

DOI: http://dx.doi.org/10.12957/reuerj.2021.61970

# Entrepreneurship in Nursing: contribution to the Health and Well-being Sustainable Development Goal

Empreendedorismo em enfermagem: contribuição ao objetivo de desenvolvimento sustentável Saúde e Bem-Estar Emprendimiento en Enfermería: contribución al objetivo de desarrollo sostenible Salud y Bienestar

Jouhanna do Carmo Menegaz<sup>1</sup>, Letícia de Lima Trindade<sup>1</sup>; José Luís Guedes dos Santos<sup>11</sup>

<sup>1</sup>Universidade do Estado de Santa Catarina, Chapecó, Santa Catarina, Brazil; <sup>II</sup>Universidade Federal de Santa Catarina, Florianópolis, Santa Catarina, Brazil

### ABSTRACT

**Objective:** to reflect on the relationship between Nursing entrepreneurship and the Health and Wellness Sustainable Development Goal (SDG). **Content:** the concept and typologies of entrepreneurship (social entrepreneurship, business entrepreneurship and intrapreneurship) were stated and exemplified by Nursing activities, as were the objectives of SDG 3, Health and Wellness, focusing centrally on thinking about the potential for entrepreneurial action within each typology. **Conclusion:** entrepreneurial action has potential, including at the interface with the objectives of SDGs 8 and 4. However, circumscribed as it is by the challenges facing the Brazilian health system, entrepreneurship needs promotion and education. **Descriptors:** Education, Nursing; Job Market; Entrepreneurship; Nurse's Role.

#### RESUMO

**Objetivo:** refletir sobre a relação entre o empreendedorismo de Enfermagem e as metas do Objetivo de Desenvolvimento Sustentável (ODS) no Saúde e Bem-Estar. **Conteúdo:** apresentam-se conceito e tipologias de empreendedorismo empreendedorismo social, empreendedorismo empresarial e intraempreendedorismo – com exemplificação de atividades da Enfermagem, bem como as metas do objetivo 3, Saúde e Bem-Estar, com foco central em refletir acerca das potenciais contribuições da atuação empreendedora no âmbito de cada tipologia. **Conclusão:** a atuação empreendedora tem potencial, inclusive em interface com as metas dos objetivos de desenvolvimento sustentável 8 e 4. Porém, uma vez circunscrita no contexto dos desafios do sistema de saúde brasileiro, necessita de fomento e educação.

Descritores: Educação em Enfermagem; Mercado de Trabalho; Empreendedorismo; Papel do Profissional de Enfermagem.

### RESUMEN

**Objetivo**: reflexionar sobre la relación entre el emprendimiento en Enfermería y los retos del Objetivo de Desarrollo Sostenible (ODS) en Salud y Bienestar. **Contenido**: se presentan concepto y tipologías de emprendimiento - emprendimiento social, emprendimiento empresarial e intraemprendimiento - con ejemplos de actividades de Enfermería, así como los retos del objetivo 3, Salud y Bienestar, cuyo enfoque central es reflexionar sobre las potenciales contribuciones de la acción emprendedora en el ámbito de cada tipología. **Conclusión:** la acción emprendedora tiene potencial, incluso en la interfaz con los retos de los objetivos de desarrollo sostenible 8 y 4. Sin embargo, una vez circunscrita en el contexto de los desafíos del sistema de salud brasileño, necesita incentivo y educación.

Descriptores: Educación en Enfermería; Mercado de Trabajo; Emprendimiento; Rol de la Enfermera.

### **INTRODUCTION**

In its Constitution, Brazil emphasizes health as a right and duty of the State and, to such end, it implemented a system with universal access as its principle. As a Member State of the United Nations, it assumed the commitment of attaining Universal Health Coverage (UHC) by 2030, as part of the Sustainable Development Goals (SDGs). In 2015, these goals were ratified in 193 countries, launching a global agenda consisting in 17 Objectives and 169 goals<sup>1</sup>, among which SDG 3, Health and Well-Being, stands out for its relationship with the Nursing work.

