

Internationalization and adaptation of undergraduate/graduate students of the nursing course in international academic mobility

Internacionalização e adaptação de graduandas/egressas do curso de enfermagem em mobilidade acadêmica internacional

Internacionalización y adaptación de académicos/egresos de grado en enfermería en movilidad académica internacional

ABSTRACT

Objective: To understand the adaptation process and repercussions of internationalization for undergraduate and graduate nursing students who experienced the international academic mobility. **Method:** This is a qualitative study based on semi-structured interviews with eight students who joined the Science without Borders Brazilian Program from Higher Education Institutions from different locations in Brazil. The students were interviewed via videoconference, which were recorded for later transcription. The data were analyzed by means of the Collective Subject Discourse. **Results:** From the data analysis, five discourses emerged: Adaptation in Australia; Student support; Lifestyles and behavior; Cultural diversity; and Comparison of the health system and nursing between Brazil and Australia. The different cultures made it possible for students to reflect on the multicultural and intercultural contexts experienced, reinforcing their potential for professional and human training. **Conclusion:** The experience with an exchange program represented a milestone with positive impacts both in personal life and in professional training. **Keywords:** Internationality; Education, Nursing, Baccalaureate; Nursing Education; Nursing; International Educational Exchange.

RESUMO

Objetivo: Compreender o processo de adaptação e as repercussões da internacionalização para graduandos e egressos do curso de Enfermagem que vivenciaram a mobilidade acadêmica internacional. **Método:** Estudo qualitativo, realizado por meio de entrevistas semiestruturadas, com oito ex-intercambistas do programa brasileiro Ciência sem Fronteiras, de cursos de enfermagem de Instituições de Educação Superior de diferentes localidades brasileiras. As entrevistas foram realizadas via videoconferência, as quais foram gravadas para posterior transcrição. Os dados foram analisados pela técnica do Discurso do Sujeito Coletivo. **Resultados:** Emergiram cinco discursos: adaptação na Austrália; apoio ao estudante; estilos de vida e comportamento; diversidade cultural e comparação do sistema de saúde e da enfermagem entre Brasil e Austrália. As diferentes culturas possibilitaram a reflexão sobre o contexto multi e interculturais vivenciados, reforçando seus potenciais para a formação profissional e humana. **Conclusão:** A experiência com o intercâmbio representou um marco transformador, com impactos na vida pessoal e na formação profissional.

Descritores: Internacionalidade; Bacharelado em Enfermagem; Educação em Enfermagem; Enfermagem; Intercâmbio Educacional Internacional.

RESUMEN

Objetivo: Comprender el proceso de adaptación y las repercusiones de la internacionalización en la formación profesional de enfermeros, a partir de la percepción de los estudiantes de pregrado y egreso de la carrera de Enfermería que han experimentado la movilidad académica internacional. **Método:** Estudio cualitativo, realizado a través de entrevistas semiestruturadas, con ocho ex alumnos de intercambio del programa Brasileño Ciencia sin Fronteras de cursos de enfermería en Instituciones de Educación Superior de diferentes lugares de Brasil. Las entrevistas se realizaron mediante videoconferencia, las cuales fueron grabadas para su posterior transcripción. Los datos se analizaron mediante la técnica del Discurso del sujeto Colectivo. **Resultados:** Del análisis de datos surgieron cinco discursos: adaptación en Australia; apoyo estudiantil; estilos de vida y comportamiento; diversidad cultural; y comparación del sistema de salud y enfermería entre Brasil y Australia. Se hizo evidente que la adaptación de los entrevistados en Australia se vio obstaculizada por el idioma. La poca participación del programa Ciencia sin Fronteras se identificó durante el proceso de adaptación de los estudiantes de intercambio en el país de destino. Las percepciones mostraron que hubo comparaciones entre diferentes culturas durante el período de intercambio, lo que permitió reflexionar sobre el contexto multicultural vivido, reforzando su potencial de formación profesional y humana. **Conclusión:** La experiencia con el intercambio representó un hito transformador, con impactos positivos en la vida personal y la formación profesional como enfermero.

Palabras clave: Internacionalidad; Bachillerato en Enfermería; Educación en Enfermería; Enfermería; Intercambio Educacional Internacional.

Ariane Sabina Stieven¹

 [0000-0002-8082-9067](tel:0000-0002-8082-9067)

Eleine Maestri¹

 [0000-0002-0409-5102](tel:0000-0002-0409-5102)

Jane Kelly Oliveira Friestino¹

 [0000-0002-5432-9560](tel:0000-0002-5432-9560)

Graciela Soares Fonsêca¹

 [0000-0001-9506-0409](tel:0000-0001-9506-0409)

Claudio Claudino Silva Filho¹

 [0000-0002-5961-9815](tel:0000-0002-5961-9815)

¹Federal University of Fronteira Sul, Brasil

Corresponding author:

Ariane Sabina Stieven

E-mail: ariane.stieven@gmail.com

How to cite this article:

Stieven AS, Maestri E, Friestino JKO, et al. Internationalization and adaptation of undergraduate/graduate students of the nursing course in international academic mobility. Revista de Enfermagem do Centro-Oeste Mineiro. 2021;11:e4178. [Access _____]; Available in: _____. DOI: <http://doi.org/10.19175/recom.v11i0.4178>

INTRODUCTION

With globalization, academic life and the world of work have become increasingly interconnected, demanding professionals with the knowledge and capacity to keep up with the constant changes and technological development. The merely physical strength started to be demanded together with other knowledge, in a process of intellectual and quality valorization of the formative itineraries, as a consequence of a differentiated and complete formation. Thus, the importance and the need to leave the traditional behind and get to know new cultures, realities, and education has been realized⁽¹⁾.

