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EDITOR'S INTRODUCTION

Welcome to the Vol.7, No.2 (December, 2017) issue of the *SIU Journal of Management*. The *SIU Journal of Management* is a double blind, peer-reviewed academic journal accepting papers in the fields of management, broadly defined. Please consider submitting papers, case studies, research notes, book reviews, conference reports and other communications to the editor (jcwalsh@soi.ac.th).

In this issue, I am pleased to be able to publish four papers, together with a conference report and book reviews. The four peer-reviewed research papers come from authors in Vietnam, Bangladesh, Nigeria and Thailand, which represents the stated intention of the SIU Journal of Management to promote geographical diversity and to provide additional support so as to encourage junior faculty members and first-time authors to publish, alongside colleagues with more established careers.

From Vietnam, Pham Hong Linh and Nguyen Thi Thu Trang consider the operating efficiency of Vietnamese microfinance institutions and consider the implications for them of moving from the non-formal to the formal sector. From Bangladesh, Shameena Ferdousy, Anupam Kumar Das and Suchana Akhter explore the role of emotional intelligence on organizational citizenship behavior. From Nigeria, Afolabi Joseph Fasoranti writes about the role of entrepreneurship in nation-building within the specific local context. Finally, from Thailand, Rawee Phoemhawm presents a thought-provoking case study on the 1996 Mount Everest disaster seen through the perspectives of Sun Tzu and von Clausewitz. These papers are diverse in subject and method and this is another aspect of the *SIU Journal of Management* that is intentional in nature.

It is to be hoped that 2018 brings better news than 2017, which was a year characterized in large part by divisions, malicious and casual falsehoods, the return of the spectre of the far right and the diminution of public space for informed civic and civil discourse. Hope contends with anxiety in this regard.

John Walsh, Editor, SIU Journal of Management.

Opinions expressed in this introduction belong to the editor alone and should not be ascribed to Shinawatra University as a whole or any individual member of it.

Entrepreneurship and Nation-Building in a Changing Environment: Health Education Perspective

Afolabi Joseph Fasoranti

Abstract

Health education offers invaluable assets to all nations because of the variety of career opportunities it offers which help to alleviate numerous societal problems such as poverty, lack of proper health care and, also, misconceptions about various health conditions. The purpose of the paper is to examine the role of health education as an avenue to learning entrepreneurship skills for nation-building and fighting economic recession. The paper discusses the role and importance of health education in nation-building, the concept of entrepreneurship, career and entrepreneurship opportunities in the field of health education and strategies for developing entrepreneurship skills in health education. The paper concludes that health education can help to lift the nation out of recession if properly put into practice. It is, therefore, recommended that governments and other stakeholders in the health industry should create awareness about the role of health education in nation-building.

Keywords: *changing environment, entrepreneurship, health education, nation-building, poverty alleviation*

1. Introduction

Recession, triggered by the collapse of the subprime mortgage market and fall in oil prices, deeply affected businesses, the economy in general, politics and the personal lives of many millions of people. The struggling economies around the world, including Nigeria, are still recovering from the wounds inflicted upon them at that time. The high magnitude of the effect caused by the recent recession is probably down to its depth; it was the worst downturn in the last decade. A recession is a period between a peak and a trough (of a business cycle) during which a significant decline in economic activity spreads across the economy. Recessions are characterized by negative real GDP growth and increases in unemployment.

The word entrepreneur comes from the French verb *entreprendre*, which means, “to undertake.” Entrepreneurship has been defined in the past, and continues to be in the present, in various ways by different authors. Over the decades, an entrepreneur has been described as a coordinator, risk bearer or innovator (Adegbaye, 2014). Adegbaye (2014) defines the process of innovation as spontaneous undeliberate learning while, for Frank (2007), it is the ability to spot where market fails and it is possible to develop new products, goods or processes for which there is market demand. While many agree that innovation is an important part of the entrepreneurship process, it is not sufficient in itself. For example, Eddy (2006) described creative imitation as another aspect of entrepreneurship, which probably describes a lot of entrepreneurs coming from places like China or other developing and emerging countries. Creative imitation is the process of taking an innovative product and tailoring it to a particular niche or local market to serve needs better. These different definitions of entrepreneurship exist because it has been looked at from various perspectives. It has been observed that entrepreneurship has been described in terms of dynamic change, new combinations, exploiting opportunities, innovation, price arbitrage, risk,

uncertainty, ownership, new-venture formation, non-control of resources, asymmetries of information, superior decision-making, monopoly formation and others. He then concludes that while these points of view had previously been thought of as contradictory, they actually are complementary definitions describing different subdomains of entrepreneurship, such as business, social, academic, family business entrepreneurship and so forth. Filion (2011), meanwhile, proposes that any comprehensive definition of entrepreneurship should encompass six main components: 1) innovation; 2) opportunity recognition; 3) risk management; 4) action; 5) use of resources and 6) added value.