The increasing and diversified health needs of the population, time and the cost to access certain services are some of the main access obstacles which also exert an impact on the labor market in different countries<sup>2</sup> and markedly in Brazil<sup>3-4</sup>, resulting in the emergence of a parallel market, in addition to the health plan operators and the medical category, a market that has sought to meet the State's suppressed demands, but whose relationship is not based on the principles of the Unified Health System (*Sistema Único de Saúde*, SUS).

However, given the controversies of the universal coverage concept, particularly in the American continent, where discussions exist about adopting a universal health strategy as a conciliating element of different paradigms<sup>5</sup>, the challenge of promoting population access to services and actions still remains, from health promotion to prevention, treatment, rehabilitation and palliative care. In addition, in a pandemic scenario, with the need for post-pandemic preparation and projections of economic crisis and budgetary restrictions<sup>3</sup>, this challenge will tend to increase.

Corresponding author: Jouhanna do Carmo Menegaz. E-mail: jouhanna.menegaz@udesc.br Scientific Editor: Cristiane Helena Gallasch



Theoretical Reflection Article Artigo de Reflexão Teórica Artículo de Reflexión Teórica

DOI: http://dx.doi.org/10.12957/reuerj.2021.61970

In this sense, attaining UHC in Brazil by 2030 must go through investment in the Nursing workforce, not only restricted to those who work in more traditional assistance institutions or positions, such as basic health units and hospitals<sup>6</sup>, or only as employees, but in those with entrepreneurship performance, with potential and opportunities to explore new social spaces.

The World Health Organization (WHO) and the Pan American Health Organization (PAHO) have urged the countries to invest in Nursing professionals to advance towards UHC, an investment that has sometimes been understood only in the public sphere context, which is limited to a health system like the Brazilian, which gradually admits limitations<sup>7</sup>, with the need to expand access coverage standing out at the national and state levels, given epidemiological data indicating that the population's health needs are not been fully met and that, even on account of them, allows participation of private initiatives in a complementary manner.

Such being the case, the professional category can work in different front lines, having the potential for entrepreneurship, in the case of nurses, also as liberal professionals in clinics and medical offices, which can expand the care network in the medium- and long-term This said, the proposal is to reflect on the relationship between Nursing entrepreneurship and the Health and Well-being Sustainable Development goals.

## CONTENT

## **Nursing Entrepreneurship**

The literature offers many definitions of "entrepreneurship" focusing on different aspects, according to the knowledge area. However, in general, it can be asserted that there are two main conceptions. One of them, older, signals the understanding that entrepreneurship is about the professional career, occupation, autonomous performance and owning a business, generating value, products and services resulting from economic activities; and the other, more recent, which understands entrepreneurship as a behavior characterized by the identification or creation of opportunities<sup>8</sup>.

Similarly, a review about the concept and typologies in Nursing identified predominance of behavioral understanding in production, as well as three typologies: social entrepreneurship, business entrepreneurship and intraentrepreneurship, in this order of relevance<sup>9</sup>.

Social entrepreneurship is characterized by concern with the development and transformation of society, related to ideas referring to sustainability, emancipation and provision of services to people, groups or communities in a situation of vulnerability, with the SUS being recognized as a fertile space for the diffusion of practices. In Nursing, this is characterized in the conduction of Nursing consultations, visits and counseling, for example; in addition to community activities, such as free Nursing clinical examinations<sup>10</sup>.

In turn, business entrepreneurship is characterized by the nurses' autonomous performance, either as liberal professionals or as business owners. Nurses identify opportunities in the health system and offer products and services in the scope of their ethical, legal and technical competence, which are understood as powerful reform modalities in the system itself. In this direction, there is emergence of actions and services at the primary and secondary care levels in an integrated and planned manner, in order to offer Nursing services in clinics and medical offices targeted at human health in its vital cycle.

