b>Short-term Abroad Course</b> <b>Summer Session II 2011, 3:20-5:20pm</b> <b>(2 credits)</b> <b>21765 K Street NW</b> <b>Suite 711 Classroom</b></p>
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**Course Description:**

*Introduction to Social Entrepreneurship* provides an opportunity for students to explore social entrepreneurship in the class room and in the community. Students examine innovative organizations and organizational leaders who have created opportunities for entrepreneurship while providing support for programs that improve people's lives and that contribute to their improved social and economic conditions. In this course, we will examine both non-profit organizations and for-profit social enterprises.

This is a 6 week course during Summer Session II. *The first 4 weeks will be spent at the Washington D.C. campus, and then 2 weeks in India. The course will use India as a case study to emphasize how such organizations are started, how they are sustained, and the various business models that are adopted to achieve an organizational mission. India has a strong non-governmental and not-for-profit infrastructure that is constantly growing, expanding, and taking on new social, health, cultural, and economic issues arising throughout the country.*

**Course Prerequisite(s):** Specific application procedures are required for acceptance into this course. Please refer to the GW study abroad application.

**Course Learning Objectives:**

Social entrepreneurship is the nurturing and development of ideas the leads to new programs or approaches to social issues identified in a community. The fundamental premises are that the program (1) is an innovative approach to solving a social issue, (2) is consistent with the broader mission of the organization, (3) benefits the civic life of the community, (4) benefits the clients of the program, and (5) is managed in a way that is operationally feasible for the organization.

Class time will be focused on taking an idea and developing it into a social response through the components of a solid business plan, including: planning, designing, implementation, monitoring, evaluation, and promotion. This course focuses on the critical factors associated with successful new venture initiation as well as the preparation of a business plan that can be used to begin operations in a new social enterprise. This course will challenge learners to confront more advanced issues faced by today's social entrepreneurs. An emphasis on entrepreneurial teamwork, leadership, and risk versus

reward will be explored. *By combining classroom and in-world experiences, the course offers students an exciting opportunity to examine the results of social entrepreneurship in one of the faster growing countries in the world, India.*

Through examination of information presented during this course and personal contact with successful social entrepreneurs in India, students will:

- Gain a working knowledge of the concepts, opportunities and challenges of social entrepreneurship
- Discover the role of social entrepreneurship in creating innovative responses to critical social and public health needs
- Engage in a collaborative learning process to develop a better understanding of the context and domain of social entrepreneurship..
- Develop contacts with social entrepreneurs for a better understanding of the personal nature of entrepreneurship.

**Required Texts** (Reading for a particular class should be completed before coming to class.)

David Bornstein (2007). *How to Change the World: Social Entrepreneurs and the Power of New Ideas*. New York, NY: Oxford University Press.

Students should regularly check Blackboard as other required readings will be posted under the “Required Readings” section.

**Supplemental:** Alicia Epstein Korten (2009). *Change Philanthropy: Candid Stories of Foundations Maximizing Results through Social Justice*. San Fransisco, CA: Jossey-Bass.

#### Methods of Instruction

√ Lectures	√ Recommended/Supplemental Readings
√ Case Studies	√ Class and Small Group Discussions
√ Required Readings/Textbook	

#### Methods of Evaluation

#### Percent of Grade

Case Studies (2)	20
Blog Writing Assignment	50
Final Project	30

#### Grading Scale and Standards

Points Earned	Grade
95 – 100	A
90 – 94	A-
87 – 89	B+
84 – 86	B
80 – 83	B-
77 – 79	C+
73 – 76	C
70 – 72	C-
69 and below	F

## **Assignments:**

**Case Study and Analysis:** Two cases will be analyzed in this course. No case composition can exceed three (3) pages. *The assignment is due and required for upload to Blackboard under "Assignments."* Late assignments are not accepted unless the student can document serious illness or family emergency. Please refer to the appendix and a "guide to case analysis" for both discussion and composition suggestions.

**A Guide to Case Analysis:** Case study analysis can be a difficult learning exercise for students who are challenged in a semi-structured environment. The very nature of social entrepreneurship means ideas come first and infrastructure and form come as the idea grows. No correctly answered list of questions or mechanical process will lead to the "right" answer. In fact, there is no single "right" solution to most entrepreneurship challenges.