Entrepreneurship is becoming increasingly important within the health care sector since, for example, societal changes open spaces for new entrepreneurs in the field (Ajala, 2006). However, quite a little research has been done on entrepreneurship in the health care sector and particularly on enterprise education in Health Education. Previous studies have identified a number of obstacles that may hinder Health Educators from becoming entrepreneurs, such as a lack of business competence and skills, financial obstacles, lack of support from their colleagues and society and fear of the unknown (Fasoranti & Adeyeye, 2015). In addition, entrepreneurship in the health care sector is also dependent on the politics related to public health care services such as the forces relegating Health Education to the background. Some studies indicate that a lack of competence in entrepreneurship is a major barrier for Health Educators who want to become entrepreneurs (Ilesanmi, 2014). Health Educator entrepreneurs claim that when their education is based on the traditional forms of teaching, it does not provide them with enough knowledge about entrepreneurship or establishing and running a company. Consequently, a critical discussion about the role of education in enhancing entrepreneurship among Health Education is needed. The health education and the health promotion fields are fertile grounds for the entrepreneurially skilled professional to initiate new ideas, tools and techniques as solutions in meeting the challenges of practice in the field.

Changes in social, political and regulatory factors and advances in instructional technology have led many health educators to think about becoming entrepreneurs. As primary prevention of chronic diseases becomes a more central component of the health and/or medical care continuum, entrepreneurial opportunities for health educators will continue to expand. The process used to design, implement and evaluate health promotion and disease prevention has clear connections with entrepreneurship, marketing management and other business processes (Eddy, 2006). Business and health education applications use formative evaluation, needs assessments and other data gathering techniques to develop two-way circular communication channels which determine the values, needs and preferences of customers (in business applications) and students, clients or participants (in Health education applications). Consequently, this paper examines the role of the health educator as an entrepreneur in possible nation-building.

2. Health Education and Health Promotion

While health education has a long history as a both professional and academic field, health promotion did not really emerge until the 1980s. Whereas the popular thinking is in the direction of viewing health education and health promotion as synonymous terms, both of them are different processes. However, health promotion embraces more the effect that health education is subsumed within its scope. Johnson (2010) considers health education to be planned learning designed to improve knowledge, and develop life skills which are conducive to individual and community health. In essence, Health Education plays a crucial role in the development of a healthy, inclusive and equitable social, psychological and physical environment. It reflects current best practice, using an empowering, multi-dimensional, multi professional approach

which relates to all settings and organizations, including the community, schools, health services and the workplace. Health Education helps provide health knowledge, enhance wellness behaviours, promote health situations, facilitate healthful relationship and enable community members make responsible decisions. The Joint Committee on Health Education and Promotion Terminology (2001) defined Health Education as any combination of planned learning experiences based on sound theories that provide individuals, groups and communities the opportunity to acquire information and the skills needed to make quality health decisions.

Health is a dynamic state of being, whose components are acting and interacting and it is individually and socially valued. Health may be viewed both as a global quality and as a set of specific attributes or qualities (physical, psychological and social well-being and functioning). Optimal health is full realization of the individual's health potential. O'Donnell (2009) points out that optimal health has physical, intellectual, social, emotional and spiritual dimensions. Edwards (2012) observes that the extensive scope of health promotion programmes includes: alcohol and drug assistance (drug detoxification and rehabilitation); cancer prevention; cardiovascular screening; cholesterol screening and reduction; counseling assistance; exercise prescription; eye care; fitness testing and maintenance; headache/migraine prevention techniques; health risk appraisals and needs assessments; hypertension screening and reduction control; lifestyle consultations; nutrition education; tobacco use cessation; stress management and reduction and weight control and maintenance.

Health problems that are prevalent in countries such as Nigeria include poverty, unemployment, diabetes, poliomyelitis, cancer, cerebrospinal meningitis, malaria, tobacco use, alcohol use, herb use, hypertension, malnutrition, osteoarthritis, child abuse, vesico-vaginal fistula, female genital mutilation, HIV/AIDS, tuberculosis, intestinal worm infection, skin bleaching cream/soap use and low-levels of physical activity; lack of rest and recreation; environmental pollution and lack of potable water. These problems are opportunities for the entrepreneur to come up with solutions that are applicable within and/or outside the corporate setting.