Finally, intra-entrepreneurship, also called corporative entrepreneurship, is characterized by the development of enterprising actions in public or private organizations in which the Nursing personnel consists of employees/hired individuals with their very performance setting being their action object<sup>9</sup>. In this aspect, entrepreneurs undertake actions in already existing organizations and seek solutions for everyday issues. The presence of nurses in integrated clinics and their performance in multiprofessional teams that offer home care are some of the examples of the intra-entrepreneurship possibility.

Whether entrepreneurship is understood through the economic or behavioral aspect or understanding that the category has tropism for social, business or intra-entrepreneurship, the fact must be admitted that the Nursing workforce, especially nurses, has long ago had a prerogative to entrepreneurship either as employees, liberal professionals or owners of their own businesses.

### Contributions of Nursing entrepreneurship for SDG 3

SDG 3 is focused on Health and Well-being, which intends to ensure access to good quality health services and to promote universal well-being in all age groups, with nine goals. In the set of goals, themes are synthesized that have a direct interface with the Nursing work, particularly in the assistance and educational fields in the scope of primary actions, with the following among them: reduction of maternal-child mortality and due to accidents; or towards eradicating and fighting against different epidemic and communicable diseases; mental health and well-being

DOI: http://dx.doi.org/10.12957/reuerj.2021.61970



Theoretical Reflection Article Artigo de Reflexão Teórica Artículo de Reflexión Teórica

promotion; prevention and treatment of licit and illicit drug abuse; exposure to dangerous chemical products and to air and soil water contamination and pollution; as well as universal access to sexual and reproductive health services and universal coverage regarding essential services, from the perspective of protection against financial risk<sup>1</sup>.

SDG 3 also includes goals related to research, vaccine and medication development and access, and training and retention of health personnel in developing countries, which is also related to SDG 4, referring to work, and to SDG 8, referring to education<sup>1</sup>.

The idea that global health sustains the SDG proposal was nonexistent two decades ago<sup>11</sup>. This new paradigm requires that Nursing, especially nurses, has a mindset that negotiates concern with the planet and transcends the territory, but that, at the same time, leads us to concrete actions where they are. To such end, it is relevant to characterize the Nursing labor market so that it can be related to SDG 3 and the potential and latent spaces for entrepreneurship in the context of the typology presented.

A study<sup>12</sup> analyzes the inclusion of Nursing in the public, private and philanthropic sectors, concluding that the category is still quite institutionalized and that the public sector is its largest employer. In each sector, the professionals are employed in institutions that characterize it for the most part. In the public sector, there is predominance of jobs in institutions that offer assistance in the basic specialties, such as health clinics and centers; in the private sector, in clinics, polyclinics and outpatient services; and, in the philanthropic sector, in hospitals.

In the scope of each typology, Nursing entrepreneurship performance becomes fundamental, especially for having peculiar characteristics, all relevant to global-local health since, regarding health needs, they are targeted at different population strata, especially contributing to the expansion of access in each of these institutions, as well as creating opportunities for performance in new spaces and offering services within its technical and legal competence.

In social entrepreneurship performance, all Nursing professionals are potential actors, distinguishing themselves more due to the entrepreneurship performance feature, targeted at the articulation between the social realm and health, thus contributing to healthy living. This entrepreneurship performance takes into account the person's context, which transcends the traditional care spaces and processes<sup>13</sup>, thus contributing to the expansion of access to health for people or groups with difficulties reaching the health services and in a situation of social vulnerability or even invisibility. Such being the case, conduction of health promotion and prevention actions in Nursing's ethical-legal competence scope, such as Nursing consultation outside care institutions, grounded on Nursing theories.

In addition to paying attention to expanding access for groups, in the direction of the SDG 3 goals, expansion of the services must be sought, as the current offer seems incipient for the amplitude of this objective. Thus, there is business entrepreneurship performance, in which the actors are nurses who work as liberal professionals or businesspeople in clinics, medical offices and companies on the possibility of expanding access to health services by offering care and service alternatives to the population segment that has resources with protection against financial risk and which are subjected to the health market speculation.