In common sense, the accomplishment of an exchange program refers to the possibilities of higher remuneration after graduating, but many times, the potential of the exchange is not pointed out in providing life experiences with cultural diversities, personal and professional growth, which will contribute to the formation of the professional, also representing an opportunity to get to know new cultures, political systems, and social organizations, making it possible to learn, improve and/or get to know the linguistic variants of a new language⁽²⁾.

From a Scandinavian perspective, nursing courses do not adequately prepare nursing professionals for their practice and the needs of patients. It is therefore recommended that courses prepare students to become culturally sensitive in order to care for patients from different cultural backgrounds⁽³⁾.

The term multiculturalism was first described in 1971, in Canada, and was used to defend its political proposal regarding tolerant coexistence among the different ethnic groups present in the Canadian territory⁽⁴⁾. Then came the term interculturalism, which appeared from an opportunity left by multiculturalism, which aimed to overcome the horizon of tolerance and cultural inequalities and the changes in cultures when they undergo interaction processes⁽⁵⁾.

One must consider the differences between multiculturalism and interculturalism⁽⁶⁾, since multiculturalism refers to the fact that there are several cultures within the same society, while interculturalism refers to the interaction and communication among these different cultures and not just an idea of having different cultures in the same place.

From this perspective, the globalization of healthcare requires more than simple listening, demanding that nurses practice in multicultural environments with culturally necessary skills and competencies. Proposals that introduce nursing course academics to international experiences are recognized as facilitative tools for the development of cultural sensitivity and competencies⁽⁷⁾.

Accordingly, educational policies that consider multicultural citizenship in educational institutions, both in universities and schools, become a differential for professional training. They can foster plurality and intercultural dialogue, based on the principles of inclusion of diversities and coexistence, such as justice, solidarity, mutual respect and tolerance among human beings in the contemporary reality, at a regional and global level⁽⁸⁾.

Seeking to produce the advancement and internationalization of science and technology, the Brazilian government created the Science without Borders (CsF, as per its Portuguese acronym) program in 2011 to improve Brazilian competitiveness through international exchanges and mobility by sending Brazilian researchers and academics to study at institutions of excellence abroad. The program offered several types of scholarships, among them, the sandwich degree, the type reported in this study. Currently, this type of scholarship is extinct⁽⁹⁾.

Exchange experiences are relevant because they provide benefits beyond academic learning, such as self-confidence, maturation, psychological development, independence, ability to relate to others, and, above all, feeling like a citizen of the world. In order for this to happen, one needs patience, the ability to face unforeseen events, to live far from family and friends, to adapt to the climate, new cultures, habits, and values⁽²⁾.

Despite several advances in nursing education in recent years, the Brazilian training itineraries of this category are still reported as considerably technician and with fragmented content, that is, undergraduate nursing courses remain distant and disconnected from the reality and complexity of the health-disease process and the Brazilian Unified Health System (SUS, as per its Portuguese acronym). To face this situation, exchange and intercultural experiences can contribute to the formation of nurses who are

effectively reflexive, critical, and creative, sensitive to the plurality of people and cultures with whom they will coexist in the SUS.

In this context, the following question arose: how was the adaptation process and the repercussions of internationalization, through the CsF Program, for the professional training of nurses?

Thus, the relevance of this study lies in the singularities attributed by undergraduate nursing students and graduates to the effects of exchange and interculturality experienced through the CsF Program in their academic, cultural and personal development, contributing to provide a return to Brazilian society regarding the investments in scholars benefited by the program. Thus, the object of study emerges: the adaptation process and the repercussions of internationalization on the professional education of nurses.

The objective of this study was to understand the adaptation process and the repercussions of internationalization for undergraduate and graduate students of the nursing course who have experienced international academic mobility.

METHOD

This is a descriptive exploratory study with a qualitative approach. The participants were four undergraduate and four graduate students of nursing courses from Higher Education Institutions (HEIs) from different locations in Brazil, former exchange students of the CsF Program in Australia.

The inclusion criteria were: 1) to be an undergraduate or graduate student in a nursing course at any Brazilian HEI; 2) to have done an international exchange program during the nursing undergraduate course through the CsF program in Australia; 3) to be over 18 years old. There were no exclusion criteria.

The selection of participants for the collection of information was done by Snowball Sampling⁽¹⁰⁾. The researchers identified two initial subjects, so that they could indicate the next possible participants who duly met the inclusion criteria cited above, to be the first interviewees. Thus, these undergraduate students indicated other undergraduate students who also fit the inclusion criteria, and so on until the study reached the number of eight participants, at

which point data saturation took place. None of the nominees refused to participate in the study. The contacts were made through Information and Communication Technologies (ICT), such as e-mail and social networks.

The interviews lasted an average of 50 minutes, were conducted via videoconference application, in a private, silent environment, and were fully recorded with a cell phone, with the participants' knowledge and allowing them to send the recording at any time, if requested, and with the authorization by signing the Free and Informed Consent Form (FICF).

