

Socially entrepreneurial activities in nursing: Contributions to health/healthy living

Atividades socialmente empreendedoras na enfermagem: Contribuições à saúde/viver saudável
Actividades socialmente emprendedoras en enfermería: Contribuciones a la salud/la vida saludable

Dirce Stein Backes¹

Silomar Ilha¹

Amanda Schineider Weissheimer²

Bruna Marta Kleinert Halberstadt²

Elisa Rucks Megier²

Raquel Machado²

1. Universidade Federal do Rio Grande.

Rio Grande - RS, Brazil.

2. Centro Universitário Franciscano.

Santa Maria - RS, Brazil.

ABSTRACT

Objective: To know the contributions of socially entrepreneurial activities in Nursing to women participating in an Association of Recyclable Materials. **Methods:** An exploratory and descriptive study with a qualitative approach was conducted between July and December 2014, including 12 women participating in an Association of Recyclable Materials, in Rio Grande do Sul state, Southern Brazil. Data were collected before and after the activities, through semi-structured interviews and participant observations, and submitted to content analysis. **Results:** The following categories were identified: From invisibility to the need of health and healthy living - a dynamic and complex process of daily overcoming; From the lack of encouragement to health and healthy living - the desire to feel cared of; Contributions of activities to the promotion of healthy living - the meaning of 'feeling like a person'. **Conclusion:** The activities developed through social entrepreneurship with women enhanced their self-esteem and health/healthy living in the context analyzed.

Keywords: User Participation; Health Education; Nursing Research; Nursing.

RESUMO

Objetivo: Conhecer as contribuições de atividades socialmente empreendedoras da enfermagem à saúde de mulheres de uma Associação de Materiais Recicláveis. **Métodos:** Pesquisa exploratória, descritiva, de abordagem qualitativa, realizada entre julho e dezembro/2014 com 12 mulheres de uma Associação de Materiais Recicláveis, do Rio Grande do Sul. Os dados coletados antes e após as atividades, por meio de entrevista semiestruturada e observação participante, foram submetidos à análise de conteúdo. **Resultados:** Identificaram-se as categorias: da invisibilidade à necessidade de estímulo à saúde e viver saudável - processo dinâmico e complexo de superações diárias; da ausência de estímulo à saúde e viver saudável - o desejo de sentir-se cuidada; contribuições das atividades no estímulo do viver saudável - o significado de "sentir-se gente". **Conclusão:** as atividades desenvolvidas por meio do empreendedorismo social com as mulheres mostraram-se potencializadoras de autoestima, saúde/viver saudável na realidade investigada.

Palavras-chave: Participação Comunitária; Educação em Saúde; Pesquisa em Enfermagem; Enfermagem.

RESUMEN

Objetivos: Conocer las contribuciones de las actividades socialmente emprendedoras de enfermería a la salud de mujeres de una Asociación de Materiales Reciclables en Rio Grande do Sul. **Métodos:** Investigación exploratoria, descriptiva, cualitativa, realizada entre julio y diciembre de 2014 con 12 mujeres. Los datos recolectados antes y después de las actividades a través de entrevistas semi-estructuradas y observación participante fueron sometidos al análisis de contenido. **Resultados:** Se identificaron las categorías: De la invisibilidad a la necesidad de estímulo a la salud y la vida saludable - proceso dinámico y complejo de superaciones diarias; De la ausencia del estímulo a la salud y la vida sana - el deseo de sentirse cuidada; Contribuciones de las actividades en la estimulación de la vida sana - el significado de "sentir gente". **Conclusión:** Las actividades desarrolladas a través del emprendimiento social con las mujeres demostraron potenciar la autoestima, la salud/vida saludable en la realidad investigada.

Palabras clave: Participación Comunitaria; Educación en Salud; Investigación en Enfermería; Enfermería.

Corresponding author:

Silomar Ilha.

E-mail: silo_sm@hotmail.com

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INTRODUCTION

The work of collecting recyclable materials is one the several professions pursued by women, characterized by the collection, selection, transport and sale of paper, cardboard, glass, plastic and other such materials^{1,2}. Although the work as collector of recyclable materials was regulated in 2002, prejudice and stigmatization against those who perform such activity can still be found in society, thus revealing prejudice against this type of work³. Consequently, the work performed by collectors is frequently harmful to health, as there are social aggravating factors and the lack of regulation of labor laws, in addition to the physical risks to which they are exposed⁴.

