

CHALLENGES AND POTENTIALITIES OF BUSINESS ENTREPRENEURSHIP IN NURSING: ANALOGIES TO BRAZILIAN ENTREPRENEURIAL ACTIVITY

Jouhanna do Carmo Menegaz^{1,2} 
Alisson Fernandes Bolina³ 
Thayza Mirela Oliveira Amaral² 
Emily Silva Pontes² 
Letícia de Lima Trindade^{1,4} 

¹Universidade do Estado de Santa Catarina. Chapecó, Santa Catarina, Brasil.

²Universidade Federal do Pará, Programa de Pós-Graduação *Stricto Sensu* em Enfermagem. Belém, Pará, Brasil.

³Universidade de Brasília, Programa de Pós-Graduação *Stricto Sensu* em Enfermagem. Brasília, Distrito Federal, Brasil.

⁴Universidade Comunitária da Região de Chapecó, Programa de Pós-Graduação *Stricto Sensu* em Ciências da Saúde. Chapecó, Santa Catarina, Brasil.

ABSTRACT

Objective: to reflect on the potentialities and challenges of entrepreneurial activity in the early-stage stage of nurses, considering the analogies between the profile of Brazilian nursing and business entrepreneurs in the country.

Method: this is a theoretical reflection articulated around the concept of phases of entrepreneurial activity. From this starting point, common variables from the Nursing Profile survey and the Global Entrepreneurship Monitor Brazil Report were selected, such as sex, age group, education level, family income and occupation. Taking into account a parallel between variables, reflection on the challenges and potential of entrepreneurial nurses in the nascent and new entrepreneurial activity phases was ordered.

Results: it is possible that nascent and new entrepreneurial nurses are predominantly women, specialized with the possibility of income compatible with traditional jobs. Specialization, professional experience and professional legislation are strengths, while sex is a challenge.

Conclusion: there are both potentialities and challenges. For nascent and new entrepreneurs to emerge, entrepreneurial education, promotion of gender equality, work and income policies are particularly relevant.

DESCRIPTORS: Nursing. Entrepreneurship. Job description. Economics. Economics nursing.

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DESAFIOS E POTENCIALIDADES DO EMPREENDEDORISMO DE NEGÓCIOS NA ENFERMAGEM: ANALOGIAS À ATIVIDADE EMPREENDEDORA BRASILEIRA

RESUMO

Objetivo: refletir sobre potencialidades e desafios da atividade empreendedora em estágio inicial de enfermeiros face à analogias entre o perfil da enfermagem brasileira e de empreendedores de negócios no país.

Método: reflexão teórica articulada em torno do conceito de fases de atividade empreendedora. Deste ponto de partida foram selecionadas variáveis comuns da pesquisa Perfil da Enfermagem e do Relatório do *Global Entrepreneurship Monitor* Brasil, sendo sexo, faixa etária, nível de escolaridade, renda familiar e ocupação. Levando em conta um paralelo entre as variáveis, ordenou-se a reflexão sobre os desafios e potencialidade de enfermeiros empreendedores nas fases de atividade empreendedora nascente e nova.

Resultados: é possível que enfermeiros empreendedores nascentes e novos sejam predominantemente mulheres, especializadas, com possibilidade de renda compatível com postos tradicionais de trabalho. A especialização, a experiência profissional e a legislação profissional são potencialidades; enquanto que o sexo, um desafio.

Conclusão: há tanto potencialidades quanto desafios. Para que empreendedores nascentes e novos surjam são relevantes, sobretudo, a educação empreendedora, promoção da igualdade de gênero, políticas de trabalho e renda.

DESCRITORES: Enfermagem. Empreendedorismo. Perfil profissional. Economia. Economia da enfermagem.

DESAFÍOS Y POTENCIALIDADES DEL EMPRENDIMIENTO EMPRESARIAL EN ENFERMERÍA: ANALOGÍAS CON LA ACTIVIDAD EMPRESARIAL BRASILEÑA

RESUMEN

Objetivo: reflexionar sobre las potencialidades y desafíos de la actividad empresarial en la etapa inicial de los enfermeros frente a las analogías entre el perfil de la enfermería brasileña y los empresarios del país.