The interviews were semi-structured and conducted by two of the researchers, containing two parts: a) characterization of the research participants, and b) aspects related to the adaptation process, including living with other cultures, habits relevant to health care, and reflections of the exchange for their professional training. Data collection occurred between October and November 2016. In the interview form there were questions about sociodemographic characteristics, such as: gender, color or race, religion, marital status, monthly family income, HEI where she studies or has studied in Brazil, the period she was studying in Brazil before the beginning of the exchange program, the period she was studying in Brazil at the time of the interview, the city where she went abroad, the HEI where she went abroad, and the duration of the exchange program. Questions about adaptation and the repercussions of internationalization on training were: How was the adaptation process in Australia? During the exchange did you meet and interact with people from other cultures? Which ones? How was the coexistence with people from cultures different from yours? Did you notice any differences in habits relevant to health care between the Brazilian population and the other cultures with which you had contact? Which ones? For you, what were the main consequences of the exchange for your personal development? What were the main consequences of the exchange for your professional development? What were the main consequences of the exchange for your cultural formation?

For data analysis, all interviews were transcribed in their entirety, organized, integrated, and interpreted, in order to

understand the adaptation process and the repercussions of internationalization on the education of undergraduate nursing students, through the analysis of the Collective Subject Discourse (CSD)⁽¹¹⁾.

The analysis proposes the use of four methodological figures for the construction of the DSCs: key expressions (KE), central ideas (CI), anchoring (AC) and the CSD⁽¹¹⁾. The KEs are parts, excerpts or transcriptions of discourses that reveal the essence of the content of a given subject that makes up the discourse. They should be highlighted by the researcher, revealing the essence of the statement. The CI are linguistic expressions that more precisely describe the theme of each homogeneous set of the KE and that will form the CSD. The AC is the expression of a theory, ideology or religious belief adopted by the author of the discourse and that is embedded in the discourse as if it were any statement.

Initially, to extract the KE from each discourse, the material was carefully read, highlighting the most relevant parts, the essence of the thought of each interviewee, as presented in her discourse. For each KE, a CI was extracted. The next step was to group similar CI and, for each of these groupings, categories were named.

The research was conducted, after approval by the Research Ethics Committee (CAAE: 59749516.6.0000.5564), opinion nº 1.761.157/2016. All participants signed the Free and Informed Consent Form and were guaranteed anonymity in the disclosure of the findings.

RESULTS

In the data analysis, five CSDs emerged: Adaptation in Australia; Student support; Lifestyles and behavior; Cultural diversity; and Comparison of the health system and nursing between Brazil and Australia.

CSD 1 Adaptation in Australia

“The first month for me was the most difficult because I didn’t know anything about the language, my English was very bad. The basic English that I had didn’t help me much, it was good for not going hungry, thirsty, for knowing where to go; but, in a long conversation or even at the university it gave me some setbacks. I didn’t expect the English to be as accent-laden as they were. I had a very hard time understanding. I was afraid that I wouldn’t understand the people

and wouldn’t know how to deal with them. It was more this basic difficulty of the language, the question of conversation and communication”.

CSD 2 Student support

“It was very hard for me, I think that Brazil should give us more support, because when we arrive in another country we have no support, they (the program) don’t give us any preparation. But this ended up being very good for me, for my life, I matured a lot. However, when I came back, I was very upset, the shock of reality is very big. I didn’t want to talk to anyone, I just wanted to sleep, stay in my room, I didn’t have the patience to talk to anyone, I had a hard time when I came back”.

CSD 3 Lifestyles and behavior

“Australians do a lot more sport than us, they like the outdoors, they feel free, and this makes them have a different health. I thought it was very strange that they walk barefoot. Australians have the habit of not throwing toilet paper in the garbage, they throw it in the toilet, so, in the beginning, this was very difficult for me to adapt and, later, for me to readapt here, it was even more difficult. They have good eating habits, at the university we had several microwaves for people to heat their food. When I came back, I started to repeat the same way I learned there, people said: you are different, you are nicer to the people, always thank them, always ask for permission. Regarding crossing the crosswalk, there it was mandatory to cross the crosswalk, now I always cross the crosswalk. As far as queuing is concerned, they are very polite, like, for example, to get on the bus. As for the practice of brushing our teeth after meals, I think that only we do it, in Australia they don’t do it. The question of washing the dishes, picking up and scrubbing, scrubbing toilets, pouring water all over, these things don’t happen there. The Chinese have the habit of sometimes burping in front of others, these things are normal for them, but, for us, this caused strangeness”.