The work of these collectors, as a result, is frequently associated with low self-esteem, inadequate support systems and socioeconomic difficulties, among other aspects². In this sense, individuals who work with this must be cared for and supported according to their physical, mental and social needs³. To implement this multi-dimensional care, health professionals and mainly nurses, who are the ones who usually spend more time with individuals, families and communities and who take up health care leadership and management, should follow intervention methods that promote health and healthy living within the context of choices of individuals performing this activity.

Seen in this perspective, healthy living can be understood as a unique multi-dimensional process that cannot be grasped or defined as something objective, static or an end in itself. As a complex phenomenon, it requires the recognition of the environmental conditions in which human beings are included and where they experiment their living concretely⁵.

It should be emphasized that, in different areas of knowledge, coping with social and health problems was frequently associated with the traditional health care logic⁶. This way to intervene in reality does not usually take into consideration the context and different ways to maintain and live with/without health. This model, regulated by paternalistic and inflexible principles, has been losing strength to new intervention approaches, which favor interactive and participatory processes that promote healthy living.

Social entrepreneurship stands out among the new approaches to intervention, which, based on the systemic understanding of social reality, is capable of mobilizing resources and abilities aiming at creative and innovative solutions that are committed to the population's social and health issues⁷. Based on these new approaches to intervention, social entrepreneurship in nursing can be characterized by the attitude towards promoting health and healthy living for individuals, families and communities through interactive and associative processes aimed at their emancipation as the key participants in their own life story⁸.

In this sense, the work of nurses cannot be reduced to the development of specific scientific-technical abilities. In addition to these abilities, professionals must aim at the development of interactive and integrating potentials in several social and health contexts⁹, such as communities, associations and other scenarios.

Based on what has been described here, promoting health and/or healthy living through socially entrepreneurial activities requires the inclusion of nurses into different social and health contexts, in addition to renewed intervention methods. They should know, in practice, the experiences of order and disorder of individuals and communities, in this case, those of women from the Association of Recyclable Materials more specifically. Next, based on such experiences, they should establish an open dialogue including different types of knowledge, in the sense of gathering and developing types that are coherent for each reality.

The approach of nurses with a focus on socially entrepreneurial activities is more likely to emancipate the different social participants required by society to function in a responsible and participatory way. This approach, founded on dialogical processes between the technical-scientific knowledge and popular wisdom, gradually enables new perspectives and forms of community dialogue, allowing participatory and emancipatory approaches to promote the popular health education process^{10,11}.

To develop and strengthen this process, the Brazilian Ministry of Health created the *Política Nacional de Educação Popular em Saúde* (PNEPS - National Policy on Popular Health Education) in the sphere of the *Sistema Único de Saúde* (SUS - Unified Health System), known as PNEPSSUS. At its core, this policy reaffirms the commitment to universality, equality, comprehensiveness and effective popular participation in the SUS, as it proposes political-educational activities that transcend strict health care actions traditionally performed in this area. Ultimately, it confirms the dialogue between different types of knowledge and sectors, valuing popular wisdom, ancestry, promotion of individual and collective production and their inclusion in the SUS¹².

In this way, it is important to invest in activities that promote population health in different contexts by strengthening the PNEPSSUS, justifying the need and relevance of this study, which seeks to contribute to the health/healthy living of women, who are collectors of recyclable materials, through socially entrepreneurial actions in nursing. Moreover, this study is justified by the fact that no other studies with such aim and using the framework of social entrepreneurship in nursing were found, thus revealing its innovative approach and contribution to women's health and strengthening of nursing as science and profession.

Based on what has been described here, the following question arose: How do the socially entrepreneurial activities developed by nurses, using the framework of social entrepreneurship, contribute to the health and healthy living of women who are collectors of recyclable materials? Thus, with the purpose of supporting the PNEPSSUS, the present study aimed to identify the contributions of socially entrepreneurial activities in nursing to the health and healthy living of women from an Association of Recyclable Materials.

METHODS

An exploratory descriptive study with a qualitative approach was performed with women who are collectors of recyclable

materials from an Association of Recyclable Materials located in the central region of Rio Grande do Sul state, Southern Brazil. This association has existed since 2009 and it aims to provide work to a group of 15 women who support their families through recycling. The following were established as inclusion criteria for this study: to be a woman who works as a collector of recyclable materials and participates in the previously described association and to have performed this type of work for at least one month. In contrast, not to be working in the association on the day and time scheduled for data collection was the exclusion criterion. A total of 12 women met the inclusion criteria, thus comprising the study sample.

Data were collected before and after the socially entrepreneurial activities performed between July and December 2014 through participant observation and a semi-structured interview that included open questions. Participants were first asked about their perception of the meaning of health and healthy living personally and collectively; next, about the activities they aimed to be planned by undergraduate nursing students to contribute to their health and healthy living, as previously described.

