

# Content Analysis of Entrepreneurship and Employment Development Policies in Iran's Health Sector: Is It a Health Wealth Promoter?

## Abstract

**Context:** Growing needs mandates economic growth. Entrepreneurship policies play a significant role in achieving productive employment and sustainable development for the health and wealth of society. **Aims:** This study is conducted to find the accordance of this document with the basic theory of the global alphabet model of entrepreneurship on the one hand and a comparison to the real entrepreneurial and economic achievements as social determinants of health (SDOH) on the other hand. **Methods and Material:** This research is a quantitative and qualitative content analysis of entrepreneurship documents in the health sector of Iran, using the basic theory of the global alphabet model as our target. We reviewed the World Bank and Global Entrepreneurship Monitor (GEM) reports as world indicators to compare whether our entrepreneurship policies have been successful. **Statistical Analysis:** MAXQDA is a software program designed for computer-assisted qualitative and mixed methods data, text and multimedia analysis in academic, scientific, and business institutions. **Results:** The findings showed that the retelling of the word employment is more dominant than entrepreneurship. Imbalanced attention is paid to the components of the standard global alphabet model, and a downhill regression is seen in almost all aspects of entrepreneurial results. **Conclusions:** The written health policies have not been effective in promoting the development of health by wealth.

**Keywords:** *Entrepreneurship, Iran's health sector, policies*

## Introduction

Rapid changes in populations, innovative advances in technology, financial problems, and unemployment on the one hand and hard competition of all nations for development on the other hand have faced policymakers with a new and big challenge to find “the best method for development.” Since the entrepreneurship ecosystem (EE) and policies<sup>[1]</sup> are the engine of economic development<sup>[2]</sup> and play a fundamental solution for this challenge in developed societies, they have received more attention in developing countries as an engine of economic development.<sup>[3,4]</sup> Entrepreneurship policymaking is an emerging area for economic growth.<sup>[5]</sup> Attention to the role of entrepreneurship in economic growth has been started through international organizations such as the Organization for Economic Development and Cooperation and the Global Entrepreneurship Monitor (GEM) for more than twenty years.<sup>[6]</sup> However, as an independent field, it has made limited progress in Iran. Most of the policies that

have been set in this regard are focused on small- and medium-sized businesses, while policies for the development of large-scale entrepreneurship have been neglected. We need scientific research studies, necessary changes in entrepreneurial micro- and macro-policies, and a balanced ecosystem to bridge the distance between theory and practice.<sup>[7-12]</sup> Considering the importance of the health sector in maintaining and developing human health, social capital, and economic growth, the importance of entrepreneurship development policies in this sector has doubled. It will impact the organizational and institutional levels of the health sector, all aspects of preventive medicine, and even social and political stability. It should boost the development of all aspects of EE to develop technology, economic growth, and social welfare of the country.<sup>[5,9,13]</sup> Social determinants of health (SDOH) are nonmedical factors that influence health outcomes, including how people are born, grow, work, live, and age and the wider set of forces and systems shaping the conditions of daily life. These forces and systems include

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economic policies and systems, development agendas, social norms, social policies, racism, climate change, and political systems,<sup>[14]</sup> enhancing all people's well-being and raising disparities.<sup>[15]</sup> Small- and medium-sized enterprises that enter regional markets with an entrepreneurial marketing approach can also improve the quality of health.<sup>[13]</sup> Furthermore, the elimination process of health inequities occurs through well-designed economic and social policies.<sup>[14]</sup>

According to the World Bank report (2022), the difficulty of starting a business in Iran has increased over the past years. In terms of "ease of starting a business," Iran ranks 127<sup>th</sup> among about 147 countries, which has a downward trend compared with previous years.<sup>[6]</sup>

The purpose of entrepreneurship policies is to promote and support the interests of entrepreneurs.<sup>[16,17]</sup> Since entrepreneurship policies require long-term planning and the support of various social, political, legal, and financial sectors, there are many challenges in the three stages of drafting, implementing, and evaluating the policies.<sup>[16,18,19]</sup>

According to the recent report of GEM, Iran's entrepreneurship indicators<sup>[20]</sup> are not in a good position and have been declining in recent years.<sup>[21-23]</sup> In the latest report (2022), the entrepreneurship indicators of Iran placed Iran in 32<sup>nd</sup> place among 47 countries in the region in terms of the index of total early-stage entrepreneurial activity (TEA) with a rate of 8.8%, which has declined six ranks compared with 2019 (with a rate of 10.7%). In fact, Iran ranks at 24<sup>th</sup> place in the entrepreneurial intention ranking index.<sup>[3,24]</sup>