CSD 4 Cultural diversity

A very rich part of the exchange is to have contact with people, and since the exchange country was a multicultural place, I lived with Chinese, French, Canadians, Americans, New Zealanders, people

from Saudi Arabia, Iraq, Iran, Macedonia, Lebanon, Japan, and Brazil itself. It was much more open to positive discussions than to conflicts. We tried each other's food, they helped me a lot with the "English that I didn't know how to speak. Sometimes the country is important in the cultural load it brings, but when you get along with someone, you find things so similar, we always used to joke, because the Arabs looked like Brazilians and the Brazilians were almost turning into Arabs. The CsF is magical, because we created an incredible community of Brazilians from everywhere, sometimes we would complain about expressions in English, only Brazilians would come with expressions that were like in English and we would say: how come? What are you talking about? So it was really cool, now I have friends from all over Brazil. We spoke a lot: our Brazilian Portuguese was incredible, I loved this cultural richness of ours. However, there was a disagreement in relation to an outsider, the people from the Middle East have a little bit of a barrier with the fact that Brazilian women have an active voice, but no disrespect. We had problems with Brazilians, they were not at all receptive to us, it was as if we were coming to take something from them, this is very strange. For me it was very productive, it made me grow a lot as a person. I think that if I left here in Rio Grande do Sul and went to do an exchange program in Bahia, for example, it would be practically the same. But I don't think this diminishes or makes it less important to go abroad".

CSD 5 Comparison of the health system and nursing between Brazil and Australia

"I had access as a patient, we had health insurance, so I was seen for free because of the insurance. I was treated very well, it is as if I had passed through an improved SUS. The health system in Australia is a mixed system, public and private, where the server pays and gets back everything he paid for, here in Brazil we pay, but not always what we pay for will come with quality. Who paid, when I needed health care there, was the government here, as if it were SUS. So even outside, the SUS was worth it to me, outside, we see how valuable is the service that we have here, that sometimes we complain about with our bellies full. I also talked to one of the professors at the College and she said that health care there is

free, it is already included in the taxes, however, they also have interns inside the hospital, so people can pay as if it were a health insurance to be assisted by trained professionals. I don't know if they have CHW, I don't know if they have a home visit, if they have a control, I know that there they work a lot with homecare, I don't know what their primary care is like, they don't have a FHS, what they have are these Medical Centers, which have doctors from all specialties and, in some cases, you can do exams there too. There in the ICU area that she (the nurse) is responsible for, there is a certain amount of patients for her, it's not like here that is overcrowded, there the doctor respects you, during the consultation he looks at you from head to toe, he really does the complete anamnesis, it's not like here that just looks at you and gives you the medication. Humanization is something that I could see in the hospital when I was treated. I think that SUS still fails a lot, SUS is very beautiful on paper, now, to what extent is it really universal? To what extent does it have equality, equity? For me, what we can do as professionals is to fight for the SUS so that it does not end, so that the amount of financing for the SUS does not decrease, I think that for this we have to be activists. SUS is there and we need SUS. I think that nursing has a lot of responsibility regarding SUS and we have the responsibility to make other professionals embrace the cause as well, we can't do it alone, we need everyone engaged".

DISCUSSION

It can be seen in CSD 1 that the adaptation of the interviewees in Australia was made difficult by the language, since they had no previous knowledge of the language or expected English with an accent and slang never heard before.

Being inserted in a new country, with a new culture and a new reality is remarkable; those who undergo these experiences understand the pleasure and the challenges they generate in their lives. However, when these experiences take place in a country where the language is not the same as the one of origin and there is no previous knowledge, in the beginning, the adaptation process can be much more difficult.

Mastery of the language is an essential factor, because it is necessary for the student to be able to follow classes, carry out research and

work and communicate with teachers and classmates⁽¹²⁾. In addition, it can lead to further complications, since understanding and command of the language are necessary for the student's insertion both in the academic world and in social interaction⁽¹³⁾. This "complication" can also occur with people going to countries whose first language is the same as their own, but dialects and slang can cause setbacks, causing exchange students to stay longer only with people from their own community.

A factor that must be taken into consideration is the reality of the Brazilian public education system that offers only two foreign languages, English and Spanish, which made it difficult to select students with linguistic quality to fill the scholarship positions available abroad in the CsF program, since it was partnered with several countries with different languages⁽¹⁴⁾.

In 2016, the Brazilian law that provided for the teaching of the Spanish language in public schools was revoked⁽¹⁵⁾, denoting deficiencies in language policies that subsidized the preparation of potential scholars and international investments. In a survey conducted in Brazil, white men, with higher incomes and coming from private schools, were observed to have a greater command of the English language⁽¹⁶⁾. In addition, students who entered undergraduate programs through quotas had more difficulties in the language.

The economic conditions, school background, gender and race of the scholarship recipients had an impact on their level of proficiency in English. Thus, by requiring proficiency as a selection criterion for the CsF program and not considering the quality of English teaching offered in public schools, the CsF excluded students, especially poor and black ones, which reinforces the importance of Brazil considering social and racial inequalities in educational policies in the XXI century⁽¹⁷⁾. This social and racial exclusion can also harm the country's competitiveness and productivity, since it makes it difficult for talented individuals to obtain more knowledge.

The authors also reinforce the importance of knowledge of the English language for the international academic mobility of Brazilian undergraduate students. They highlight the difficulty that the CsF program had during its

lifetime in meeting its goal of 101 thousand international scholarships, due to the low proficiency of students in English. For this reason, the program had to be adapted to offer foreign language studies in the exchange destination country⁽¹⁶⁾.

Programs like CsF are relevant, to help in the education of undergraduate students and in the development of the country, however, more than programs that provide opportunities to live abroad, it is necessary to change national policies regarding basic education, training people prepared for an interaction and communication with individuals and enabling knowledge of scientific and technological innovations from different countries in the future.