When analyzing a case, remember that there are many possible approaches and solutions. The goal is not to figure out "the answer" but to sharpen analytic, problem solving, and decision-making skills. The following steps outline the basic approach that one should follow when analyzing a case, whether for class discussion or in preparation for a written analysis

- First, read the assigned reading for the week of the case. The reading material will play an important role in the case analysis. Remember that case analysis in this course is cumulative. Thus material from earlier chapters or readings may be relevant and should be applied where relevant.
- Second, read the case. Take notes about the important issues that the case raises and the material from the reading that seems to apply. Ask yourself, what are the major questions that this case poses for the decision maker?
- Third, analyze what is occurring in the case and why. Identify outcomes in the case and/or issues that the organization faces. These outcomes may be bad (e.g., cash flow issues, inability to expand, conflict among the business partners, inability to control operations), or they may be good (ability to engage partners, strong community interest). There may be numerous problems and issues. The goal of analysis is to *explain* the underlying mechanisms that are producing the outcomes or problems in the situation. This process will highlight the relationship between symptoms and causal mechanisms. Consider the following example: An individual goes to the doctor with the symptoms of a cough or a fever. The physician can easily treat the cough or fever with a number of medicines. However, it is important for the physician to determine the cause of the symptoms. If the cause of the cough is tuberculosis, then only treating the cough can cause serious illness and death. Clearly the cough is just a symptom of a deeper underlying problem. Good analysis cleverly weaves symptoms into a causal map that gets to the underlying root of the problem.

What will be evaluated in the case study analysis is the cogency of the explanation of the process leading to the symptoms. It is a difficult and time-consuming process to develop clinical skills. Remember that specific cases are assigned because they present good opportunities to practice using different theories and frameworks. Therefore, material from the assigned reading and often other material from earlier readings must be applicable to the case. Theories and course frameworks essential for supporting the analyses are found by taking advantage of all resources. One should view the theories and frameworks as a way to explain the underlying causal mechanisms contributing to the outcomes in the case, and as a way to organize and justify your arguments. Be explicit and thorough in the use of course concepts and theories, but avoid the tendency to throw in course terminology merely as "buzzwords."

Recognize that some cases do not have problems as such. The organization may be doing quite well. Cases are real-world situations, not necessarily examples of bad management. Don't make up problems when none exist. Take the situation for what it is rather than approaching it with a point of view. Be alert for the danger that some information in some cases is coming from biased participants and therefore must be taken with a grain of salt. A characteristic of cases is that one never has all the information and therefore it can be difficult to determine what is irrelevant, trivial or even obfuscating. The absence of

essential information may force more assumptions. Assumptions should always be clearly labeled as such and must be relevant and realistic. Do not restate the facts of the case. Rather, use material from the case to support the analysis or to provide examples to support the discussion.

Remember, the objective is to explain, not describe or report. At the conclusion of each written case analysis, offer recommendations for change, or recommendations for how the situation could have been better handled or how the organization has addressed issues. Keep in mind that recommendations typically have both positive and negative consequences. For example, a solution may eventually work but be very costly, difficult to implement and/or take a long time to have a significant impact. Develop the recommendation that has maximum positive impact and minimum negative consequences.

Recommendations should logically follow from the analysis and they should be feasible. For example, firing the boss and replacing her/him with a better manager may be a good "theoretic" solution but it may not be feasible in a given set of circumstances. Recommendations must be effective and efficient. Killing a fly with a bomb is effective but not efficient. Few, if any, recommendations are completely without costs or negative consequences. A good analysis presents a thoughtful, balanced presentation of recommendations instead of just a one-sided argument.

Finally, make sure that the case analyses are well written, clearly organized, and have a logical flow. Poor writing will result in a poor grade. It usually helps to provide a brief summary statement and "roadmap" at the beginning of the analysis to orient and guide the reader. Also make sure that any recommendations follow directly from the analysis of the problem, and that the overall conclusions are consistent with the analysis.

