

An international partnership between a Canadian and Brazilian university: A descriptive report

Non-Research

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ABSTRACT

Post-secondary programs in health are strengthened when curricula and experiences are internationalized. Internationalization encourages students to think, advocate and practice globally; thus, preparing graduates to contribute to health beyond geo-political borders. However, designing and supporting international experiences in undergraduate health curricula can be challenging due to time and resource constraints, costs, language barriers, and collaborative processes within and across organizations; thus, internationalization is not easily achieved. The purpose of this report is to describe an initiative aimed at supporting undergraduate nursing student experiences in an international partnership program between a Brazilian and Canadian university. First, we describe the project. Second, we present the context of the two partnering undergraduate nursing programs and their respective communities. Third, students from each school describe their experiences with the initiative. Fourth, we integrate our experiences with literature to offer three lessons for moving forward using a framework of resource allocation, fair trade learning, and decolonized competencies. Our report is timely as worldwide, universities are eager to build collaborative partnerships with stakeholders to implement internationalization within curricula. Such partnerships can help students learn about health-related experiences for populations living in distinctive social inequality and inequities in accessing health services.

KEYWORDS

Health Services, Internationalization, Nursing Program, Nursing Student Experience, Post-Secondary Education

INTRODUCTION

Internationalization of post-secondary health curricula can involve principles of global health but is focused more on enhancing education and research (Wu et al., 2022) for the purpose of improving the healthcare workforce. Conversely, global health involves research, education, advocacy, and practice related to health issues that concern many countries (Koplan et al., 2009). There is no universal definition of internationalization (de Wit, 2023); however, it can be defined as

The intentional process of integrating an international, intercultural or global dimension into the purpose, functions and delivery of post-secondary education, to enhance the quality of education and research for all students and staff and to make a meaningful contribution to society. (de Wit et al., 2015)

Internationalization is often uncoordinated and challenging (Gosse & Katic-Duffy, 2020; Imafuku et al., 2021). Further, it encompasses a range of capacities including knowledge, values, attitudes,

and behaviours (Imafuku et al., 2021; Matthews et al., 2021). The challenges associated with internationalization require resource intensive initiatives. As such, supporting health students to be culturally competent practitioners remains challenging (Hughes & Hood, 2007). In this paper we describe an initiative aimed at offering an international experience within an undergraduate nursing program between a Canadian and Brazilian university to increase internationalization of curricula. Recommendations are offered using a framework of resource allocation, fair trade learning, and decolonized competencies.

BACKGROUND

Internationalization of health curricular in postsecondary education is important for developing a competent health care workforce. Knowledge of populations living in distinctive levels of social inequality, and inequities of accessing health services—with the capability of critiquing and changing systems that influence these elements through research and advocacy-strengthens the health system (Matthews et al., 2021). There is global interest in emphasizing international and cultural health concepts within health curricula (Knecht et al., 2020; Matthews et al., 2021; Papadopoulos et al., 2016). For example, regulatory bodies identify cross-cultural competencies for entry to practice (see for e.g., College of Nurses of Ontario, 2019). Such emphasis aligns with a broader higher-education internationalization agenda influenced political, socio-cultural, and academic efforts (Wu et al., 2022).

Reasons for internationalization of curricula include beliefs that students will broaden their worldviews (Falleiros de Mello et al., 2018) and be more prepared to provide care for an increasingly diverse populations (Wu et al., 2022) by, for example, being able to incorporate diverse health values and beliefs into care. Additionally, it supports the development of personal experience and professional growth (Curtin et al., 2013; Imafuku et al., 2021; Knecht et al., 2020) and develop cultural awareness (Knecht et al., 2020; Noone et al., 2019; Peel et al., 2021) during an especially formative period of their education and career (Curtin et al., 2013). These experiences are powerful as they provide learning space for

students to focus on international health concepts and develop cultural safety and competency values and skills that are increasingly required of new graduates by licensing bodies. Conversely, authors note that international experiences can perpetuate overlapping negative outcomes such as cultural othering (St-Amant & Sutherland, 2020), colonial influence (DeCamp et al., 2023), and power imbalances (Eichbaum et al., 2021). Despite these possible and avoidable drawbacks, most agree that authentic and mutually-beneficial collaborations supporting international student experiences can offer positive outcomes for learners, faculty, and organizations (Eichbaum et al., 2021; Matthews et al., 2021). However, to mitigate harms and realize benefits, it is imperative that faculty engage in meaningful and thoughtful internationalization of curricula.