The changes mentioned above concern positive changes, directed towards the progress of education and Brazil as a whole, contrary to what we found with the repeal of the law that guaranteed the teaching of the Spanish language in public schools⁽¹⁵⁾.

In general, in CSD 2, it was realized that the CsF program contributed little to the exchange students' adaptation process. The participants of the study allege a lack of support, such as preparation prior to the trip, a welcome in the destination country, an interlocutor during the exchange with the two universities, and an evaluative follow-up when the students return to Brazil.

Before leaving and upon arrival in the destination country, exchange students are overwhelmed with the idea of getting to know new cultures and places. Involved with the preparation of documents, they often don't stop to think about what life will be like after this big change.

The contact with the Brazilian government, organizers of the CsF program in Brazil, occurred only to request and send documents before and after the end of the exchange. Soon after starting the exchange period, as time goes by, some challenges start to appear and can lead to a physical and mental imbalance, due to several factors, and there was no contact for requesting help, in this sense, directly with representatives of the government/CsF program.

The exchange student had to learn and overcome many difficulties by himself, a factor that could be alleviated and facilitated if there

was more support from the government and the HEI abroad.

It is clear how important it is for programs to provide assistance to students before they leave for their destination country, offering basic information about the region, the city, and the university, and helping through services their transition to the new context ⁽¹²⁾.

Learning to solve your own problems is an extremely important factor acquired during the experience abroad and the exchange student will carry with him/her for life, but since the government is responsible for students, it could offer them psychosocial support, in addition to financial aid.

Therefore, the program and the institutions should have worked together, one complementing the other, having communication, however, what was noticed is that each one did its part and referred to the other sector. When this happened, the previous one no longer had any responsibility with the student.

In CSD 3, we can observe the comparisons that the students reported about the different habits, from different cultures, during the exchange period, which also led to some new habits acquired abroad.

It is realized that the interviewees have the realization that the Australian population is used to doing more sports and physical exercises than the Brazilian population, with the concern of making Australia a more active society, aiming at health promotion and disease prevention, especially cardiovascular diseases. The Australian government has as its action the periodic publication of a mapping of policies, programs and measures of prevalence, at state, territory and federal levels, relating to physical exercise, as well as presenting evidence of its benefits to the population, economy and safety, to motivate the creation of public policies in this area ⁽¹⁸⁾.

Studies show that the Brazilian government is also concerned about the population getting physical exercise. From SUS, it is possible to implement physical activity routines in the communities. The National Health Promotion Policy, established in 2006, prioritizes the encouragement of body practices/physical activity and cites the importance of public spaces being valued and used for coexistence, health production, social inclusion and also enables the

population to enjoy the right to leisure, considering the epidemiological relevance of the physical activity theme ⁽¹⁹⁾.

Accordingly, based on the findings in CSD 3, we can also mention the importance of oral hygiene care for the maintenance of health ⁽²⁰⁾, which helps to understand the habits of the undergraduate students, during the exchange, when they drew the attention of foreign colleagues, such as Australians and Chinese, by performing oral hygiene after lunch.

The change in habits is also a reflection of the exchange, and it can occur in many ways, from respect, appreciation, and a broader view of the environment, to crossing the street at the crosswalk, to becoming kinder to others, to habitually using the expression thank you, or asking for permission. In Australia, there are no wastebaskets in the bathrooms, except in the women's, all toilet paper must be thrown into the toilet. The change in some of these factors is imperceptible to individuals, because when they are inserted into another culture, there are changes in their own culture involuntarily, and most of the time they are positive, such as being kinder, seeing things in different ways, trying to analyze the whole of a situation and not making judgments in advance.

The politeness in communicative actions and acquired by the interviewees generated reflections about the society in which we are inserted and how we communicate. Linguistic politeness is found in the forms of behavior that conduct communicative and social interactions, and can be used to maintain interpersonal relationships, that is, with the purpose of not generating conflicts. Traditionally, politeness is related to etiquette or good manners, and is considered a socially well-regarded quality ⁽²¹⁾.

During interactions among individuals belonging to different groups, it is prudent that behaviors are developed by each member that enable communication, coexistence, and relationships without generating conflicts. These behaviors are seen as rituals that aim to protect the individual and the other while also ensuring the maintenance of relationships and developing a sense of mutual trust. Interactions between individuals belonging to different groups should consider politeness and also courtesy as necessary rituals for interpersonal relations and

daily life, considered essential for the development of sociability⁽²²⁾.

For the interviewees, expressions such as thank you very much, please, excuse me, and even the acquired vision of the importance of using the crosswalk, instead of not using it, are problematized issues, which, although they seem simple things, have added value in their lives and helped them in interpersonal relationships, making its use a habit.

In CSD 4, the consensus was the importance of the relationship between people with different cultures experienced in the exchange program, since Australia is a multicultural place. This experience made the research participants live with people from different places in the world, as well as different places in Brazil.

For theorist Madeleine Leininger, nursing is fundamentally a profession of cross-cultural and intercultural care, which aims at centered care for people, respecting cultural values and lifestyles. Thus, the nurse recognizes the individual as a cultural being, who sees the world in a particular way, as a result of his/her beliefs, values, customs and cultural practices⁽²³⁾.

Leininger's theory portrays that the state of health, well-being or disease of individuals are influenced by their worldview, social and cultural structures. For nurses, knowledge of culture, reality, and the determinants of health and disease of individuals are essential, factors that become tools for the professional to plan and make appropriate decisions regarding the care to be performed⁽²³⁾.