**Blog Writing:** This course provides students with the unique opportunity to meet with entrepreneur's at all societal levels, visit Dhavari (Asia's largest slum), participate in service projects and live in the world's largest democracy for 2 weeks. Each day, students will experience something new. Developing innovative ideas to social and economic problems requires: 1) understanding the context you are working in; 2) ongoing reflection; 3) being a leader for a specific social problem.

Students can begin this process by blogging about their daily experiences. Topics can include: 1) about India; 2) an inspiring NGO leader or social entrepreneur; 3) new ideas to address health and social issues. The minimum is at least one paragraph (3-5 sentences). Blogging will serve as a diary and a tool that can be used for the final project. This process is intended for students to begin thinking further about the changes they hope to make through learning and reflection. The ideas presented in the blog will be made available to the GW community, so students become advocates/leaders for a specific social issue.

All students will be required to publish one blog discussion **daily**. The site students will use for blogging will be announced on session 1 of the course.

**Final Project:** Many of the best ideas come from the least expected places. Each of us has a dream to make a difference either in our personal world, our larger community (demographic and/or geographic), or other world communities. This difference starts with ideas for change. Students will be asked, using the skills they develop through this class, to write an outline of an idea for change. The project will require the student to support the need for change through the eyes of a social entrepreneur – not a critical look at the feasibility of such an idea, but the need for change the idea can inspire. The project can be presented in written or video format, but must continue all aspects of a "business plan," which would include documented support of the approach. The final project is **not** just an ideas paper. The project is a well-thought out description of a social issue and supporting documentation that leads the reader or viewer to believe the author has the ability to make the case for change.

The social enterprise/non-profit final project can focus on an innovative idea in India or any other part of the world—the idea/innovation **MUST** address a public health issue, although one can think broadly about public health and social and behavioral determinants of health. The project will be evaluated based on the level of innovation, the expected impact and description of metrics, and the details that indicate that it is evidence-based. The submission must be well-written and demonstrate thought and attention to detail.

Avoid jargon and be sure that your audience understands exactly what you are proposing. No less than 10 references, used in the narrative and as support for the underlying theories of social entrepreneurship, must be used in the final paper outline.

You must submit a 5-8 page narrative outline (single spaced) that includes the following sections:

- **Problem:** Describe the problem that you are trying to solve.
- **Solution:** What is your proposed innovative solution? Why is it important? How will it be implemented in the field?
- **Innovation:** How is the idea new and innovative?
- **Based in Evidence:** How is your solution evidence-based? Why will it work? This is the most important criteria for evaluation.
- **What is the Expected Impact?** What will be the outcomes, and what metrics will be used?
- **Marketing and/or Cause-related marketing and Media**
- **Management and Financing:** Who will lead the social enterprise? What are the proposed or Anticipated funding sources or revenues?

### **Class Policy:**

Expectations are that students will use their own knowledge, skills, and abilities for individual assignments, supported by academic research and critical thinking. When working in groups, the expectations are that students will meet group expectations for a high level collaboration for assignments and that the group's knowledge, skills, and abilities will be reflected through . If you copy another students assignment or let someone else copies yours, you are both cheating.

**Assignments:** Unless otherwise noted, students are expected to draw on their own knowledge, skills, and abilities to write their individual assignments. Group assignments draw on the knowledge, skills, and abilities of the group, with group members assisting in evaluating the contributions of its members.

**Late Work:** Late work will not be accepted.

**Attendance/Participation:** Your attendance and active participation are an integral part of your learning experience in this course. Come to each class prepared to discuss the readings.

### **Blackboard:**

Blackboard is used for posting course files and assignments and for communicating with the class. Students are already "signed up" for this course on Blackboard, since it is linked to the course registration system. It is the student's responsibility to periodically check the course site (log in at <http://blackboard.gwu.edu/> using the gwu.edu address) for updates to the syllabus/readings. It is important to note that materials posted on Blackboard are likely to provide substantive support in attaining course core competencies. Thus, it is strongly recommended that students check Blackboard on a regular basis.