3. Need for Health Education in Nation-Building

The World Health Organization (WHO, 2008) identified five major needs for health education and these are as follows:

- **Improved Health:** Health education helps people improve their health in all stages of life. A health educator does this by visiting communities to give health talks as well as voluntary counseling on how to improve health and live a disease-free life.
- **Improve Decision-Making:** This helps people make better health decisions. To do so, the health educator often tailors the message to the group being educated. It explains the risks of unhealthy habits like smoking, excessive alcohol consumption and unprotected sex.
- **Fight Diseases:** The goal of health education at the primary health care system is to minimize the occurrence of life-threatening illnesses. For example, the risk of diabetes and heart diseases can be lessened with proper diet and exercise.
- **Fight Misconception:** Health education helps to correct some misconceptions that affect people's health. For example, in the Northern part of Nigeria, where people believed that immunization is a means of putting an end to child bearing (family planning), this misconception can be corrected through health education.

- **Provide Resources:** Health Educators provide educational resources in the form of fliers carrying health messages, posters and pamphlet. It also creates awareness on health services that are available for free or at minimal cost.

4. Health Education and Entrepreneurship

There are health education and health promotion approaches in entrepreneurship and there is entrepreneurship in health education and health promotion. In essence, the concepts are interconnected in theory and they are mutually reinforcing in practice. Frank (2007) attests to the fact that an entrepreneurial orientation is critical for national state and local development of the economy, observing that entrepreneurship has brought about changes, reforms and economic progress all over the world. The traditional or classical perspective on the meaning of entrepreneurship refers to the practice of taking risks in the process of managing to transform an innovative idea into a profitmaking business. The classical notion of the meaning of the term entrepreneur is predicated on the person's hope for financial profit. However, profit transcends monetary forms of value. This has led to the extension of the scope of entrepreneurship to include social entrepreneurship: the art and science of adding value to life and the environment through creativity and innovation.

4.1. The Nature of Entrepreneurship

Inventors differ from entrepreneurs (Adegbaye, 2014). An inventor creates something new, whereas an entrepreneur assembles and then integrates all the resources needed (i.e., money, people, business plan, etc.) to operationalize an inventive idea, product or service into a viable business. The essence of entrepreneurial behaviour emanates from identifying opportunities and putting useful ideas and services into practice (Barringer & Ireland, 2006). This integration of ideas into practice inherently requires creativity and lateral thinking (i.e., thinking outside the box), which typically involves a willingness to be innovative. Successful entrepreneurs possess an internal sense of control and are able to create environments that support their business ideas.

4.2. Five Cardinal Rules of Entrepreneurship in Health Education

Entrepreneurial activities in Health Education are relative and contextual. Relative, in that much of what is obtained in Health Education influences and is influenced by variable of human conditions, social, environmental and political factors (Eddy, Donohue & Chaney, 2001). Intra-individual changes across time resulting from a wide range of personal, social and environmental factors (such as maturation, marital status, conditions of employment and changes in the built environment) require a relative approach to Health education applications. Entrepreneurial activities are also contextual in that these activities occur within different organizational, community and social structures, which are influenced by disparate written and unwritten policies, procedures, and norms. Consequently, the Five Cardinal Rules of Entrepreneurship as applied to health education are discussed below.

4.2.1. Assess Capabilities and Limitations

Entrepreneurs cannot be all things to all people. In entrepreneurial endeavours, it is vital that entrepreneurs know what they can and what they cannot do with a high level of proficiency (Barringer & Ireland, 2006). Improve on these skills through further training in health education.

4.2.2. Position The Company According to Personal Capabilities

With knowledge of personal capabilities and limitations, it is possible to begin to position the business product and/or service in the marketplace. The position is the image or niche that the product or service has in the marketplace (Eddy, 2006). For example, during the outbreak of Ebola Virus, a variety of hand sanitizers were in the market. If an entrepreneur wanted to introduce new sanitizers into the marketplace, two important steps to position this product would be to (a) determine capability to produce competitive sanitizers and then (b) determine how it is unique (what this new sanitizer brings to a competitive market). This becomes the basis for the market position.

4.2.3. Use Contemporary Business and Marketing Applications

Developing a successful business plan includes opportunity recognition, feasibility analysis, industry analysis, business model development and strategic management (Barringer & Ireland, 2006). Articulating a business plan is an important step in entrepreneurial behaviour and it is important to realize that there are risks in not writing everything down and sharing business ideas with others.

Opportunity recognition. Before getting excited about a business idea, it is critical to determine whether that idea fills a need and meets the criteria for an opportunity. An opportunity is a gap between what is currently on the market and what the possibilities are for new or significantly improved products or services (*ibid.*). It is created by a favorable set of circumstances, which generates a need for a new product, service, or business. An opportunity has four central qualities: it is (a) attractive, (b) durable, (c) timely and (d) anchored in a product or service that creates or adds value for its buyer or user (*ibid.*).