Various factors fostering business entrepreneurship are identified, namely: population aging, generations willing to pay for health, and outsourcing and inclusion of complementary services not covered by the public services or by health plans; as well as the social trends related to lifestyles, convenience and preventive health<sup>14</sup>.

In the context of the SUS, also considering the 2020-2023 National Health Plan (*Plano Nacional de Saúde*, PNS)<sup>7</sup>, which presents a situation analysis of Brazilian health, there is the clear challenge faced by the existing services and the need for new initiatives to expand and qualify access to health-related goods and services, with a number of interfaces in the improvement of health conditions, as well as promotion of equality and quality of life among Brazilians.

Regarding targeting of the challenges faced by the health services, entrepreneurship and innovation with strategies that reduce queues or waiting times, cut down costs and qualify and humanize the assistance provided, as well as educate the population so that they contribute to consolidating the system, the Nursing personnel in intraorganizational entrepreneurship performance can contribute to the effective implementation of the doctrinaire principles of the SUS and of SDG 3.

When considering the above, it can be noticed that the idea of sustainability through Nursing entrepreneurship not only has potential to meet the population's basic health needs but also to go beyond, producing immaterial and material wealth, this latter being quite relevant in a productive restructuring post-pandemic scenario<sup>15</sup>. However, for this to possible, both professionals and students need entrepreneurship education, with theoretical training and practical experiences of the different types of entrepreneurship.



DOI: http://dx.doi.org/10.12957/reuerj.2021.61970

The entrepreneurship approach throughout initial and continuing training can contribute to strengthening behavioral characteristics that are necessary for entrepreneurship performance, such as search for information, systematic planning and monitoring, persuasion and contact networks<sup>16</sup>.

## CONCLUSION

In its different modalities and contexts, Nursing entrepreneurship has the potential to favor attainment of SDG 3, emerging as a possibility to qualify and expand professional performance in the labor market and the scope of health actions, as well as for searching innovations in care. As a contribution for Nursing, this reflection can expand the category's understanding about the meaning of entrepreneurship, assisting in demystifying the idea that it is only associated with opening a business and/or that is hardly related to the Unified Health System.

As the totality of the seventeen goals are interlinked, entrepreneurship not only promotes SDG 3 but is also a path to solve problems of the profession's past, such as professional appreciation and recognition through hygiene and motivational factors, and of possibilities in relation to a sustainable future for services and people alike, particularly the new generation of professionals.

Thus, it is pertinent to invest in actions related to SDG 8, which intends to promote sustained and inclusive economic growth, encouragement to full and productive employment, and decent work for everyone, either females or males. This said, acknowledgment of the Nursing work with fair workdays and remunerations needs to be addressed and welcomed by society. Investments in SDG 4, related to the promotion of learning opportunities throughout life, are also required; in this case, with emphasis on entrepreneurship education in its technical and, especially, behavioral aspects.

It is recommended to conduct studies that identify the relationships between the Nursing entrepreneurship typologies and SDGs 3, 4 and 8, assessing their impact on Universal Health Coverage, as the limitation of this reflection is that is restricted to SDG 3.