It is necessary for entrepreneurship policymakers in the country to have a realistic, documented, systematic, and holistic approach to entrepreneurship development considering all aspects and dimensions of sustainable entrepreneurship such as economy, culture, society, education, and regulations related to entrepreneurship at the same time.<sup>[25]</sup>

In the field of entrepreneurship policy, several studies have been conducted at the international level, including the study of Hoffman (2007),<sup>[5]</sup> Scott and Jensen (2008), Thorik (2009), UNCTAD (2012),<sup>[5]</sup> and Page and his colleagues (2017)<sup>[26]</sup> with a focus on entrepreneurship promotion, education, barriers to entry and exit, support for business start-up, seed capital, and target group.

According to the GEM model, entrepreneurial attitudes lead to entrepreneurial behaviors and behaviors lead to entrepreneurial results. It is obvious that the development of entrepreneurship as a macro-strategy in society requires increasing or improving entrepreneurial attitudes and behaviors at all levels including individuals, teams, organizations, and industry, especially at the national level.<sup>[26]</sup>

Although the government plays a major role in creating economic, political, legal, financial, and social structures to

promote productive entrepreneurial activities and ultimately sustainable economic development, entrepreneurial finance and new venture success reflect the moderating role of government support.<sup>[27]</sup>

The policymakers' attention to entrepreneurship in Iran is short-lived. Obviously, the tools and policies of entrepreneurship development are not matured and limited as the opportunity deserves.<sup>[28,29]</sup>

## Subjects and Methods

Our aim was to review the documented entrepreneurship policies in the health sector of Iran to find out whether our policies are set scientifically and have any role in this declining position in most indicators of international reports.

This study is applied research in terms of purpose and a descriptive study in terms of the research type. We have conducted comprehensive quantitative and qualitative content analysis through a comparative analysis manner of the documents using the basic theory of "Alphabet Model of Global Entrepreneurship."

The only documentation on this subject in the health sector is "Entrepreneurship Development and Employment in Iran's Health Sector" written in 2016.

The global alphabet model of entrepreneurship considers "creating and strengthening entrepreneurial perceptions and attitudes," "increasing entrepreneurial activities (behavior)," and "improving entrepreneurial results (aspirations)."

Content analysis is the process of converting qualities into quantities and then converting this quantity into quality. Quantitative content analysis deals more with the obvious content, while qualitative content analysis deals with the hidden content of documents.<sup>[30]</sup>

The standard steps of the content analysis study process are based on the Gall and Borg process.<sup>[30,31]</sup> After the quantitative and qualitative analysis of the document, we conducted a literature review and a thematic literature study to match and show the fitness between these findings and other experiences in this regard.

It should be noted that the analyzed document is the only recognized document in Iran's health sector on the subject of entrepreneurship policy.

In this research, the global monitor model of entrepreneurship has been used as a process-oriented, purposeful, and practical model for evaluating the development of entrepreneurship in the world. After formulating the research questions and the categorization plan to ensure the validity of the analysis, the categorization plan was approved by five subject experts, and then, the data reduction stage was performed to remove the same texts and discard the duplicates.

The validity of the study was verified through a survey of experts with an open questionnaire regarding the appropriateness of the structure and the fitness of the dimensions and components. The reliability of the study was verified through repeated coding and Scott’s reliability coefficient (0.2).

The research analysis unit includes sentences and words related to the indicators of the entrepreneurial alphabet model. Counting units was performed, and the frequency of related main and subcategories was obtained. The unit of registration was the phrase, and the unit of the text was the sentence. Also, the registration units such as “entrepreneurship,” “employment,” “innovation,” and “technology” were counted separately.

The reduction in duplicate data was also performed. We reviewed the World Bank and GEM reports (2022) to find the trend of economic changes and entrepreneurship development indicators to compare and correlate with the documented policies.

**Data analysis**

Content analysis is conducted by MAX QDA 2020.

**Results**

The document “Entrepreneurship Development and Employment in Iran’s Health Sector,” which was prepared by the Ministry of Health, was compiled in May 2016, and after the approval of the country’s resistance economy command headquarters, it was notified to employment units of medical sciences universities all over the country for implementation.