A project to support internationalization and offer an international experience for nursing students at two universities, one in a high-income country and one in a middle-income country, was undertaken. The purpose of this descriptive paper to describe the initiative and offer recommendations. A description of the the project that supported the initiative will be provided, followed by an overview of the context in the two partnering undergraduate nursing programs and their communities of practicing. This will be followed by a report of the student experiences; and finally, implications for future adaptation of this program using a framework of resource allocation, fair trade learning, and decolonized competencies is provided.

DESCRIPTION OF PROJECT

A partnership existed between faculty at the Brazilian and Canadian universities based on educational connections. There was institutional support from both organizations. This support came in the form of two distinct funding initiatives aimed at offering international student experiences and developing international research partnerships. The project described in this paper was supported by both funding streams and, thus, was aimed at developing international experiences for students while supporting faculty research networks.

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The research project was aimed at developing a research network related to chronic wounds and self-care in Brazil. Chronic wounds are a global phenomenon and therefore created a unique foundation for developing an international research partnership. This work was supported by research funding secured by faculty at both Building organizations. on this organizational funding was secured to support nursing student involvement internationalization project aimed at supporting student mobility between Canada and Latin America.

The COVID-19 pandemic delayed the project over a year and necessitated online activities. Both Brazilian and Canadian faculties and students had the opportunity to attending lectures and engaging in discussion related to topics such as Healthcare System, Nursing Education, Nursing Profession and Research Gaps in both countries. These activities formed the foundation for future work and visits.

The visit described in this paper involved two faculty members (IGC and DT) and two undergraduate nursing students visiting Brazil for two weeks to build research networks and support student experiences. Activities ranged from discussions with academics with similar research interests, to visits to healthcare organizations (e.g., hospitals, ambulatories, secretary of health). Both Brazilian and Canadian faculty and students delivered lectures on the healthcare system, nursing education, nursing professional issues and research gaps in both countries. This project was unique due to the dual funding that support itenabling a focus on both developing international research networks and supporting student international experiences.

The organizations: Two different universities and two different communities

Lakehead University located in Ontario Canada offers both undergraduate and graduate health programs including kinesiology, nursing, psychology, and social work. It has two campuses – the larger campus is in a medium-sized city (~120,000 people) that serves as the regional hub for the surrounding rural area, and a smaller campus located in a separate community

(~30,000). The university student population is approximately 10,000, including over 2,000 international students from 85 countries. Just under half of the student population is first-generation university students (neither parent attending university).

The School of Nursing, has a unique focus on rural and remote health, including an emphasis on Indigenous health and wellness. approximately 800 students enrolled undergraduate programs, and 100 students enrolled in graduate programs. While Lakehead University is situated within Canada, a highincome country, the university is not a highpowered global organization, but instead a regional community-focused institution that is aimed at providing accessible education.

The Brazilian University, University of São Paulo (USP), is a public university in the state of São Paulo (SP). It is the largest Brazilian public university with eleven campuses including one at Ribeirao Preto, SP, where this project took place. The focus of USP encompasses three streams: 1) teaching, 2) research and 3) university extension in all areas of knowledge, offering a broad range of courses. In 2022, the university had a total of 97,325 students enrolled across all campuses.

The EERP/USP offers a four-year bachelor's degree program and a five-year bachelor's degree with a teaching diploma. The graduate program offers its own master's and doctoral programs in addition to the inter-institutional nursing doctoral program in partnership with the school of nursing at USP (EE-USP) in the capital of Sao Paulo campus. Currently, the EERP/USP has 600 undergraduate students and 500 graduate students.

Due to the high demand for international academic and research exchanges the EERP/USP created its own International Relations office. This office is responsible for providing technical and operational support to students and teaching Mobility Programs. While the Mobility Programs have supported the arrival of undergraduate students from Colombia, Canada, Portugal, Angola, and Guiné –Bissau, it has also provided opportunities for several undergraduate and graduate students to engage in supervised training

in Canadian, American, Latin American, British, Portuguese and Spanish universities.