Método: reflexión teórica articulada en torno al concepto de fases de la actividad emprendedora. A partir de ese punto de partida, fueron seleccionadas variables comunes de la Encuesta Perfil de Enfermería y del Informe *Global Entrepreneurship Monitor* Brasil, entre las que se encuentran género, grupo etario, nivel educativo, renta familiar y ocupación. Teniendo en cuenta un paralelismo entre las variables, se ordenó la reflexión sobre los desafíos y potencialidades de los enfermeros emprendedores en las fases de actividad emprendedora naciente y nueva.

Resultados: es posible que las enfermeras nacies y nuevas emprendedoras sean predominantemente mujeres, especializadas, con posibilidad de ingresos compatibles con los trabajos tradicionales. La especialización, la experiencia profesional y la legislación profesional son potencialidades, mientras que el género es un desafío.

Conclusión: hay potencialidades y desafíos. Para el surgimiento de emprendedores emergentes y nuevos, la educación emprendedora, la promoción de la igualdad de género, las políticas de trabajo e ingresos son particularmente relevantes.

DESCRITORES: Enfermería. Emprendimiento. Perfil laboral. Economía. Economía de la enfermería.

INTRODUCTION

According to the Global Entrepreneurship Forum's (GEM) concept, a consortium that monitors and produces annual reports on business entrepreneurship in the world, entrepreneurship is any attempt to create a new business, whether an autonomous and individual activity, a new company or the expansion of an existing enterprise¹. Worldwide, there are substantial differences in entrepreneurial activities across countries, demonstrated in terms of the proportion of adults starting new businesses. While in the Dominican Republic, in 2021, more than two out of five people aged 18 to 64 were starting a new business, in Poland, there was a ratio of one in 50².

In Brazil, in that same year, the Total early-stage Entrepreneurial Activity (TEA) rate was 21.0%, which represented the highest rate among all participating economies in the world survey with populations above 50 million people. Regarding the established entrepreneurship rate, there was an increase, in 2021, to 10.0%, and this meant the second highest among countries with more than 50 million inhabitants. These data showed substantial numbers of Brazilians participating in entrepreneurial activities in the country, both in the early-stage and in the established stages, and in different areas².

In the health area, there were also advances in relation to business entrepreneurship, and among the professional categories, nurses stand out, whose entrepreneurial activities in nursing are distributed in different scenarios in the third sector: home care services; daily care; elder care; complex wound care; health training; consulting services; advisory services; organizational activities; teaching; and research. It is worth mentioning the entrepreneurial role of nurses in nursing care activities, with observation of performance in non-traditional roles, such as aesthetics, podiatry and alternative treatments, which reinforces the list of professional opportunities that this category can envision in the job market³.

Since the 1950s, nurses have been recognized as liberal professionals through a ministerial opinion⁴. According to the Federal Council of Nursing's (COFEN – *Conselho Federal de Enfermagem*) Opinion⁵, liberal professionals have a university or technical degree, independence and free professional practice, responding, as the case may be, to civilly, for errors and technical failures that they may commit. Thus, nurses are liberal professionals enrolled in the National Confederation of Liberal Professions, and have the free exercise assured by the Federal Constitution and by Law 7,498 of June 25, 1986.

Despite the support and the fact that the category has expanded its activities in several areas, and specialized, with 80.1% of nurses having a graduate degree⁶, demanding the recognition of numerous specialties, studies have indicated the need for actions that expand the liberal exercise of the profession through business entrepreneurship, that may benefit the population's access to health and achieve the Sustainable Development Goals⁷⁻⁸.

Data from the Nursing Profile (*Pesquisa da Enfermagem*) survey showed that only 1.9% of all nurses undertake a business, 1.3% as self-employed, 0.3% in private practice and 0.3% in a nursing care company⁶. However, it is empirically observed, through social media, a growth trend in early-stage entrepreneurship in nursing, through home care and consultations, which may represent a change in recent years, possibly motivated by the standardization of action through COFEN Resolutions such as n° 516/2018, n° 581/2018 and n° 568/2018.

Based on the premise that business entrepreneurship is growing in the coming years, it is worth reflecting on the issue. However, we lack data on the profile of entrepreneurs, businesses and the entrepreneurial activity of nurses. Thus, this article sought to reflect on the potentialities and challenges of entrepreneurial activity in the early-stage stage of nurses, considering the analogies between the profile of Brazilian nursing and business entrepreneurs in the country.