### **Academic Integrity:**

Please review the University's policy on academic integrity, located at [www.gwu.edu/~ntegrity/code.html](http://www.gwu.edu/~ntegrity/code.html) All graded work must be completed in accordance with The George Washington University Code of Academic Integrity. Academic dishonesty is defined as cheating of any kind, including misrepresenting one's own work, taking credit for the work of others without crediting them and without appropriate authorization, and the fabrication of information. Common examples of academically dishonest behavior include, but are not limited to, the following: cheating; fabrication; plagiarism; falsification and forgery of University academic documents; facilitating academic dishonesty.

**Students with Disabilities:** If you feel you may need an accommodation based on the impact of a disability, please contact me privately to discuss specific needs. Please contact the Disability Support Services Office at 202.994.8250, Suite 242 Marvin Center, <http://gwired.gwu.edu/dss>, to establish eligibility and to coordinate reasonable accommodations.

**Adverse Weather/Class Cancellation:**

In the advent of inclement weather or any other emergency, The School of Public Health and Health Services will follow the decision of the University, and I will follow the SPHHS decision. Call the University hotline at 202.994.5050 or check the GWUMC status button at [www.gwumc.edu](http://www.gwumc.edu). In the event of class cancellation, you will be emailed about rescheduling, assignments due, etc.

<b>WASHINGTON, DC CAMPUS (Wed/Thurs 3:00-5:00pm)</b>	
<b>SESSION</b>	<b>DATE</b>
<b>Session 1</b>	<b>Wednesday 7/6/2011</b>
<p><b><u>Topic 1: Introduction to Social Entrepreneurship</u></b>            The first session of the course consists primarily of an introduction to the course and to the innovative field of social entrepreneurship. Key concepts are introduced and discussed. Students will be given a first look at the process of what it means to be a social entrepreneur and the difference between entrepreneurial and innovative.</p> <p><b>Required Reading:</b> <i>Chapters 1 &amp; 2: David Bornstein (2007). How to Change the World: Social Entrepreneurs and the Power of New Ideas.</i></p> <p>Boschee and McClurg article "Toward a Better Understanding of Social Entrepreneurship" posted on Blackboard.</p> <p>Dees, J. Gregory. (2001). The meaning of "social entrepreneurship." Posted on Blackboard.</p> <p><b>Blackboard Video:</b> <a href="http://www.ashoka.org/views/video?filter0=163">http://www.ashoka.org/views/video?filter0=163</a></p> <p><b><u>Topic 2: Developing The Social Venture Strategy and Plan</u></b>            This session will also address the importance of developing a good business plan to ensure a viable and sustainable social venture strategy and plan. Also, the session takes a critical look at how "social entrepreneurship" has evolved and how that plays into developing organizational plans.</p> <p><b>Required Reading:</b></p> <p>John M. Bryson, Michael J. Gibbons, and Gary Shaye, Enterprise Schemes for Nonprofit Survival, Growth, and Effectiveness, <i>Nonprofit Management &amp; Leadership</i>, 11(3), Spring 2001, 271-288.</p> <p>Examples of Social Business Plans on Blackboard</p>	
<b>Session 2</b>	<b>Lab Session</b>
<p><b><u>Case Study Analysis: Due Under Assignments in Blackboard 7/14</u></b></p> <p><b>Required Reading:</b> Slyke, D. &amp; Newman, H. (2006). Case study: Venture philanthropy and social entrepreneurship in community redevelopment. <i>Nonprofit Management and Leadership</i>, 16(3), 345-368.</p> <p>View the "Frontline World Social Entrepreneur Series on Blackboard  <a href="http://www.pbs.org/frontlineworld/stories/socialentrepreneurs.html">www.pbs.org/frontlineworld/stories/socialentrepreneurs.html</a></p>	
<b>Session 3</b>	<b>Wednesday 7/13/2011</b>

**Nonprofit Law in the United States (Students will learn about non-profit law in India while abroad)**

This session will focus on pertinent legal issues and barriers related to non-profit organizations and ventures. Current topics include: fundraising/charitable giving; governance and structure; lobbying and electioneering; private foundations; requirements for federal tax exemption; volunteers; and administration.

**Required Reading:** Current Issues in Nonprofit Law: An electronic newsletter of nonprofit laws you need to know. Accessible online ([www.nonprofitissues.com](http://www.nonprofitissues.com)). (Different discussions will be highlighted, depending on current issues being discussed.)