Despite the collaboration occurring between organizations from a middle-income (Brazil) and high-income (Canada) country, very little power differential in terms of resources exists between the two universitas. EERP/USP is larger in terms of faculty numbers, student enrollment, and research funding, and has a much greater global influence on health education and research than does the School of Nursing at Lakehead University—despite the latter being in a higher-income country.

Given legacies of colonialism within health education paradigms, and which perpetuate internationalization of curricula, this project was developed using a lens of decolonization (Eichbaum et al., 2021) and was aimed at creating a partnership based on mutual benefit, transformative learning (by both faculty and students), and equitable power distribution.

Canadian Student Experiences

The Canadian students described how spending time and interacting with the Brazilian nursing students and faculty provided unique insight into the similarities and differences between Canada and Brazil's education and healthcare systems. Specifically, they commented on how being able to safely discuss the disparities and challenges each population faced regarding access to care, treatment of Indigenous peoples, and other shared social determinants of health helped them develop a common understanding between a universal and decentralized healthcare systems. Further, students shared that, while they often discuss using holistic and person-centred care within the curriculum in Canada, it can be difficult to implement due to demands and stressors placed on Canadian nurses and student-nurses. Conversely, while in Brazil and visiting various organizations, commented on how it helped them to appreciate how patient-centred care was implemented in practice. Further, students commented on the collaborative interactions of the healthcare workers while observing wound-care within a Brazilian clinic. Theses observation demonstrate how international experiences can broaden students' perspectives on health.

As a cultural learning experience, the students shared they appreciated the opportunity to immerse themselves in local traditions, foods, and practices. Further, as they were accommodated on the USP campus, they were able to partake in aspects of student life such listening to the USP capoeira group practice and dancing forró—aspects that may be routine for Brazilian students at USP but that represented important cultural learning scenarios for the Canadian students.

Brazilian Student Experiences

Brazilian students felt that discussions with Canadian students and faculty highlighted similarities and differences between the Canadian and Brazilian healthcare system and the training of nurses, and the autonomy and empowerment for people living with diabetes in Canada and Brazil. Discussions provided a foundation for Brazilian and Canadian nursing students to learn from and about each other's context. Interaction between faculty and students from Brazil and Canada highlighted significant advantages for both countries.

The Brazilian students appreciated learning about culture, the structure of the health system, and nursing training. They shared that the initiative enabled exchange of experiences and dialogues about conducting research in partnership between universities, student mobility, and exchange for undergraduate and graduate students, thus, highlighting the importance of the project.

In addition to academic experiences, students appreciated shared cultural activities that occurred during the visit. A student commented on a visit to the Praça XV de Novembro, one of the most important sights in Ribeirão Preto. Notably, this site is linked to the history of the dictatorship in Brazil, as it was an important space for student demonstrations. Such a visit was a unique catalyst for students to discuss the similarities and differences between Canada and Brazil's history, and for each group to learn from the other.

DISCUSSION: MOVING FORWARD WITH LESSONS LEARNED

Internationalization of health education curricula has global interest from multiple stakeholders. The

benefits of internationalization are far-reaching and include personal and professional benefit to students and faculty. It is believed the benefits will support positive contributions to local and global health initiatives, through practice, advocacy, and research. However, supporting students to learn from international experiences, including both practice and research, is challenging. Attention must be paid to mitigating unintended negative outcomes and ensuring such initiatives mutually beneficial and authentic. Therefore, proceeding cautiously, yet purposely, is critical for supporting international collaborations. To that end, we draw from our own experiences, and existing literature, to offer three practical items for how to support an initiative such as the one we described above. Our lessons pertain to securing complementary funding, attending to reciprocal benefit through fair trade learning, and developing decolonized competencies.