Quantitative analysis of the content showed that the repetition of the word employment with a frequency of 199 times compared with the word entrepreneurship with a repetition of 141 times was dominant; the repetition of the words of technology and innovation was twice each.

The role of “providing health services” and unemployment is the main focus of this document with minimal attention to “technology,” “innovation,” profit, and health.

The research findings show the results related to each of the main components of the entrepreneurship development model, separated by their component indicators, as shown in Figure 1.

As shown, the most attention is paid to entrepreneurial behaviors (49% of the policies), followed by entrepreneurial results (31%) and entrepreneurial attitudes (20%).

Analysis of subcategories according to the alphabet model of global entrepreneurship is shown in detail in the following tables.

As shown in Table 1 and Figure 2, most attention is paid to the subcategory of opportunity perception as the offer of job opportunities and only one policy has been formulated for risk-taking and tolerance of fear of failure in health entrepreneurship.

As shown in Table 2 and Figure 3, policymakers have paid special attention to the category of improving entrepreneurial behaviors. Among the subcomponents, the most attention is paid, respectively, to networking in the concept of strengthening private and public sector participation, intellectual property laws, and issuing licenses, and after that, they focus on team building and improving individual capabilities. However, no policy has

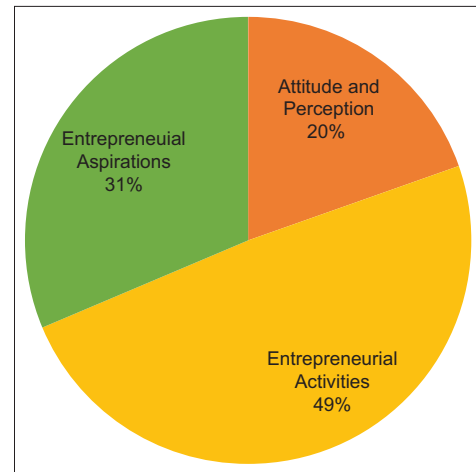


Figure 1: Contribution of each of the main components according to the alphabet model of entrepreneurship in Iran's health sector policies

**Table 1: Frequency of policies set in the main category -Perception and entrepreneurial attitude- In the entrepreneurship development document of Iran’s health sector (in the order of the highest frequency)**

Row	Subcategory (evaluation index)	Frequency in subcategory	Frequency percentage in subcategory	Frequency Percentage in total
1	Opportunity Perception	9	45%	8.5%
2	Perceived entrepreneurship Capabilities	4	20%	4%
3	Entrepreneurial intention	3	15%	3%
4	Social status of entrepreneurs	2	10%	2%
5	Belief in social bonds and entrepreneurial culture	1	5%	1%
6	Fear of failure or risk-taking and risk acceptance	1	5%	1%
Total		20	100%	19.5%

been developed in the field of taking advantage of the opportunity.

Findings in the category of entrepreneurial results (aspirations) are shown in Table 3 and Figure 4. In this main category, most attention of the document is given to product and service innovation, but the focus is on health services and does not address technological manufacturing goods and wealth, followed by internationalization, capital risk, and job creation. However, no policy has been developed in the field of reputation and branding.

At a glance, as shown in Figure 5, policy makers in Iran's health sector pays the most attention to the networking. But in the field of branding and opportunistic development.

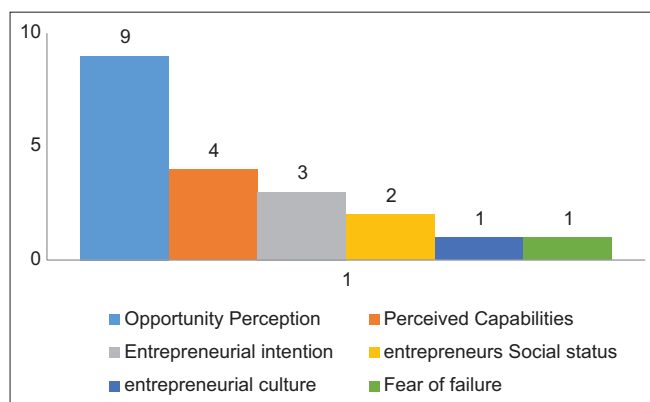


Figure 2: Frequency of regulatory policies in the field of perception and entrepreneurial attitudes

They did not set policy and also. In the attitude of the entrepreneurial culture of the health sector, no policy has been formulated. In the field of fear of failure, risk-taking, entrepreneurial culture, and social status of entrepreneurs, there are very few regulatory policies.