**Guest Speaker: Andras Kosaras, Arnold and Porter**

**Session 4** | **Lab Session**

**Case Study Analysis: Due Under Assignments in Blackboard 7/22**

The case of Frederick Douglass and his use of public relations to address slavery.

Waymer, D. M. and Heath, R. L. (2007). Non-profit activist public relations and the paradox of the positive: A case study of frederick douglass' "Fourth of July Address"" *Paper presented at the annual meeting of the NCA 93rd Annual Convention, TBA, Chicago, IL.*

**Session 5** | **Wednesday 7/20/2011**

**Topic 1: Public Relations, Media and Marketing A Vision**

This session will focus on pertinent public relations and media relations issues related to non-profit organizations and ventures. Marketing your vision is a way to communication to the world around you. This session will also focus on the importance of marketing your social entrepreneurial endeavor in a new media world.

**Required Reading:**

Pozen, David E. (2008). We are all entrepreneurs now. *Wake Forest Law Review*, Vol. 43, pp. 283-340. Posted on Blackboard.

Do It Yourself Communications. *Getting what you want from the media: Essential skills for nonprofits.* Media Relations (2009).

**Guest Speaker: Kate Roberts, Population Services International**

**Topic 2: Preparing for Time in India: Cultural Issues, Health & Safety**

**ATTENDANCE IS MANDATORY**

**Lucie Cannata from the Study Abroad Office**

**Session 6** | **Lab Session**

**Global Philanthropy: Global India Fund Case Study: REACTION "PAPER" VIA YOUR BLOG (DUE 7/28)**

**Required Reading: Review of the following four (4) online organization websites:**

[www.globalgiving.org](http://www.globalgiving.org) [www.kiva.org](http://www.kiva.org) [www.globalindiafund.org](http://www.globalindiafund.org) [www.samhita.org](http://www.samhita.org)

**Session 7** | **Wednesday 7/27/2011**

**Leading the Mission-Driven Organization I**

The session will discuss how mission driven organizations are created to accomplish goals that extend beyond profits for stakeholders and owners. Such a mission occurs in the context of various organizations, including non-profit and for-profit, philanthropic and religious, public and private, governmental and non-governmental.

Stid, D & Bradach, J. (2009). How visionary nonprofits leaders are learning to enhance management capabilities. *Strategy & Leadership*, 37(1), pgs 35-40.

*Chapters 3-8: David Bornstein (2007). How to Change the World: Social Entrepreneurs and the Power of New Ideas.*

**Session 8**

**Lab Session**

**Final Review of All Requirements**

Ensure all requirements are completed required by the Office for Study Abroad and items listed in the course guidebook. To access your study abroad account go to <http://www.studyabroad.gwu.edu/index.cfm>

**Required Reading** *Chapters 9-21: David Bornstein (2007). How to Change the World: Social Entrepreneurs and the Power of New Ideas. (Airplane Reading ☺)*

**India 8/1/2011-8/12/2011**  
**See attached itinerary for more details**

**Week 1: 8/1-8/8/2011**

**8/1/2011: Monday**

Dinner--Welcome to India and the Classroom in India

**8/9/2011: Tuesday**

Depart for Delhi

**8/12/2011: Friday**

**Presentation of Final Projects**

**Topic:** Students will give a 5-7 minute speech presenting their ideas in front of the class

**Final Papers Due via Blackboard August 30, 2011**

**The George Washington University  
School of Public Health and Health Services  
Introduction to Social Entrepreneurship in Public Health**

August 1 – August 12, 2011

**Sunday, July 31<sup>st</sup> 2011**

Arrive in India

Check into Hotel

HOTEL SUBA INTERNATIONAL

Plot 211, Chakala, Sahar Road, Opp cigarette factory, Andheri(E), Mumbai-400 099, India Tel.: +91-22-6707 6707 Fax.: +91-22-6707

<http://www.hotelsubainternational.com/>

**Monday, August 1, 2011**

Relaxation

Breakfast at hotel or near hotel

Lunch (*on your own*) at hotel or near hotel

6:00pm Meet in hotel lobby for brief orientation and “check-in”