For the interviewees, living together made it possible for them to get to know and be a part of different customs, cuisines and beliefs. There was also the opportunity to get to know Brazil better, and the different cultures existing in their own country that, as reported above, the exchange students could not imagine so much diversity in their own country, and they also report on the expressions used by Brazilians that they had never heard before, even compared to the English expressions.

In CSD 4, besides the realized differences between individuals from the same country, there was also the knowledge of similarities between people from different countries, some previously judged as very distinct, such as the Middle Eastern

countries. One can notice that the differences existed, but, above all, there was respect, observed when cited the occurrence of disagreement of Arabs who did not like the posture of Brazilian women because they had active voice, especially in the classroom, showing and giving to understand the idea of inferiority in which women are positioned in these countries.

Internationally, one of the biggest political conflicts concerns women and the notion of the universality of human rights. In the news, the image of Muslim women as submissive and victims of violence is exposed. Yet women all over the world are victims of sexist discrimination, regardless of religion. It is too hasty to conclude that it is a religion, in this case Islam, that is the cause of the facts that make women victims, and these views are also prejudiced. Unfortunately, in history, all over the world, religious, racial and gender intolerance persists, which in many cases results in destructive, fanatical and racist actions⁽²⁴⁾.

Muslim women are active in Arab feminist movements and in the fight for their rights. Therefore, a dialogue with a multicultural approach is necessary for the protection of Muslim women's human rights, where there is respect for their religion and culture, which is efficient so that they can have their fundamental rights guaranteed⁽²⁴⁾.

In counterpoint to the fact of disagreement with people from different cultures and religions, reports showed that there were disagreements among Brazilians, mainly in the lack of receptivity to those who were arriving later at the University.

Therefore, differences will always exist, between people of the same country or not, whether they are cultural, customs, dialects, languages, preconceptions. And, while some do not accept certain situations, others live with them and relate to them very well. But the main thing is that respect prevails, it is fundamental for a good coexistence, especially when it occurs in another country where those people become your family.

Finally, CSD 5 shows that, by being inserted in the reality of the place where the exchange took place, there was the possibility of getting to know and compare the health systems, the infrastructure of health services, as well as the performance and valuation of nurses, which is

mentioned for its value. The services were reported as offering better infrastructure for better quality care.

From the discourses, it can be seen that the exchange program, during graduation, provides an opportunity to expand and differentiate the views on nursing, because the experiences allow a greater understanding of health care in a reality that is different from the usual, in which diverse cultures and customs are inserted. In addition, a factor that draws attention is the humanized care that was observed by the former exchange students.

In Brazil, there are policies for humanization to be practiced, especially the National Humanization Policy (PNH, as per its Portuguese acronym)⁽²⁵⁾, which is based on the practices considered relational technologies, stimulating the guarantee of access and the integrity of care at the different levels of care. Still, the Unified Health System, in its most diverse areas, experiences complex realities that show weaknesses in the implementation of the NHP. In Australia, although there does not seem to be a specific policy like ours, according to reports, humanization is practiced most of the time.

In Brazil, we have a long way to go, full of challenges. It is necessary that there be a change in the concept of humanization, often seen only as sympathy or good will to serve (well) the individual who needs care. It is also essential that managers understand that humanization will occur in fact, after commitment and confrontation of the precarious working conditions, of the lack of appreciation of the professional, among other issues that make us not romanticize or blame only the SUS teams and professionals for the dehumanization still present in the daily life of health services⁽²⁵⁾.

As for comparisons between health systems, Australia's was reported as "an improved SUS", but, as for popular participation in the population's health decisions, do Australians have the right to interfere in decision making? How does social control occur in the regions, their needs regarding health? There was no knowledge on the part of the participants as to the existence of health councils, Community Health Workers (CHW), Family Health Centers (FHC), much less home visits, factors that are guaranteed by law as a right of all Brazilians.

The Brazilian legislation is internationally praised, since it guarantees health as a right for all and a duty of the state. Its policies and programs are unified, via the Ministry of Health, i.e., throughout the Brazilian territory there are the same guidelines, but always respecting the autonomy of the regional and municipal health networks. In Australia, each state has its specific legislation, for the organization and operation of hospitals, the state governments are responsible for the regulation of sectors, such as the sale and supply of alcoholic beverages and tobacco, that is, each state decides how the regulation of these products will be, and there may be different regulations in the same country. In Brazil, the public health system almost always pays the full costs for all Brazilians, including free care for foreigners on Brazilian soil. In Australia, however, the beneficiaries are eligible, from a table (Medicare Benefits Schedule – MBS), and these are only Australians. It is worth mentioning that for immigrants and exchange students, health insurance is required before entering Australia, so that the individual is protected by some means, not needing to use public services and funding.

Given the above, we can see that Brazil has a health system of international reference, however, its practice still needs improvement. We live in a difficult moment, with new governmental proposals that cause, according to authors, negative impacts on the health of the Brazilian and foreign population that receives care in our country, through SUS. Nursing, according to reports, plays a fundamental role in SUS. We must fight for it to get better every day, so that it does not end, and so that the government financing directed to it is not diminished.