Based on the information collected and discussed among participants, socially entrepreneurial activities were performed, such as the beauty day, the princess day, and meetings with friends. These activities were held in a systematized and process-oriented way, on previously scheduled days and times, aiming to have an effect on women's self-esteem and guarantee greater visibility and social recognition.

The beauty day was held in September and it was organized and conducted in six hours, based on different interactive and playful activities. While a group of students cut, painted and brushed women's hair with the help of professionals from this area, another group took care of facial beauty, manicure and pedicure, and yet a third group entertained them with music, dancing and other interactive and appealing activities. At the end of this process, participants were invited to join a joyful contest, when the most beautiful of them was selected, as were the two friendliest participants of the day.

The meeting with friends was held in October due to Children's Day, when women were accompanied by their underage children. This meeting lasted six hours and the entertainment included games, informal typical dances and foods and beverages for the women and children. In contrast, the princess day was offered to participants in December, aiming to celebrate Christmas and their achievements of the year. On this day, which was a surprise, there were special activities sponsored by several local companies.

While working with "garbage", these women were surprised by the arrival of a mini-bus that picked them up for a trip in their city. They were then taken to a beauty parlor while still wearing their uniform, where sponsors were waiting for these women, as they had already been informed. In addition to the general beauty treatment, haircut, hair brushing and/or painting, participants were also given a party outfit and matching shoes donated by a company as well. Next, they were invited to go on a tour in the

city center, where they celebrated Christmas. Finally, they went to one of the main malls in this city.

After the socially entrepreneurial activities, interviews were resumed, aiming to assess their applicability and contribution to the promotion of health and healthy living on the individual and group levels.

The data collected were organized and subsequently analyzed according to content analysis, which consists in discovering the cores of meaning that comprise communication, whose presence or frequency add meaningful perspectives to the object of study¹³. In the first stage, known as pre-analysis, there was a thorough reading of data, followed by the organization of material and formulation of hypotheses. Next, this material was explored, i.e. crude data were codified. In the third and last stage, data were interpreted and divided into thematic categories to understand the meanings established¹³.

The present study followed the ethical and legal principles for human research, in accordance with Resolution 466/2012 of the Brazilian Health Council¹⁴. To guarantee their anonymity, participants were identified with the letter "W" (Woman) followed by a number, corresponding to the order of interviews (M1, M2... M12). This project was approved by the Research Ethics Committee under number 493/2013.

RESULTS

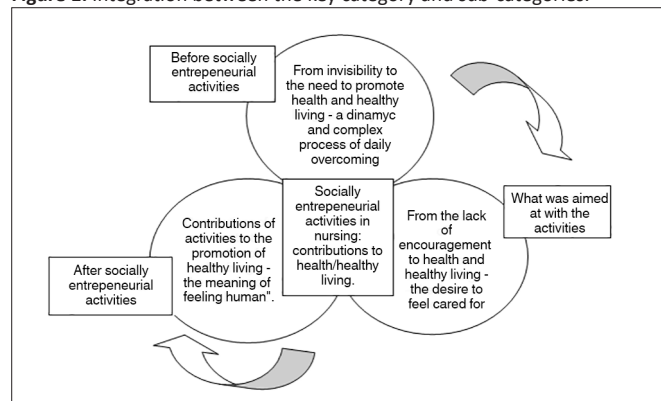
All the 12 women from the Association who participated in this study were aged between 22 and 56 years and married and they had from two to eight children. They had been working in this area for one to six years. Based on a daily 8-hour work shift, organized autonomously, each woman could earn approximately R\$ 300.00 per month (US\$ 76.90), which is frequently insufficient to pay for the family needs and expenses.

The method adopted enabled theoretical constructs to be generated, leading to the key category: Socially entrepreneurial activities in nursing: contributions to health/healthy living; in addition to three sub-categories: From invisibility to the need to promote health and healthy living - a dynamic and complex process of daily overcoming; From the lack of encouragement to health and healthy living - the desire to feel cared for; Contributions of activities to the promotion of healthy living - the meaning of "feeling like a person". Figure 1 shows a scheme of the process of integration between the key category and the sub-categories.