6:30pm Depart hotel for dinner in Goregaon

7:00-8:00pm Group Dinner with Samhita & GIF  
Rajdhani  
Mall Management Office  
Oberai Garden City,  
Off Western Express Highway,  
Goregaon (East),

**Tuesday, August 2, 2011**

8:15am Meet in Lobby and Depart to Khar/Americares

9:00am- 1pm Americares India  
Mobile Medical Van program

Contact information:

Purvish Parikh

<http://www.americaresindia.org>

91 982 109 7752

B6, Nav Meghdoot (Block B, 2nd floor, flat 6), Opp Levi's showroom, near Khar telephone exchange (it is the third building to the south of the telephone exchange), Linking Road, Khar West, Mumbai 400052. It is on the main road - Linking Road. It is easy to locate on Google maps - since our office is marked as AmeriCares India Foundation - usually seen only on maximum enlargement of the map.

**About AmeriCares India**

The AmeriCares India Foundation is an independent registered trust in India, a charitable organization that provides immediate response to emergency medical needs and supports long-term humanitarian assistance programs in India and in neighboring countries, irrespective of race, creed or political persuasion. In that capacity, AmeriCares India Foundation currently operates in twenty states across India, and has already delivered more than Rs 13 crores worth of free medical assistance in the last year

alone. AmeriCares India Foundation accomplishes its mission through the donation of essential medicines and supplies to charity hospitals and community medical programs, by operating medical camps in slum and tribal areas, and by responding to disasters such as the floods in Leh-Ladakh or the cyclone in West Bengal. This work is made possible by soliciting donations of medicines, medical supplies and other relief materials from Indian-based pharmaceutical manufacturers and multinational pharmaceutical manufacturers based in India, and delivering them quickly to those in need. In addition to bringing critical medical assistance to under-resourced communities, AmeriCares India Foundation simultaneously emphasizes the need for health education, disaster preparedness and medical training. Recurrent medical camps raise awareness about disease prevention, health promotion programs educate children on the importance of proper hygiene techniques, and disaster preparedness workshops give responders and lay people alike the training they need to take effective action during an emergency.

1:00 – 3:00pm                      Group Lunch/Q & A with Americares Team

3:00pm                                Back to Hotel/Relax and *Dinner on Your Own*

**Wednesday, August 3, 2011**

9:00-10:00am                      Yoga  
Ritu Sethi (yoga instructor)

10:00-11:00am                      Breakfast

12:00pm                                Meet in Hotel Lobby and Depart for Girgaon

Service project with Aastha Parivaar (at 2 CBOs)

Women's Health Training Co-leaders: Jenn Queen and Lindsay Godair

**Aastha Parivaar** is an organization of the sex workers, for the sex workers and by the sex workers. A federated body of 14 CBOs (Community Based Organizations) formed under the FHI implemented Aastha Project, Aastha Parivaar was registered on 13th April 2009. It aims at strengthening the community and provides a common platform to all typologies of sex workers to address their common issues and needs such as health, human rights, crisis intervention, legal literacy, literacy and support to their children etc for a sustainable impact. Aastha Parivaar, borne out of the Aastha project, contributes closely to the Aastha project. The Aastha Parivaar is supported by a Secretariat that performs administrative functions.

8:00 –10:00pm                      Group Dinner

**Thursday, August 4, 2011**

9: 00-10:00am                      Yoga

10:00am-12:00pm                      Free Time

2:00pm                                Meet in hotel lobby and depart for Dhavari

3:00pm – 6:00pm                      Vinod Shetty from ACORN India, Waste management in Dhavari

About ACORN: <http://www.dharaviproject.org/intro.html>

The Dharavi Project in Mumbai is an initiative of the ACORN Foundation (India), and is a registered charitable trust. The Dharavi Project is a multimedia project that utilizes artists and social-impact

programs to change the living conditions of over 100,000, 'rag-pickers' who are segregating waste in and around the landfills of Mumbai. Its mission is to increase the welfare of rag-pickers, and give their profession a legitimate and sustainable voice in the recycling and waste-management value chain at Dharavi.

