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An international internship on social development led by Canadian nursing students: Empowering learning ☆



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SUMMARY

Background: A Canadian nursing student-led knowledge dissemination project on health promotion for social development was implemented with local professionals and communities in Brazil.

Objectives: (a) to identify how student-interns contrasted Canadian and Brazilian cultural and social realities within a primary healthcare context from a social development perspective; (b) to examine how philosophical underpinnings, including social critical theory and notions of social justice, guided student-interns in acknowledging inequalities in primary healthcare in Brazil; and (c) to participate in the debate on the contribution of Canadian nursing students to the global movement for social development.

Design and Setting: A qualitative appraisal of short-term outcomes of an international internship in the cities of Birigui & Araçatuba (São Paulo-Brazil).

Participants: Four Canadian fourth-year undergraduate nursing students enrolled in a metropolitan university program.

Methods: Recruitment was through an email invitation to the student-interns, who accepted, and signed informed consent forms. Their participation was unpaid and voluntary. One-time individual interviews were conducted at the end of their internships. Transcriptions of the audio-recorded interviews were coded using the qualitative software program ATLAS ti 6.0. The findings were analyzed using thematic analysis.

Results: Student-interns' learning unfolded from making associations among concepts, new ideas, and their previous experiences, leading to a personal transformation through which they established new conceptual and personal connections. The two main themes revealed by the thematic analysis were dichotomizing realities, that is, acknowledging the existence of "two sides of each situation," and discovering an unexpected reciprocity between global and urban health. Furthermore, the student-interns achieved personal and professional empowerment.

Conclusions: The knowledge gained from the international experience helped the student-interns learn how to collaborate with Brazilian society's sectors to improve the social conditions of a "marginalized population". Student-interns became aware of their inner power to promote change by making invisible inequity visible in their own terms.

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Introduction and Background

Diversity and social justice are significant concerns for the nursing profession (International Council of Nurses, 2008). As post-secondary nursing students become aware that international students in host settings may contribute to furthering the health priorities of local populations (Atkins and Stone, 2006; Button et al., 2005), they are

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increasingly motivated to acquire experiential knowledge in foreign and distant settings with the aim of participating in the global nursing movement.

A Canadian nursing student-led project for an international internship was conceived in collaboration with the Rotary International Foundation, Section Birigui (state of São Paulo, Brazil), and São Paulo State University (Araçatuba campus). The project aimed to disseminate knowledge about health promotion for social development. By using knowledge transfer activities to build community capacity, as is very common in the field of health promotion, the internship approach was conceived to respond to Association of Universities and Colleges of Canada-Students for Development (AUCC-SDF) program specific aim: contributing to students' learning and understanding of global issues, as well as to two priority themes set by Canadian International

Tunding: Association of Universities and Colleges of Canada—Students for Development 2008 Grant, and Ryerson University, Faculty of Community Services, Learning & Teaching Seed Grant and Writing Week Initiative, as well as, Daphne Cockwell School of Nursing Global Learning Opportunities Committee.

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Development Agency (CIDA—the main funding source), which are to secure the future of children and youth, and to stimulate sustainable economic growth by investing in people (AUCC, n.d).

Students' readiness to apply for this grant was based on the fact that, at the time, they were in the last two months of year 3 Baccalaureate of Science in Nursing courses, Community Health Nursing and Leadership & Change, whose theoretical contents and practical experiences allowed them to master issues of critical social theory, social determinants of health, community capacity building, voice, social marginalization, social & economic development, empowerment, social and transformative leadership, accountability, among others. Moreover, they worked under direct guidance of the first author, a Brazilian diaspora faculty, for a total of 27 h to review with her publications about United Nations Millennium Development Goals, and CIDA goals for international development. As a result, an internship plan with 4 distinctive parts was developed, allowing them to compete internally with 25 applicants for a chance to represent their university in a national competition. The four-student team was one of the three finalists at this level of competition. It is noteworthy that this initiative was a milestone achievement for our school of nursing: in 2011 and 2012, two multidisciplinary teams won the same grant as studentled initiatives, which were supported by our university's Centre for Global Health and Global Equity where the first author is an associated member.