Business model development. After conducting a feasibility analysis, a business model must be developed. A business model is the plan for how to use resources, structure relationships and interface with stakeholders so that the programme can sustain itself based on the profits it turns (*ibid.*). There is no standard business model in Health Education. In fact, it is dangerous to assume that success can be achieved by simply copying the business model of another programme, even if that other program is the industry leader. This is true because it is difficult to determine specifically how another programme's business model was used without understanding (a) the process that was used in the development of the programme and (b) what resources were at the program planner's disposal to develop the programme. Health educators who create programmes without conceptualizing well-crafted business models may think that they can succeed anywhere by merely using the same preplanned programme for any situation. However, neglecting the need to focus on the best process approach to planning business and Health education applications often yields inadequate business plans, which fail to embody this best process orientation, thus yielding inadequate products and services.

Marketing application. Many times, there is a misconception about what it means to market health promotion programmes. Marketing is not simply stating all the good aspects of a programme and promoting the benefits people can get from it (Andreasen, 1995). DeTienne (2010) defined marketing as, "satisfying needs and wants through exchange processes," The essence of marketing is developing satisfying

exchanges from which customers and marketers benefit. Adopting a marketing orientation entails determining what customers want before even developing a product or service. This requires the initial generation of market intelligence and responding to this information before implementing programs or services.

4.2.4. Get a Good Support Team

One reason for becoming an entrepreneur is to be one's own boss. A person who does this can attract and assemble a personal support team based on personal relationships and networks. The business team should share the same vision for the Health Education product and display many traits such as self-motivation, good network, resilience, strategic thinking and innovation. If the company is a small business, it is appropriate to hire key health professionals (e.g. health educators, dieticians and data management providers) on a contract labour basis and business support personnel (e.g. accountants and lawyers) on a fee-for-service basis.

4.2.5. Strategically Manage Entrepreneurial Activity

Strategic management is important when formulating operational plans for Health Education programmes. The management of time, money, staff, energy, product, and work processes is not the exciting part of the business; however, it is as vital as marketing the programme and its providers. Strategic management closely coordinates many of the processes used to implement and evaluate programmes. Strategic management involves continually and systematically examining the internal and external environments of the programme (including strengths, weaknesses, opportunities and threats to sustainability). This includes formulating short-range and long-range programme strategies, objectives and policies and implementing programmes, budgets and procedures. A programme's performance should continually be evaluated through continuous feedback channels.

4.3. Areas that Health Educator Entrepreneurs Can Explore

The following areas can be explored by a health educator:

- In schools, health educators can teach health as a subject and promote and implement Coordinated School Health Programmes, including health services, student, staff and parent health education, while promoting healthy school environments and school-community partnerships. At the school level, they develop education methods and materials and coordinate, promote and evaluate programmes. As an entrepreneur, a health educator can establish a crèche, where pupils are accommodated.
- Working on a college or university campus, health educators are part of a team working to create an environment in which students feel empowered to make healthy choices and create a caring community. They identify needs, advocate and do community organizing, teach whole courses or individual classes, develop mass media campaigns and train peer educators, counsellors and advocates. They address issues related to disease prevention; consumer, environmental, emotional and sexual health, first aid, safety and disaster preparedness, substance abuse prevention, human growth and development and nutrition and eating issues. They may manage grants and conduct research.
- In companies, health educators perform or coordinate employee counseling as well as education services, employee health risk appraisals and health screenings. They

design, promote, lead and evaluate programmes about weight control, hypertension, nutrition, substance abuse prevention, physical fitness, stress management and smoking cessation. They also develop educational materials and write grants for money to support these projects. They help companies meet occupational health and safety regulations, work with the media and identify community health resources for employees.

- In health care settings, health educators educate patients about medical procedures, operations, services and therapeutic regimens, create activities and incentives to encourage use of services by high risk patients, conduct staff training and consult with other health care providers about behavioural, cultural or social barriers to health, promote self-care, develop activities to improve patient participation on clinical processes, educate individuals to protect, promote or maintain their health and reduce risky behaviours, make appropriate community-based referrals and write grants.
- In community organizations and government agencies, health educators help a community identify its needs, draw upon its problem-solving abilities and mobilize its resources to develop, promote, implement and evaluate strategies to improve its own health status. Health educators do community organizing and outreach, coalition building, advocacy and develop, produce and evaluate mass media health campaigns.

5. Conclusion

Health education is a multi-disciplinary profession that cuts across varieties of professions to provide opportunities for an entrepreneur. Owing to the changes in working life, entrepreneurial skills are necessary in the health care field, irrespective of the sector. For this reason, education programmes in health care should pay more attention to entrepreneurship in the curriculum. Only a minority of teachers in the field of health education teaches entrepreneurship at the moment, even though many teachers cooperate with entrepreneurs and companies. Teachers in the health care field would become more acquainted with entrepreneurship education if they received more training in how to teach it. In particular, the teaching methods need to be emphasized in entrepreneurship education. By so doing, the unemployment rate will be reduced through the establishment of companies in the area of health education.

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