The 8000 tons of waste generated daily by the city cannot be entirely picked up by the municipal corporation, and the gap is filled by Mumbai's rag-pickers who pick up the tons of garbage littering the streets. For this work they are not paid by the city and the city does not recognize them as a workforce. These thousands of children women and youth earn a living by selling the dry waste to scrap dealers, and most of the rag-pickers make barely 75-100 rupees a day.

The Dharavi Project has been working with the community of rag-pickers in the slums of Dharavi, and hopes to give them the credit they deserve as green collar workers who are cleaning our vibrant but messy city. The hard labour of Mumbai's rag-pickers has ensured a place for Dharavi as one of the largest recycling hubs in Asia.

For a start, all members of the Dharavi Project are being given identity cards. They have formed their own committee which is involved in waste awareness programmes. In one programme, young ragpickers are partnering with schools in waste management. Currently there are some 350 members of the Dharavi Project.

The foundation has also undertaken another initiative - to organise health clinics, programmes and workshops from which young children engaged in ragpicking can get some kind of informal education in music, photography and other arts. A number of artistes have participated in such programmes, among them singers Shankar Mahadevan, Sunita Rao and Apache Indian and Katrina Kaif. "Nearly 40 per cent of those in the waste business are children and women," says Shetty. "We do not want to support child labour but realise that this sector needs alternatives. We hope such cultural events will help them think differently."

Vinod Shetty is the Director of the ACORN Foundation India, and he is an advocate practicing at the Mumbai High Court. He has been working on communal harmony, environmental protection and human rights for a number of years. And he has also been the delegation leader for the Indo-Pakistan Seeds of Peace program.

8:00pm

Group Dinner and Class Session

### **Friday, August 5, 2011**

Impact India Foundation: Rural Health Programs

#### **Impact has conducted a wide range of mass health projects**

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- » Polio-Free Madras
- » Bombay Against Disability
- » Polio-Free Bhavnagar
- » The Guinea Worm Eradication, Maharashtra
- » Cure on Wheels - Mobile Clinic
- » Malaria control, Mumbai
- » Flood Relief - 2005, Mumbai
- **Present**
- » Lifeline Express
- » Community Health Initiative

7.30 am	Depart Mumbai via Western Express Highway / National Highway No. 8 for Dahanu on the Mumbai – Ahmedabad Road.
9.30 am	Arrive Silver Miles Hotel, Mastan naka, Palghar, for breakfast.
10.00 am	Depart for Bapugaon Dahanu via Charoti naka and Kasa
11.00 am	Arrive Bapugaon Ashramshala (Village Residential School for tribals) to witness IIF initiated medical interventions: 1. Conduct of Body Mass Index Surveys 2. Haemoglobin estimation in Adolescent girls for Anaemia prevention 3. Counselling on intake of De-worming and Iron & Folic Acid tablets 4. Health Talk by Government's Auxiliary Nurse Midwife on the importance of Immunisation for pregnant mothers and infants against childhood diseases.
11.45 am	Depart for visit to Government's Primary Health Centre, Saiwan View facilities. Meet Government Doctor to obtain information on common diseases, the health-seeking practices of tribals and IIF's role in generating health awareness and taking treatment.
12.30 pm	Visit to Kalamdevi Ashramshala. Kitchen Gardens and Green houses to grow vegetables to counter anaemia.
1.15 pm	Visit Jamshet village. See Impact India's Lifeline Express Mobile clinic conduct vision testing in the community.
2.00 pm	Visit Warli Artist and see paintings. En route stop by a village well, take a bullock cart ride, observe transplantation of rice saplings.
3.00 pm	Halt at a roadside hotel for lunch, reflections and observations before departing for Mumbai (3 hours)

Arrive at Hotel/On Your Own

**Saturday, August 6, 2011/Sunday August 7, 2011**

Saturday

Will provide you with places to visit and eat (see attachment)

Sunday

Sightseeing-Tour of Elephanta Caves

Students on their own after

**Monday, August 8, 2011**

9:00-10:00am Yoga

10:00-2:00pm Breakfast/Free Time/*On your Own*

2:00- 3:00pm Group Lunch & Classroom Session

4:00 – 6:00pm UnLtd India is a seed fund and incubator for social entrepreneurs.