To build the reflection, the concept of entrepreneurial activity was taken as a basis, investigated within the conceptual model of GEM by phases, type and impact. In the reflection on the screen, the idea of phases was used, which are four: nascent; new; established; and discontinuity.

Nascent activity is one whose entrepreneur is involved in the creation or is the owner of a business that has not yet yielded any type of remuneration for more than three months. New activity refers to one whose entrepreneur is the owner and manager of a business that has already remunerated its owners in some way for a period longer than three months and less than 42 months; and when the remuneration exceeds this period, the activity is defined as established. Finally, discontinuity is the phase of closing entrepreneurial activity after opening the business¹.

Based on these phases, three rates are calculated: Entrepreneurial Employee Activity (EEA), TEA, Established Business Ownership (EBO). EEA is considered as the ratio between the adult population (18 to 64 years old) of a country and the individuals who are involved in an entrepreneurial activity. Within this last group, TEA is calculated, which considers nascent and new entrepreneurs, and EBO, which considers the percentage of established¹.

Considering the idea that to understand entrepreneurship it is necessary to know the entrepreneur, and given the lack of specific data on business entrepreneurship in nursing, in order to be able to reflect on potentialities and challenges in the phases of entrepreneurial activity, a broad study was sought that would bring data that would allow some element of comparison to the data presented in the GEM Brazil Report. Thus, the Nursing Profile research was chosen and, within this research, sex, age group, education level, family income and occupation, which are also variables of interest to the GEM.

The data in the report¹ were obtained through a survey of the Brazilian adult population, together with a sample of 2,000 people between 18 and 64 years old, from April to July 2019.

In this research, sex was categorized as male and female; age range was sorted into five ranges within the adult population; education level was categorized into incomplete elementary school, complete elementary school, complete high school and complete higher education or higher; income range was ordered into five ranges, considering the number of minimum wages from one to more than six; parallel occupation was categorized as none other, employed, unemployed, retired, disabled, student and housewife¹.

In the Nursing Profile survey in Brazil⁶, the applied questionnaire was sent by mail to the address informed by the professionals themselves to the council of their state. The questionnaire was divided into seven chunks: socioeconomic identification; professional training (nurses); professional training (nursing assistants and technicians); access to technical-scientific information; job market; job satisfaction; and relationship and socio-political participation. The total number of research participants was 35,914, with 16,145 nurses and 19,771 nursing assistants and technicians.

The selected variables were organized in charts side by side so that analogies could be observed, according to lexical, quality, state definition, or analogue condition, similarity of properties between things and facts⁸, to reflect on entrepreneurial nurses' challenges and perspectives in the early-stage and established stages. The summary of the chosen variables is presented in the following section for later, around the concept of entrepreneurial activity, reflecting on the challenges and potentialities of nursing entrepreneurial role in the national scenario.

Business entrepreneurship in Brazil and the profile of nurses: parallel

With regard to EEA, TEA and EBO, in 2019, EEA was 38.7%, with 8.1% nascent, 15.8% new and 16.2% established.

As for the profile of entrepreneurs, as shown in Chart 1, there was a similarity in the percentage of early-stage entrepreneurs in both sexes. However, among established men, it was evident that men were more active in entrepreneurship at this stage (EBO: 18.4%), compared to female entrepreneurs (EBO: 13.9%) (Chart 1). In other words, almost three million more men than women developed entrepreneurial activities at an established stage (GEM, 2020).

With regard to age group, it was found that most nurses were between 26 and 40 years old (59,5%), while, among early-stage and established entrepreneurs, the highest percentage was from 35 to 44 years old (26.7%) and 45 to 54 years old (23.8%), respectively. It is noteworthy that 24.3% of early-stage entrepreneurs were young adults (18 to 24 years) (Chart 1).

These age group data can be elucidated by analyzing the education level variable. It was identified that many early-stage and established entrepreneurs had incomplete elementary school (18.4% and 23.2%, respectively) and complete (23.3% and 20.2% %, respectively). It is worth mentioning that the bachelor's degree in nursing is at a higher level, and most nurses had a graduate degree (80.1%), with a predominance in the specialization modality (Chart 1).