Finally, entrepreneurship ecosystem (EE) has other components including financing, supportive infrastructures, markets, culture, and leadership policies, which are not truly perceived by policymakers. Thus, the macro-policies have not supported the EE. Health policies are inappropriate, imbalanced, and inefficient. Unfortunately, the documented strategies and methods of approval and notification do not fulfill the goals of entrepreneurship development, which are to promote a higher level of health and wealth in a real ecosystem. Fortunately, some changes are being seen in the Ministry of Health, which might lead to new attention to this vital and critical subject.

### Discussion

The policymaker's concept of entrepreneurship development is mainly to create employment in services. Minimal attention is paid to health service quality, health technology, production of goods in the health sector, health tourism, and finally improving social wealth as a SDOH.

This study showed an insufficient concept of health sector's policymakers toward entrepreneurship theories and goals as seen in the results. The trend of entrepreneurial development should go through creating an appropriate

**Table 2: Frequency of policies set in the main category -Entrepreneurial activities (behavior)- In the entrepreneurship development document of Iran's health sector (in the order of the highest frequency)**

Row	Subcategory (evaluation index)	Frequency in subcategory	Frequency percentage in subcategory	Frequency percentage in total
1	Networking	23	46%	22%
2	Team building to start a business	9	18%	9%
3	Improving individual capabilities	8	16%	8%
4	Entrepreneurial leadership	7	14%	7%
5	Absorption and development of new technology	3	6%	3%
6	Taking advantage of the opportunity	0	0	0
Total		50	100%	49%

**Table 3: Frequency of policies set in the main Category-Entrepreneurial Results (Aspirations) in the entrepreneurship development document of Iran's health sector (in the order of the highest frequency)**

Row	Subcategory (evaluation index)	Frequency in subcategory	Frequency percentage in subcategory	Frequency Percentage in total
1	Product and service innovation	11	34%	10.5%
2	Internationalization of business	7	22%	7%
3	Capital risk	7	22%	7%
4	Business growth and job creation	6	19%	6%
5	Process innovation	1	3%	1%
6	Reputation and branding	0	0	0
Total		32	100%	31.5%

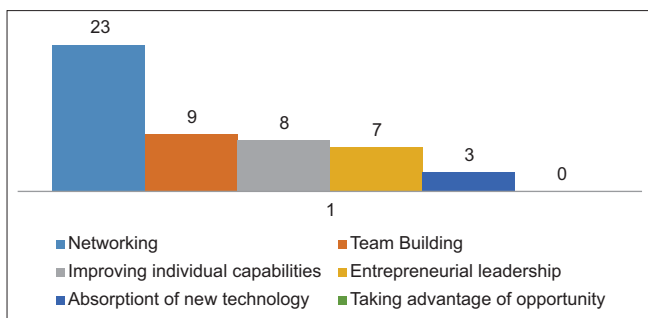


Figure 3: Frequency of regulatory policies in the field of entrepreneurial activities

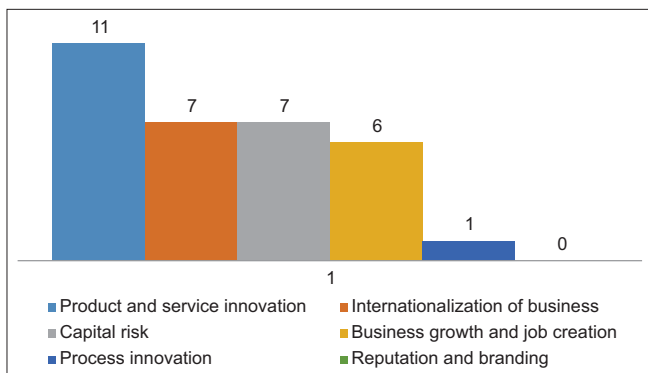


Figure 4: Frequency of regulatory policies in the field of entrepreneurial results (aspiration)