First, sufficient resource allocation in the form of time and finances is key. Brazil and Canada are unique positioned to participate in and benefit from internationalization of their nursing (and health) curricula as both countries see benefit in student mobility programs; and thus fund such programs appropriately. For example, in Brazil, funding organizations several promote international study abroad programs undergraduate and graduate students (Hewitt, 2020). This is similar for faculty in Brazil, where funding is available for professors to spend time abroad. Canada has similar initiatives whereby funding is available to both students and faculty to participate in mobility programs (e.g., CALAREO, 2023).

In the project we described, we were fortunate to secure funding through two of these programs—one focused on supporting students (CALAREO) and one focused on supporting faculty research. As mentioned previously, the different foci of each funding organization were complementary and a benefit to this project as we could devote resources to support student mobility and building an international research collaboration. Further, related to time, as the focus broadened to both resource and education, allocation of faculty time on the initiative was well supported with the organizations involved. Leveraging funding from different organizations who value and support

international student mobility and faculty research is a key to successful initiatives.

when developing partnerships Second, between international organizations, imperative to acknowledge the needs, strengths, and resources each organization brings to the partnership (Falleiros de Mello et al., 2018). Educators and researchers have acknowledged that historically, international partnerships within education often occurred health within mismatched relationships—especially when they involve collaborations between organizations from high-income, and low- and middle-income countries (Eichbaum et al., 2021). relationships are problematic as they perpetuate colonialism and, thus, offer unilateral benefit to the high-income partner at the expense of the low- to middle-income country (Eichbaum et al., 2021). Efforts to acknowledge and move beyond such scenarios are emerging in the literature. For example, although originating in service-learning and community engagement work (a much larger body of work than the initiative described here), Fair Trade Learning offers principles to guide internationalization in health curricula including short-term mobility initiatives (Eichbaum et al., 2021; Hartman, 2015).

Specifically, the underpinning idea is that international collaborations, regardless of the scope or size, be based upon reciprocity and offer benefit on both sides of the exchange (Hartman, 2015). We approached the stages of this initiative described here using such a lens. Specifically, faculty from both institutions were involved in the funding generation, grant writing, administration, research implementation, and planning of all activities through the research and short-term mobility stages of this initiative. Further, plans are underway to submit grants in both countries, with faculty from both countries acting as primary investigators. Finally, plans are also underway to support Brazilian graduate students to participate in mobility exchanges to Canada.

Third, facilitating student learning that is based upon principles of decolonization is an important consideration when supporting students' international experiences (Eichbaum et al., 2021). Post-secondary educators in Brazil and Canada both value internationalization of health curricula

and offer a myriad of short- and long-term exchange options. Likewise, the effects of colonization have influenced health in both countries, particularly in relation to health education, provision, and outcomes for respective Indigenous population (Ferdinand et al., 2020; Kennedy et al., 2022). As a result, health and nursing curricula in both countries have emphasized the social determinants of health and attempt to incorporate how colonization has impacted health disparities.

Using this as a foundation and building on some of these ideas within internationalization experiences, can help students critically examine how colonization, power, and health intersect worldwide. Students can learn how equity and diversity in both local and global contexts influence health and health outcomes. Eichbaum and colleagues (2021) suggest that faculty should help students engage with these experiences as "informed, open-minded, and responsible people who are attention to the diversity across the spectrum of differences" (p. 332). Discussing and observing the effects of colonization, both domestically and internationally, can help students understand the far-reaching impacts of past practices—with the intended effect being that students will become more knowledgeable, critical, and reflective practitioners.

CONCLUSION

In this paper we described an internationalization project aimed at supporting students from Brazilian and Canadian post-secondary nursing schools. The project was unique as it was funded by two distinct streams—one aimed at supporting development of research networks, and one aimed at student experiences. Students from both Brazil and Canada reflect on their experiences and offered insights within this work. In combination with literature and our experience we offered some practical guidance to those interested in undertaking similar work. Key takeaways are that to develop authentic meaningful short-term international experiences, educators should seek to secure diverse and complementary funding, develop reciprocal relationships between all stakeholders, and act upon the local and global influences colonization has had on health and health outcomes. Collectively, these efforts can combine to help educate a health workforce that is well prepared to collaboratively design, deliver, and research healthcare both locally and nationally. Our report is timely as universities worldwide undertake initiatives to support internationalization of their curricula.

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