From invisibility to the need to promote health and healthy living - a dynamic and complex process of daily overcoming

When asked about the meaning of health, before the proposed entrepreneurial interventions were conducted, women reported that both their individual and collective health was poor for a number of reasons, which were observed and understood throughout the process. Even before describing their concept of health, they mentioned they had been feeling disappointed and

Figure 1. Integration between the key category and sub-categories.



unmotivated to continue their daily work. They reported that their work was not being recognized and that they could not see the least interest from public institutions to support them to continue this process. In the speech of one participant in particular, this disappointment was very clear:

Nobody is interested in us. Nobody looks at us. We're tired of earning R\$ 300.00 per month from garbage, we need to pay for water and electricity. We can barely get by. My back is ruined and full of pain [...] I can barely walk, but I need to push myself, I know some colleagues who are in worse shape. I often feel like giving up this job, but then I think about my colleagues and work, which is very important for society. Imagine where all this garbage would be! It'd be on the streets and downtown, causing floods and other damage! (W3)

What to say about health? Our work is very heavy and undervalued. We often feel hopeless, but soon we remember that we have a family to support. This job should be better recognized and valued by the authorities and the community as well [...] (W8)

Women acknowledged that their role as recyclers is important for city cleanliness and environmental sustainability. Moreover, this reason encouraged them to overcome the back pain, public institutions' lack of belief and interest, and society's lack of recognition of their work in general.

From the lack of encouragement to health and healthy living - the desire to feel cared for

When asked about the activities that they aimed to receive from nursing students in the sense of contributing to health promotion and healthy living, women in this study emphasized the following:

We would like a day to care for ourselves. We work with garbage but we're not garbage. We want to feel cared for, to be neat and to look pretty so we can arrive home

and say to our children, "I'm also a person! We would like a day for ourselves, a beauty day, a princess day. (W7)

We'd like a day for ourselves. We'd like to be cared for, because we have no time for ourselves. We work here, we work at home... So there's no time left for us. We only think about our family and how to support them, even though we know this type of work is not valued. (W10)

Based on participant observation and individual reports from women, it could be observed that health or the absence thereof was directly associated with lack of care, disbelief in their work and, mainly, invisibility and lack of social recognition. Daily involvement with work and housework restrict the time required for self-care, essential for health and healthy living.

Contributions of activities to the promotion of healthy living - the meaning of "feeling like a person"

When new interviews were conducted with the same questions previously made, although after the socially entrepreneurial interventions with women who collected materials and participated in an Association of Recyclable Materials were performed by nursing students, activities were found to encourage women to live healthily and improve their self-esteem:

Wow! It was such a different day! The best day of my life! (W1)

I've never felt so beautiful! I want them to take a shot of me so I can send it to my family in Recife. I want them to see how beautiful I am. (W4)

I feel like a person [...] I was lost, I was not myself [...] (W7)

I don't know what to say [...] I'm feeling so happy I'm touched! (W9)

You managed to change our day. I'll go home happier [...] I feel like I'm someone else. (W11)

Clearly touched by what they had experienced, the following reports were made:

I'm simply speechless [...] You managed to change me into someone else. I felt like a person [...] I know I can keep dreaming and achieving things. (W5)

I'm someone else, I feel happy inside and outside. I can't express how I'm feeling. (W6)

It was a very special day. I never imagined that someone could do this for me. (W10)

This day will be remembered. I don't know how to thank all those who helped me. (W12)

In addition to the meeting and celebration, this moment enabled significant family time and the possibility of offering

something different to children, as described by one of the mothers who participated in the group:

I'm very happy. You managed to do something different for the kids, for our children. We never had time or financial conditions to do this for them. You did this for them and mostly for us, mothers [...] (W2)

Based on participants' experiences and reports, healthy living means to feel like a human being and to be socially recognized as a professional. In other words, it means "to feel like a person" rather than "garbage", in the eyes of society. Health and healthy living, as observed and described, are not reduced to ready-made scientific formulas, but rather translate into one's dynamism and capacity to overcome daily challenges through personal, professional and social recognition and valuing.

DISCUSSION

In the logic of social entrepreneurship, health can/must be conceived as a dynamic, unique and self-organized system, interconnected to different social systems that aim to promote healthy living to individuals, families and communities, from a socio-eco-systemic perspective⁵.

The health of women participating in this study was found to be directly associated with disbelief in their work and, mainly, invisibility and lack of social recognition, as they felt disappointed and unmotivated to continue their daily routine before performing socially entrepreneurial activities in nursing. This finding is similar to that of a study conducted with women and men who collect recyclable materials in the city of Fortaleza-CE, Northeastern Brazil, where all those interviewed mentioned that their work was precarious, socially undervalued, stigmatized and without perspective².