## REFERENCES

- 1. Organização das Nações Unidas Brasil (ONU BRASIL). Transformando nosso mundo: a agenda 2020 para o Desenvolvimento Sustentável [site de Internet]. [cited 2020 set 18] 2015. Available from:
- https://nacoesunidas.org/wpcontent/uploads/2015/10/agenda2030-pt-br.pdf.
- 2. International Labour Organization. ILO Monitor: Covid-19 and the world of work. Second Edition. Updated estimates and analysis. Genebra (CH):2021.
- 3. Costa S da S. The pandemic and the labor market in Brazil. Rev Adm Pública [Internet]. 2020 [cited 2020 Jul 26]; 54(4): 969-78. DOI: http://dx.doi.org/10.1590/0034-761220200170x.
- Mattei L, Heinen VL. Impacto da crise da Covid-19 no mercado de trabalho brasileiro. Brazil. J. Polit. Econ. [Internet]. 2020; [cited 2020 Jul 26]; 40(4):647-68. Available from: https://doi.org/10.1590/0101-31572020-3200.
- 5. Giovanella L, et al. Universal health system and universal health coverage: assumptions and strategies. Ciênc. saúde colet. [Internet]. 2018 [cited 2020 Aug 20]; 23(6):1763-76. DOI: https://doi.org/10.1590/1413-81232018236.05562018.
- FIOCRUZ/COFEN. Relatório final da Pesquisa Perfil da Enfermagem no Brasil. Rio de Janeiro (RJ): FIOCRUZ/COFEN; 2017.
  Ministério da Saúde (Br). Secretaria-Executiva. Subsecretaria de Planejamento e Orçamento. Plano Nacional de Saúde PNS 2020-2023. Brasília (DF): Ministério da Saúde; 2020.
- 8. Wennekers Sanders. Entrepreneurshio at Country Level: economic and non-economic determinants. Roterdamm (NL): Erasmus Research Institute; 2006.
- 9. Coppelli FHS, Erdmann AL, Santos JLG. Entrepreneurship in Nursing: literature review. Rev Bras Enferm. [Internet]. 2019 [cited 2021 Jan 19]; 72(1):301-10. Available from: https://doi.org/10.1590/0034-7167-2017-0523.
- Kirkman A, Wilkinson J, Scahill S. Thinking about health care differently: nurse practitioners in primary health care as social entrepreneurs. Journal of Primary HealthCare [Internet]. 2018 [cited 2020 Jul 26]; 10 (4): 331-7. Available from: https://doi.org/10.1071/HC18053.
- Salvage J, White J. Our future is global: nursing leadership and global health. Rev. Latino-Am. [Internet]. 2020; [cited 2020 Jul 26]; 28:e3339. Available from: https://doi.org/10.1590/1518-8345.4542.3339.
- 12. Machado MH, Oliveira ES, Lemos WR, Lacerda WF, Justino E. Labor market in nursing in the SUS: an approach from the research Nursing Profile in Brazil. Divulg. saúde debate. [Internet]. 2016 [cited 2021 Out 22]; 56:52-69. Available from: http://fi-admin.bvsalud.org/document/view/6c2z5.
- Backes DS, Ilha S, Weissheimer AS, Halberstadt BMK, Megier ER, Machado R. Socially entrepreneurial activities in nursing: contributions to health/healthy living. Esc Anna Nery [Internet]. 2016 [cited 2020 Apri 14]; 20(1):77-82. Available from: https://www.scielo.br/j/ean/a/PGn4jFbcjskjd7pbVNpLpBb/?format=pdf&lang=pt.
- 14. Colichi RMB, Lima SGS e, Bonini ABB, Lima SAM. Empreendedorismo de negócios e Enfermagem: revisão integrativa. Rev. Bras. Enferm. [Internet]. 2019 [cited 2020 Aug 20]; 72 (1):335-45. Available from: https://doi.org/10.1590/0034-7167-2018-0498.



Theoretical Reflection Article Artigo de Reflexão Teórica Artículo de Reflexión Teórica

DOI: http://dx.doi.org/10.12957/reuerj.2021.61970

- 15. Instituto Brasileiro de Geografia e Estatística (IBGE). O IBGE apoiando o combate à COVID-19 [Internet]. Desocupação, renda, afastamentos, trabalho remoto e outros efeitos da pandemia no trabalho. [cited 2020 set 18] 2020. Available from: https://covid19.ibge.gov.br/pnad-covid/trabalho.php.
- 16. Chagas SC, Milagres PN, Silva MCR, Cavalcante RB, Oliveira PP de, Santos RC dos. Business entrepreneurship among nurses. Rev. enferm. UERJ [Internet]. 2018 [cited 2020 Aug 20]; 26:e31469. Available from: https://doi.org/10.12957/reuerj.2018.31469.