Finally, there is mention of nursing in the discourse, in a reported autonomy and comfortable teamwork situation in Australia, if compared to Brazil. However, the examples and mentions refer only to situations of care or direct patient care in Australia, which makes us infer that Brazilian nursing may be advancing substantially, or gaining greater visibility, in areas of management and management, with notorious protagonism for the consolidation of the SUS. The only question is whether we are concomitantly strengthening our care practice or direct care to the users of our health system, considering that nursing has equally important dimensions that

need to be kept in balance: care, management, education, research, and politics (among others).

CONCLUSION

The study presented some limitations. Initially, the contact with the former exchange students was made with an invitation by e-mail available in the lattes curriculum of each one, with no response. Thus, the strategy needed to be modified. When starting the new methodology of selecting participants for the collection of information, there was saturation of individuals earlier than expected. An important limitation of the exchange itself, which had repercussions in the discourses, was the centrality that exchange students attribute to personal and cultural experiences, minimizing or overshadowing the academic and professional ones, which has repercussions in the content of the reports and discourses presented in the research, and/or reflect a still limited ability to articulate these dimensions of the experience, which cannot/could not be disconnected throughout the exchange.

The adaptation process of nursing students during the international exchange was made more difficult by their little knowledge or even lack of knowledge of the language when they started their studies in Australia. As seen, this is due to the deficiencies in teaching different languages in Brazilian basic and elementary education, especially English, knowledge that can influence future possibilities and opportunities, both with regard to simple verbal communication with people of different nationalities, and international studies for technical and scientific development of the country.

The discourses also pointed out the lack of support from the CsF/Brazilian Government Program, such as preparation prior to the trip, reception and follow-up in the destination country and after returning to Brazil. The cultural diversity to which they were exposed made them rethink about some attitudes reflecting on behavioral change.

For the interviewees, living with people from different cultures contributed to their professional and personal development. In nursing, professionals are in daily contact with people from different cultures, even if they are from the same place, each one presents a belief,

habit, ideology, value, and custom that must be respected and taken into consideration, for the planning and performance of the necessary care, respecting their individualities.

The study presents, for nursing education, paths that, based on the exchange experience, propose didactic and pedagogical strategies for the insertion of interculturality in undergraduate curricula and also the appreciation of the cultural dimension in processes of continuing education for the health and nursing team, contributing to the humanization of care and consolidation of the SUS.

REFERENCES

- 1 - Guedes GF, Cavalcante IMS, Püschel VAA. International academic mobility: The experience of undergraduate nursing students. *Rev Esc Enferm USP* 2018;52:1-8. DOI: [10.1590/s1980-220x2017039403358](https://doi.org/10.1590/s1980-220x2017039403358)
- 2 - Pessoni RAB. Internacionalização do ensino superior. *International Studies on Law and Education* 2018 [cited in 10 jun 2021]; 28:93-110. Available: <http://www.hottopos.com/isle28/93-110Rose.pdf>
- 3 - Gümüşsoy S, Dal NA, Beydağ KD, Toker E. Intercultural awareness, communication, and empathy skills in nurses and midwives working in provinces with mass migration. *Perspect Psychiatr Care* 2021;57(2):426-32. DOI: [10.1111/ppc.12595](https://doi.org/10.1111/ppc.12595)
- 4 - Duquette AB. Multiculturalismo canadiense y arte colombiano en Montreal: Desarmando estereotipos nacionales con Fritta Caro. *Cultura Representaciones Soc.* 2019;13(26):129-60. DOI: [10.28965/2019-26-06](https://doi.org/10.28965/2019-26-06)
- 5 - González JE. Multiculturalismo e interculturalidad en las Américas. Canadá, México, Guatemala, Colombia, Bolivia, Brasil, Uruguay. Bogotá: Cátedra Unesco; 2019 [cited in 12 mar 2021]. Available: <https://www.dialogointercultural.co/assets/multiculturalismo-pdf.pdf>
- 6 - Brasil JA, Cabecinhas R. Intercultural dialogue and intergroup relations in Europe: Contributions of Cultural Studies and Social Psychology. *Comunicação Soc.* 2019:105-18. DOI: [10.17231/comsoc.0\(2019\).3063](https://doi.org/10.17231/comsoc.0(2019).3063)