Such social invisibility causes many individuals who collect recyclable materials to consider giving up this work, although they do not actually do this as they reflect on the importance of such work for society. Women recognized that their role is key for sustainability and that, without it, the garbage produced by society would probably be on the streets and in the city centers, causing floods and other damage. A study conducted by researchers from the city of São Paulo-SP, Southeastern Brazil, emphasizes these results as they described garbage collectors as environmental agents, referring to them as "(living) images representing nature conservancy"¹¹.

Another study conducted in the city of São Paulo, aiming to emphasize the work of garbage collectors as essential to guarantee the recycling of urban solid waste, stated that individuals working as such are regarded as invisible by the majority of society¹⁵. The activity developed by these individuals becomes stigmatized, among other factors, by the fact that their work involves disposable materials, i.e. something people want to rid themselves of¹⁶.

Among study participants, healthy living means to feel humanely cared for, respected and socially recognized as a professional. In a study conducted in a city in the countryside of Rio Grande do Sul state, Southern Brazil, some health users described healthy living as associated with interactive and associative possibilities. Others emphasized the importance of feeling at peace with oneself and society, the relevance of favorable conditions and living in harmony with one's family⁶, findings that are in agreement with those of the present study, which enabled significant family time and the possibility of offering something different to their children.

To achieve this, in addition to physical and biological aspects, it should be recognized that the process of healthy living also involves social and cultural aspects and those with a more subjective nature associated with the way that each individual, in their uniqueness, processes different movements/events of daily life⁵.

When the interviews were resumed after the socially entrepreneurial interventions, women reported that they felt touched, happy and beautiful, as they were encouraged to improve their self-esteem, thus showing how the activities contributed to their health promotion and healthy living. In this sense, the importance of developing health promotion activities through socially entrepreneurial activities in nursing could be observed. Nurses must be the mediators for the healthy living process, valuing the unique experiences of each individual, family or community.

In this context, professionals must intervene in the reality of individuals experiencing socially vulnerable situations in an entrepreneurial way⁶. In this respect, a study conducted with different health professionals found that nursing stands out among the other areas of knowledge due to its development of interactive and integrating health care activities, which have had increasing repercussion on both health promotion and education and the development of policies aimed at the social well-being of families and communities⁹.

Thus, professionals need to establish a connection between formal and informal health care, aiming to increase the possibilities of interaction by strengthening the resources of social participants themselves, especially by continuously negotiating health care strategic actions capable of increasing the network of interactions with different social sectors and participants. As a way to strengthen this process, social entrepreneurship appears as a new organizational trend capable of developing new health/care actions and technologies, in the sense of reaching a higher number of individuals with greater effectiveness/resolvability and lower cost¹⁷.

In brief, a new model of human, social and sustainable development is revealed, requiring health professionals to have an innovative and socially responsible attitude, guided by the actual needs of different social actors, more specifically vulnerable groups^{17,18}.

CONCLUSION

The present study was considered to be satisfactory, as it was possible to identify the contributions of socially entrepreneurial activities in nursing to health and healthy living, developed by women participating in an Association of Recyclable Materials. The recovery of self-esteem and the possibility of feeling like a "person" who is worthy and deserving of a life in society should be emphasized in this process.

Despite working with garbage, women did not feel or want to be considered as "social garbage". They understood that their role as collectors of recyclable materials goes much beyond a strict or helpful practice. They recognized that their way of being and acting significantly contributed to city cleanliness and, consequently, to inhabitants' healthy living and environmental sustainability.

There were some limitations to this study, such as the lack of studies on this theme using the framework of social entrepreneurship. Among the positive aspects, women's receptiveness and the participation of sponsoring companies. These factors contributed to the implementation of this research project, which includes characteristics that enable it to contribute to the (re) thinking of practices of nursing/health professionals, emphasizing the importance of the development of socially entrepreneurial activities.

Health and healthy living are not static and normative events. Instead, they represent dynamic, interactive and associative processes that go beyond the cause-effect aspects recommended by the traditional health/disease concept. In this perspective, socially entrepreneurial practices are proactive strategies, capable of enabling individuals to become the key participants in their own life story.

It is believed that the topic approached in the present study can have an impact on the opinion of health professionals and society, as it demonstrates the effective contribution to the recovery of self-esteem, thus improving health and healthy living. Findings from this study are expected to collaborate with the area of nursing/health in terms of greater care for individuals experiencing socially vulnerable conditions, based on benchmarks that value the potential of human beings.

This theme can be further explored, as new perspectives may arise, broadening perceptions and discussions. It is essential that new studies on the contribution of socially entrepreneurial activities in nursing/health should be conducted with individuals who are socially vulnerable in different contexts.

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