It was observed that early-stage entrepreneurs reported earnings in the range of one to three minimum wages, which was compatible with the income of most nurses (71.2%), with 35.1% from R\$1,001 (US\$200.00) to R\$3,000 (US\$600.00) and 36.1% from R\$3,001 (US\$600.00) to R\$5,000 (US\$1,000.00) (Chart 1).

Finally, it is possible to verify that the majority of early-stage entrepreneurs had another occupation (52.1%), while established ones, no other (63.9%). With regard to Brazilian nurses, although 90.3% were in an active professional situation, it was identified that 12.4% were unemployed and 9.3% worked in other activities outside the nursing area (Chart 1).

Chart 1 – Portrait of Brazilian entrepreneurs and nurses. Chapecó, SC, Brazil, 2022.

	Entrepreneurs¹	Nurses²
Sex	Total early-stage Entrepreneurial Activity: Women: 50% Men: 50%	Women: 86.2% Men: 13.4% Did not answer: 0.4%
	Established Business Ownership: Women: 43.5% Men: 56.5%	
Age group	Total early-stage Entrepreneurial Activity: 18 – 24 years: 24.3% 25 – 34 years: 26.1% 35 – 44 years: 26.7% 45 – 54 years: 22.6% 55 – 64 years: 12.4%	Up to 25 years: 7.1% 26 – 40 years: 59.5% 41 – 55 years: 26.8% Above 56: 6.1% Did not answer: 0.5%
	Established Business Ownership: 18 – 24 years: 7.2% 25 – 34 years: 12.7% 35 – 44 years: 18.2% 45 – 54 years: 23.8% 55 – 64 years: 20.5%	

Chart 1 – Cont.

	Entrepreneurs ¹	Nurses ²
Education level	Total early-stage Entrepreneurial Activity: Incomplete elementary school: 18.4% Complete elementary school: 23.3% Complete high school: 24.4% Complete higher education or higher: 27.6%	Nurses with graduate degree: 80.1% Residency: 7.5% Specialization: 72.8% Academic master's degree: 10.9% Professional master's degree: 3.6% Doctoral degree: 4.7% Postdoctoral degree: 0.4%
	Established Business Ownership: Incomplete elementary school: 23.2% Complete elementary school: 20.2% Complete high school: 12% Complete higher education or higher: 12.1%	
Individual monthly income*†	Total early-stage Entrepreneurial Activity: Up to 1 minimum wage: 23.4% More than 1 to 2: 20.6% More than 2 to 3: 22% More than 3 to 6: 27.1% More than 6: 31.8%	Public sector: Up to 1 minimum wage: 0.6% More than 1 to 2: 14.9% More than 3 to 5: 36.5% More than 6: 35.3% Did not answer: 12.8%
	Established Business Ownership: Up to 1 minimum wage: 13.5% More than 1 to 2: 13.4% More than 2 to 3: 17.2% More than 3 to 6: 18% More than 6: 24.6%	Private sector: Up to 1 minimum wage: 1.2% More than 1 to 2: 24.1% More than 3 to 5: 36.1% More than 6: 19.7% Did not answer: 19%
Other occupation	Total early-stage Entrepreneurial Activity: Employed: 20.7% Retired: 1.4% Unemployed (and looking for a job): 15.5% Full-time housewife: 9.5% Student: 5% No other occupation: 47.9%	Professional situation: Active: 90.3% Unemployed in the last 12 months: 12.4% Difficulty finding a job: 78.9%‡ Other activities outside the nursing area: 9.3%
	Established Business Ownership: Employed: 6.2% Retired: 2.3% Unemployed (and looking for a job): 8.8% Full-time housewife: 13.1% Student: 5.7% No other occupation: 63.9%	

Source: ¹Global Entrepreneurship Monitor. Empreendedorismo no Brasil: Relatório Executivo 2020 [Internet]. Curitiba, PR(BR): GEM; 2020 [cited 2022 Oct 12]. 30 p. Available from: <https://ibqp.org.br/PDF%20GEM/Relatório%20Executivo%20Empreendedorismo%20no%20Brasil%202019.pdf>

²Conselho Federal de Enfermagem (BR). Relatório Final da Pesquisa – Perfil da Enfermagem no Brasil [Internet]. Rio de Janeiro, RJ(BR): Fundação Oswaldo Cruz; Conselho Federal de Enfermagem; 2017 [cited 2022 Oct 12]. 750 p. Available from: <http://www.cofen.gov.br/perfilenfermagem/pdfs/relatoriofinal.pdf>

*The minimum wage value used in the Global Entrepreneurship Forum survey in 2020 was established by the federal government at R\$998.00.