4th Floor, Candelar Building, 26 St. John Baptist Road, Near Mount Mary Steps, Bandra (W), Mumbai 400 050, India. Tel: +91 22 3216 3287. <http://www.unltdindia.org/>

**Contact:**

Pooja Warier

Unlimited India

Work with early-stage social entrepreneurs to help them:

- Accelerate their progress
- Develop as leaders
- Prepare their high-impact organisations for scaling and further investment

Four key programmes:

- Incubation support - seed funding and support
- Bootcamp - an intensive accelerator
- Bombay Hub - a laboratory and co-working space for social change
- Social Mashup - a national conference for early-stage social social entrepreneurs

We're different because we engage before almost all other investors and support organisations, and because we offer entrepreneurs a complete ecosystem of seed funding, incubation support and co-working space with which to launch their ventures.

6:00-8:00pm Visit Acumen Fund. Their mission is to create a world beyond poverty by investing in social enterprises, emerging leaders, and breakthrough ideas.

<http://www.acumenfund.org/about-us/about-us.html>

**Address:**

Acumen Fund India (in the IFMR Trust Building)  
Flat No. B-12, Jer Mansion, 2nd Floor  
V.P. Warde Marg, off Turner Road  
Bandra (West), Mumbai 400 050

Acumen Fund

**Mission** is to create a world beyond poverty by investing in social enterprises, emerging leaders, and breakthrough ideas.

**Vision** is that one day every human being will have access to the critical goods and services they need – including affordable health, water, housing, energy, agricultural inputs and services – so that they can make decisions and choices for themselves and unleash their full human potential. This is where dignity starts – not just for the poor but for everyone on earth.

8:00pm-midnight                      Group Dinner/Night-time Activity

Back to hotel                              *Dinner on your own*

**Tuesday, August 9, 2011**

9:00-10:00am                              Yoga

10:00-11:00am                              Breakfast

Depart for Delhi from Mumbai

Check into hotel: Hotel Southgate

3:00-7:00pm                      *Lunch (on your own), Sightseeing & Shopping*  
8:30pm                                Group Dinner with Nandita Chopra, NIH Representative to India

**Wednesday, August 10, 2011**

9:00am                                Breakfast

10:00-1:00PM                      Population Services International  
Sanjeev Dham (Dana Ward)

[sanjeev@psi.org.in](mailto:sanjeev@psi.org.in)

DD-12, Kalkaji, New Delhi-110019 INDIA (South Delhi)

Meet at Office and Visit Project Sites (45 minutes of travel). Programs focused on HIV, family planning and safe abortion

**Population Services International**

With more than 1 billion people, India accounts for nearly 20% of the world's population. Providing adequate health care in such a populous country poses a two-fold challenge:

- Overcoming barriers to access.
- Changing widespread negative attitudes that have led to discrimination against those infected with communicable diseases, such HIV/AIDS.
  - Noncommunicable diseases such as heart disease, diabetes and cancer are also on the rise in India. However communicable diseases, such as AIDS and malaria, kill more people each year.

In 1988, PSI began a small operation in India that has expanded into 22 states and union territories.

Current programs focus on:

- HIV/AIDS and other sexually transmitted infections.
- Reproductive health.
- Malaria prevention.
- Child survival.

3:00PM                                Group Lunch  
3:30pm-7:30pm                      Sightseeing and Shopping

*Students on their own for Dinner*

**Thursday, August 11, 2011**

9:00am                                Breakfast

9:30am                                Meet at hotel lobby

Meet with Dr. Misra from Salaam Balak Trust, learn about their work and participate in a service project

<http://www.salaambaalaktrust.com/>

Address: 2<sup>nd</sup> Floor DDA Community Center

Gali Chandiwali Paharganj

New Delhi 110055, phone is 91-11-23584164

Coordinator – Communications, City Walk and Volunteer Program

[volunteer@salaambaalaktrust.org](mailto:volunteer@salaambaalaktrust.org)

Final Group Dinner

**Friday, August 12, 2011**

9:00 - Noon                              Breakfast/Class Session/Wrap-Up