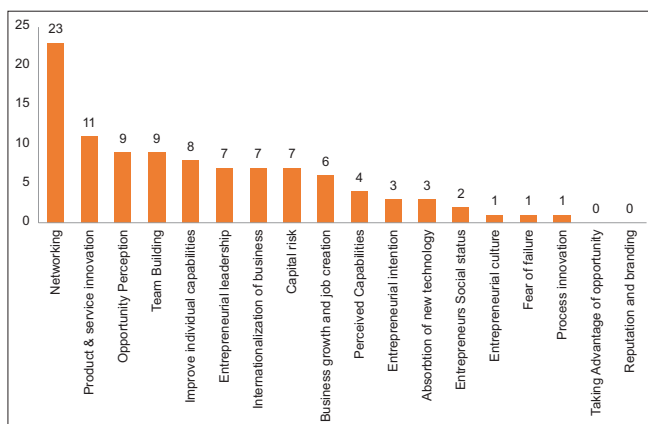


Figure 5: Comparative diagram of the regulatory policies of Iran's health sector

attitude, developing an entrepreneurial perception, and then focusing on entrepreneurial behaviors to achieve entrepreneurial results. The focus is to facilitate and support entrepreneurs by balancing the ecosystem. It should also focus on the concept of technology development, health-related manufacturing, value creation, and wealth creation.<sup>[11,19,32,33]</sup>

The analyzed document, which is the only policy document in the field of health, mostly deals with unemployment, which is not aligned with the principles of entrepreneurship development. Policymaking for entrepreneurship development

requires improving attitudes, education, and training, but in the entrepreneurship development document of Iran's health sector there is an imbalance of attention to them.

Our findings show that there is not much compatibility between the Iranian health sector entrepreneurship development document and the entrepreneurial development model of the GEM.

In the model of the GEM, the three dimensions of entrepreneurial attitudes, behaviors, and results are in direct and process relationship with each other, and based on entrepreneurial attitudes, entrepreneurial behaviors are formed and entrepreneurial behaviors will have entrepreneurial results.<sup>[7,10,26]</sup> It is not complying with this document. This inappropriate structure of the document might be one of the explanations for the continuous decline in our entrepreneurship ranking in the world and the region<sup>[23,34,35]</sup>

We found a real weakness in the theoretical fundamentals of officials and a real deficit in academic studies in this field to be responsible. Therefore, it is necessary to create a common understanding and vision for the establishment of entrepreneurship policies.

SDOH are nonmedical factors that influence health outcomes.<sup>[14]</sup> As social security, GDP, networking, and environmental factors are important elements for having and maintaining health, our policymakers should have real attention to entrepreneurship development as a major driving force.

In the past five years since the production of the document, it is recommended that the policymakers of entrepreneurship development in Iran's health sector consider the criticism of this research in the new edition of the document, while focusing more on the fields of attitude, education, health technology production of goods, quality of health, health tourism, raising GDP, and increasing social security. Officials should monitor the infrastructures of the entrepreneurial ecosystem in a logical and holistic way.

Providing health services is not the only mission of Iran's health sector. The health sector is also very suitable for the development of technology in various related fields such as pharmaceuticals, equipment, chemicals, laboratory, bioinformatics, artificial intelligence, and health tourism. Compiling the new edition of the document should improve the health and wealth status of society.

The policymaker should have an appropriate, balanced, and efficient focus in all dimensions of entrepreneurship development of the health sector. To have sustainable development, the planned strategies should pass the legislative assembly to become law and be notified by the president to become mandatory.

In comparing the results of this study with international studies, including the study of Stevenson and

Landström (2007), which analyzed the policies of 13 countries, it has been shown that in developed countries, the most attention is paid to the policies of entrepreneurship education and training, and the focus is made on the dimension of entrepreneurial perception and attitude. Page *et al.* (2007) emphasized the necessity of policy development for training and empowering entrepreneurs, but the focus of our document is on job creation.<sup>[26]</sup>

In the national studies, the results of Ghambarali *et al.*<sup>[19]</sup> research (2016) showed that attention to entrepreneurship support policies in the fifth development plan has been a declining trend.

The study of Sanaeepour (2020), which is similar to the present study, also shows the low attention of Iranian policymakers to the development of entrepreneurial perception and attitude in the development of Iran's entrepreneurship policies in the five-year development plans. This study also indicates noncompliance with the global alphabet model, which is consistent with our findings.

Interestingly, our qualitative analysis is consistent with the qualitative analysis and shows the incoherence of the policies.<sup>[26]</sup>

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### Conflicts of interest

There are no conflicts of interest.

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### Ethical Considerations

This article complies with the ethical guidelines and is a part of the thesis entitled analyzing the entrepreneurship policies of Iran's health sector and providing policy solution for the development of the entrepreneurship ecosystem at the doctoral level approved by Iran university of medical sciences.

### Code of Ethics

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### Authors' Contributions Respectively

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