†The value of the minimum wage used in the Nursing Profile in Brazil survey was established by the federal government at R\$680.00.

‡ Among the unemployed.

DISCUSSION

Possible potentialities and challenges of business entrepreneurship for nurses

Since the GEM conceptualizes entrepreneurial activity as a result of the association of social aspects and individual skills of entrepreneurs, culminating in the generation of products and income,

sex, age, individual monthly income and education are aspects to be considered when reflecting on early-stage entrepreneurship in nursing¹.

Based on the parallel between the nursing profile research data and the GEM data, considering sex, it seems more likely that entrepreneurial activity in the early-stage nursing stage will be predominantly female, unlike the national scenario, where there is a similar distribution between both sexes. Considering the age group, it is possible that entrepreneurial activity occurs a little later among nurses, since in the 18 to 24 age group many will still be in graduation.

Regarding education, when observing the tendency towards specialization, there is a contrast with the profile of GEM data, in which higher education does not represent the education of most entrepreneurs¹. With regard to income, when establishing a parallel, it is observed that undertaking can present an early-stage income perspective similar to working in traditional nursing posts in health institutions.

Given the parallel, considering the national scenario in which most early-stage entrepreneurs have completed high school, a potentiality of entrepreneurial activity, both to start undertaking and to maintain, is the fact that nurses have completed higher education. Schooling is closely linked to the innovation of products and services and the generation of higher income⁹, a fact that contributes to the stabilization and maintenance of a business in the market, which can be a potential for the business of entrepreneurs at any stage.

In recent years, there has been an increase in nursing specialization, including investment by COFEN through agreements to offer vacancies in professional master's degrees, whose growth and incentives show a concern to improve care, management, education and research in the various dimensions of doing the profession, with evidence of greater compliance of programs with the work reality¹⁰, despite the multiple challenges of the labor market¹¹.

Although more specialized, for schooling to be an asset to entrepreneurial nurses, they need to become competent in evidence-based practice, to be able to resolve problems based on the applicability of clinical processes with scientific validation and centered on patients¹², in their entrepreneurial professional activity in all nursing specialty areas as well as being able to transfer knowledge that is constantly being updated to their practice, which concerns the capacity for interaction, sharing and ethics in knowledge for the creation of services and products aimed at promoting health¹³.

Sex, on the other hand, is a potential challenge in the Brazilian labor market and, in a female profession, a challenge to entrepreneurial activity at an early-stage, a fact that draws the attention of the United Nations, which highlights, among the Sustainable Development Goals, female empowerment as a strategy to guarantee gender equality¹, and also favor the enrichment of the country through economic movement. Entrepreneurs perceive a lack of recognition of their skills and different treatment for being women¹⁴. When they are mothers, there is a demand for conciliation between private life and work, generating a mental burden that is not common to males¹⁵.

According to data from the SEBRAE Feminine Entrepreneurship survey, women gave up to 40.0% more to pursue their businesses than men. They were mostly heads of households and, when they started their own business, most were paid less for the same job. They acted more like individuals, not formalizing their business. When they formalized them, they were smaller businesses, in which they paid more interest and had less access to credit lines¹⁶. Thus, the scenario of challenges to female entrepreneurship can be discouraging to the establishment of entrepreneurial activity in nursing, requiring actions of encouragement and support.

Considering the financial aspect, when observing the average income of Brazilian early-stage entrepreneurs, this is similar to nurses' income in different legal natures. As the nursing business niche is different from the national average in which early-stage entrepreneurs undertake food and beverage services, retail trade of clothing and accessories, hairdressers and other beauty treatment activities, and making garments,¹ it is difficult to point out in this reflection income and occupation as potentialities or challenges to early-stage entrepreneurship in nursing.

As seen above, early-stage entrepreneurs with education up to high school have income equivalent to that of specialized nurses. Therefore, depending on the motivation, being an entrepreneur may not seem like a potentiality, since nurses' employability, in most regions of Brazil, is high⁶ and women tend to undertake more out of necessity than men¹⁷.