- 7 - Ferrillo H. Measuring professional nursing value development in students participating in international service learning: A quasi-experimental study. *Nurse Educ Today* 2020;84:104221. DOI: [10.1016/j.nedt.2019.104221](https://doi.org/10.1016/j.nedt.2019.104221)
- 8 - Andrade M. Movimentos sociais, educação e diferenças: Definições analíticas e equivalentes práticos. *Currículo sem Fronteiras* 2015 [cited 12 mar 2021]; 15(3):816-31. Available: <https://www.curriculosemfronteiras.org/vol15iss3/articles/andrade.pdf>
- 9 - Brasil. Decreto nº 7.642, de 13 de dezembro de 2011. Institui o Programa Ciência sem Fronteiras. *Diário Oficial da União* 2011;Seção 1:7.
- 10 - Costa BRL. Bola de Neve Virtual: O uso das redes sociais virtuais no processo de coleta de dados de uma pesquisa científica. *RIGS* 2018;7(1): 15-23. DOI: [10.9771/23172428rigs.v7i1.24649](https://doi.org/10.9771/23172428rigs.v7i1.24649)
- 11 - Lefrèvre F, Lefèvre AMC. O discurso do sujeito coletivo: Um novo enfoque em pesquisa qualitativa desdobramentos. *Caxias do Sul: EDUCS*; 2003.
- 12 - Kroetz C, Pezarico G, Peloso FC. A internacionalização da educação superior e o programa de estudantes - convênio de pós-graduação: Caracterizações preliminares. *Rev Ciênc Hum Educ*. 2019 [cited 12 mar 2021]; 20(2):109-28. Available: <http://revistas.fw.uri.br/index.php/revistadech/article/view/3324/pdf>
- 13 - Souza VS. Um olhar dialógico para a mobilidade acadêmica internacional de estudantes maranhenses. *Rev Letras Raras* 2018;7(1):264-86. DOI: [10.35572/rlr.v7i1.961](https://doi.org/10.35572/rlr.v7i1.961)
- 14 - Moura ML, Doula SM. Ciência ou turismo sem fronteiras? Uma avaliação do programa Ciência sem Fronteiras por alunos beneficiários da Universidade Federal de Viçosa. *Rev UNIABEU* 2019 [citado em 12 mar 2021]; 12(30):116-33. Disponível em: <https://revista.uniabeu.edu.br/index.php/RU/article/view/3339/pdf>
- 15 - Brasil. Lei nº 11.161, de 5 de agosto de 2005. Dispõe sobre o ensino da língua espanhola. Revogado pela Medida Provisória nº 746, de 2016. *Diário Oficial da União* 2005.
- 16 - Borges RA, Garcia-Filice RC. A língua inglesa no Programa Ciência sem Fronteiras: Paradoxos na política de internacionalização. *Interfaces* 2016;16(1):72-101. DOI: [10.15210/interfaces.v16i1.7516](https://doi.org/10.15210/interfaces.v16i1.7516)
- 17 - Fagundes C, Luce MB, Silveira PD. A qualidade da mobilidade de estudantes de graduação no “Ciências sem Fronteiras”. *Ensaio: Aval Pol Públ Educ*. 2019;27(105):904-27. DOI: [10.1590/s0104-40362019002701446](https://doi.org/10.1590/s0104-40362019002701446)
- 18 - Ding M, Nau T, Bauman A, Bellew B. Co-benefits of physical activity promotion – health, social, economic, environmental and other societal gains from building a more active nation. In: Bellew B, Nau T, Smith B, Bauman A (Eds). *Getting Australia Active III. A systems approach to physical activity for policy makers*. Australia: Sax Institute; 2020. p. 7-23.
- 19 - Brasil. Ministério da Saúde. Avaliação de efetividade de programas de educação física no Brasil. Brasília: Ministério da Saúde; 2013 [cited 12 mar 2021]. Available: http://bvsmms.saude.gov.br/bvs/publicacoes/avaliacao_efetividade_programas_atividade_fisica.pdf
- 20 - Zaffalon GM, Raimundo ISG, Alonso RCB, Magalhães JCA, Martins DP, Sakiyama KI. Avaliação da efetividade da instrução de higiene bucal em alunos do primeiro ano do curso de graduação em odontologia da Universidade Metropolitana de Santos. *Braz J Develop*. 2020;6(8):58719-29. DOI: [10.34117/bjdv6n8-327](https://doi.org/10.34117/bjdv6n8-327)
- 21 - Paiva GMF. Os (des)encontros entre a polidez linguística e a comunicação não violenta (CNV). *Soletras* 2020;39:101-19. DOI: [10.12957/soletras.2020.46757](https://doi.org/10.12957/soletras.2020.46757)
- 22 - Borges JWP, Moreira TMM, Menezes AVB, et al. Compreensão da relação interpessoal enfermeiro-paciente em uma unidade de atenção primária fundamentada em Imogene King. *Rev Enferm Cent-Oeste Min*. 2019;9:e3011. DOI: [10.19175/recom.v9i0.3011](https://doi.org/10.19175/recom.v9i0.3011)
- 23 - Fontana RT. A interculturalidade na formação dos profissionais de enfermagem. *Contexto Educ*. 2019; 4(109):36-51. DOI: [10.21527/2179-1309.2019.109.36-51](https://doi.org/10.21527/2179-1309.2019.109.36-51)
- 24 - Marinucci R. Mulheres, migrantes e muçulmanas. *Percursos de discriminação e*

empoderamento. In: Nogales AM, Botega T. (Orgs). Políticas migratórias e paradoxos da globalização. Porto Alegre: EdiPUCS; 2015. p. 189-207.

25 - Ferreira LR, Artmann E. Discursos sobre humanização: Profissionais e usuários em uma instituição complexa de saúde. Ciênc Saúde Colet. 2018;23(5):1437-50. DOI: [10.1590/1413-81232018235.14162016](https://doi.org/10.1590/1413-81232018235.14162016)

Responsibe Editors:

Patrícia Pinto Braga

Angélica Mônica Andrade

Note: This article is a product of the final course monographs entitled: “Internationalization and interculturality in nursing education: knowledge and challenges for former exchange students from the Science without Borders Program in Australia”, presented for undergraduate Nursing at the Federal University of Fronteira Sul campus Chapecó.

Received in: 30/12/2020

Approved in: 05/07/2021