In Brazil, as student-interns they worked closely with Community Health Agents (CHAs), professionals officially recognized as such by law and active members of family health teams within the Brazilian National Unified Health System. CHAs are key paid personnel who work under the direct technical supervision and mentoring of university-educated nurses. Currently, CHAs receive initial education by teachers affiliated with local schools of public health. Specific training and in-service education are provided by nurses. CHAs provide health services within their own communities to address diverse health inequities and link citizens to the national, integrated health system. Their work settings include a community health centre where an array of primary and secondary healthcare services is free and accessible for the local population as part of national official health programs.

A summary of the student-interns' experiences, accomplishments, and learning outcomes, as documented in their final report to the AUCC, are presented in Table 1. After the internship was completed, a research team composed of nursing faculty and graduate and undergraduate

students conducted a qualitative appraisal to determine the short-term outcomes in the form of learning achievements, and to suggest institutional changes to better prepare and support students for successive international initiatives.

As AUCC funds international exchange among students, our findings on this Canadian experience can be applied to promote and improve opportunities for nursing students from other countries to profit from similar international mobility programs and to support students in all continents to acquire the requisite knowledge to enhance their social leadership in their home countries.

Objectives

The following objectives guided the appraisal: (a) to identify how student-interns contrasted Canadian and Brazilian cultural and social realities within the primary healthcare context from a social development perspective; (b) to examine how philosophical underpinnings, including critical social theory and notions of social justice, guided student-interns in acknowledging inequalities in primary healthcare in Brazil; and (c) to participate in the debate about the contribution of Canadian nursing students to the global movement for social development.

Appraisal Questions

The following questions were asked in the appraisal: (a) How did student-interns approach diverse personal and professional values, beliefs, and ethical norms across an international context? and (b) How did student-interns implement reflective practice techniques to integrate and work interdependently within an international healthcare context?

Literature Review

Globalization and the strong push for cultural competence have provoked changes in nursing programs and increased the pressure on them to educate socially and culturally reflective and responsive professionals (Fitzpatrick, 2007). International immersion programs are designed to expose students to different cultures and systems of care they would not otherwise have an opportunity to experience (Levi, 2009). Some

 Table 1

 Summary of student-interns' experiences, accomplishments and learning outcomes—summer 2008.

Pre-departure 50 h of intensive learning with a native Brazilian Portuguese language teacher. Cultural immersion and the rapid mastery of the Portuguese language allowed the apprehension of direct information during all interactions. Collaboration with registered nurses, physicians, social workers, university students and faculty members, elementary school teachers and students, as well as other representatives of civil society and local government. Opportunity to chat about issues of life goal setting and teamwork with institutionalized orphan children and teens in the community to reinforce their feelings of hope, resiliency, and collective power. Students used the example of Canadian geese that fly south to escape from the winter and return back home stronger and successful,

Experiences

Worked without translators, interacted verbally with

local inhabitants, and delivered workshops in Portuguese.

Accomplishments

Completed 480 h of fieldwork over 12 weeks accompanying CHAs in 400 home visits into a socially marginalized community (unemployed women and men, orphaned children and youth, seniors, sex-trade workers, and illicit drug and alcohol users).

Disseminated knowledge by delivering 7 workshops for school principals, teachers, community health centres' managers, supervisors, CHAs, and communities; holding 5 meetings with family doctors, nurses, social workers, and dentists; and holding 2 meetings with the population for cultural exchange.

Held workshops with CHAs that addressed social determinants of health, power balance, community capacity-building, and social leadership.

Held workshop with community members and healthcare professionals on strategies to address power imbalances in civil and political literacy and access to information and computer literacy.

Acquired knowledge through daily, intensive contact with local society in professional, social, and leisure activities.

Learning outcomes

Explored access and used opportunities to work with the communities through a cultural exchange.

Acted proactively when in a favourable context for sharing Canadian personal and professional knowledge and values.

Responded to a continuous appeal to become aware of, reflect on, and discuss, social inequities.

Used willingness to learn and commitment to change to engage with community members.

Developed endurance to face and deal with the persistent culture of authoritarianism, nepotism, powerlessness, marginalization, privilege, disenfranchisement, and lengthy process of social and political changes.

Discovered simple ways to stimulate the local community's awareness about their conditions and being

Discovered simple ways to stimulate the local community's awareness about their conditions and being knowledge experts on their own social situation. Realized the value of their personal contribution to stimulate change in the global movement for health equity and knowledge exchange in their home country as well as in developing countries.

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