In this way, for a profession to undertake does not represent a significant financial increase, and if jobs are found relatively easily, one may prefer them to undertake. This can lead to at least two scenarios: low business entrepreneurship in nursing or late entry, when professionals feel sufficiently stabilized and motivation is not a need but a purpose, such as "making a difference", a choice that has increasingly appeared in GEM reports¹. Studies indicate in a review that nurses change from corporate to liberal practice to, for instance, improve their working conditions¹⁸.

Still on the financial aspect, it is worth highlighting the issue of formalization, important in the context of early-stage entrepreneurship, especially for self-employed professionals, who can act as individuals. Although this is a valid strategy to start, for stabilization, business formalization proves to be more beneficial from a tax and financial point of view^{1,16}.

All of this challenges constant improvement in order to contribute to advanced practice nursing, capable of contributing to the emerging and re-emerging problems of the contexts in which it operates, at the same time that it becomes necessary and competitive in the market. There is the facet of knowledge challenge, as entrepreneurial nurses in the early-stage stage must have knowledge about business management that are not fostered in their training¹⁹. The lack of this knowledge can be an important challenge, which inhibits the choice to undertake and, also, if not met, can lead to the discontinuation of the business.

Such challenges, although complex, could be overcome in a joint effort by the category, as they give visibility to the need for encouragement, training and support, since the awakening to nursing entrepreneurship stems from both encouraging identifying needs to be explored in the context of health services and the support it receives²⁰.

With regard to occupation, it is possible that entrepreneurial nursing in the early-stage stage will follow the trends observed among Brazilian entrepreneurs who develop this activity in parallel with another occupation, which may represent both a challenge for the consolidation and success of the nursing business, as the hours dedicated to the business will decrease, and a potential that will allow developing business entrepreneurship in the presence of financial security.

CONCLUSION

By establishing a parallel between the Nursing Profile survey and the Global Entrepreneurship Monitor Brazil report variables, potentialities and challenges are highlighted for nascent and new entrepreneurial activities in Brazilian nursing. Since entrepreneurship has been encouraged globally and the GEM is a global consortium, similar reflection can be conducted in several countries, enabling dialogues and professional strengthening appropriate to the context of each country.

As prominent elements in the Brazilian case, the identified potentialities are also means of overcoming the challenges, highlighting the degree of specialization and the standardization observed in recent years, which gives more and more support and security to professionals. Generally, nursing as a profession presents differentials to business entrepreneurship that can favor entrepreneurial activity in the early-stage stage and lead it to the consolidation stage.

The confluence of attributes, science and technique present in nurses' training will lead to the opening of businesses managed by higher education professionals with generalist training, present throughout individuals' life cycle, supported by a scope of care, management and health teaching skills, with holistic care training based on theories, oriented to understanding the health needs of individuals, families and communities, whose health services can be provided at home, clinics, nursing offices.

Despite the technical, scientific and legislative support that support nursing to undertake, there are barriers that need to be overcome by professionals and by the category for the growth and consolidation of entrepreneurial activity in nursing, such as changing mindsets and lack of knowledge.

It is suggested constructing strategic bridges between class and state bodies that encourage implementing policies to make nursing workload more flexible, new resolutions aligned with entrepreneurial practice, guidelines that encourage entrepreneurial education in undergraduate courses, the development of complementary refresher courses to improve business management and use of technologies as well as financial advice. All these contributions, combined with scientific research, will allow nurses to engage in business entrepreneurship and strengthen nursing entrepreneurial activity in Brazil and worldwide.

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NOTES

CONTRIBUTION OF AUTHORITY

Study design: Menegaz JC.

Data collection: Menegaz JC, Amaral TMO.

Data analysis and interpretation: Menegaz JC, Bolina AF, Amaral TMO, Pontes ES, Trindade LL.

Discussion of results: Menegaz JC, Pontes ES.

Writing and/or critical review of content: Menegaz JC, Bolina AF, Trindade LL.

Review and final approval of the final version: Menegaz JC, Bolina AF, Amaral TMO, Pontes ES, Trindade LL.

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CORRESPONDING AUTHOR

Jouhanna do Carmo Menegaz

jouhanna.menegaz@udesc.br

