

Brazil

Journal Entry #1

by Melissa Skibinski

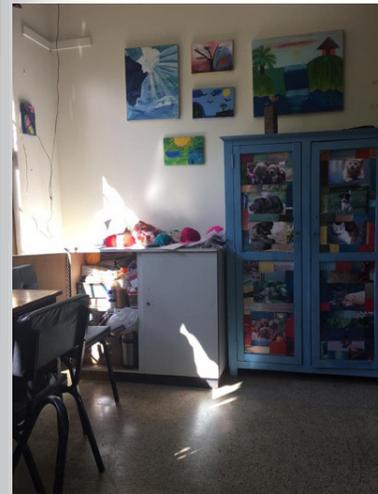
Monday, May 23rd, was our first day back from our long weekend at the Falls. The early morning started with a visit to Londrina's mental health care facility. The group of us met with Professor Adriano as he explained psychiatric care in Brazil and we got to interact with some of the patients. Brazil is working toward moving all psychiatric care into the CAPS program that the professor explained to us.

They would ideally like less inpatient hospitalizations and less patients in the private facilities, so they can move more toward outpatient care like we saw that day. Patients typically come 8-5 and participate in activities, crafts, and group therapy throughout the day. About 45 patients can be seen in a day, but not every person comes every day. They do, however, have six available beds for patients to stay in times of crisis or exacerbations for up to 7 days. The facility was absolutely beautiful. It was very new since it was built in the last few years, and the walls were lined with colorful art and dreamcatchers that the patients made themselves. In the center, there was a nice outdoor area to socialize and catch some sun.

Doctors and nurses did not wear lab coats or uniforms, because they wanted to form a closer, more personal relationship with their patients. I liked this a lot because you could tell the patients trusted the healthcare professionals fully. It was cool to see a mental health care program run so smoothly and to see patients getting care for free through SUS. There is so much stigma in mental health care, and I feel Brazil is making leaps and bounds in this area of medical care while



Center patio at CAPS—
Center for Mental Health Care



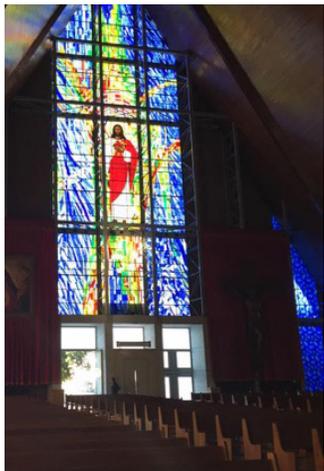
the U.S. often still struggles with stigma and funding problems. Some of us got to interact in the crafts with patients, and a few of us went outside to play ping pong with them as well. All the patients were so eager to talk to us and tell us their stories. I think this experience will help us become more culturally sensitive as we realize that different cultures express mental illness differently. I really liked how they stressed talk therapy, and I think that is something we should keep in mind as nurses. After a quick lunch at the mall, we visited the botanical gardens in the afternoon with Juli. Even though the greenhouses were under construction, it was a beautiful view and our short hike was very scenic. We went on to walk around downtown, tour Londrina's Cathedral, and head to the bus station for some fresh squeezed juice to end our day.



Tuesday, May 24th, was our last day in Londrina. That morning we met with Renata and her two fellows as we had a discussion about her job in Infection Control at the hospital. They have a very excellent paper system for tracking patients that acquire infections and patients that have multi-drug resistant bacteria. Nursing students come in every day during their lunch to help do the paperwork. Drug resistant bacteria is becoming a big problem in the hospital. Three doctors

work in this area and control the antibiotics being prescribed by other doctors. Renata does research and observations with her students regarding staff handwashing and proper cleaning to prevent infection. She sends out monthly reports about her findings and continues to try and educate the staff about the importance of hand hygiene, changing gloves between patients, and decreasing the use of unnecessary catheters. I feel like these efforts are similar to those that we try and make in the U.S. Renata plays a really important role in the hospital, and as a nurse it was good to be reminded how little things like sanitation make a huge difference in patient care.

We also toured the laboratory where they culture bacteria and examine blood samples. It was really exciting to see everyone at work, as this is something we never get to see or do in our clinical experience like the UEL students do. I think it made us more culturally sensitive as we often overlook things like infection control in the U.S because it isn't as prevalent. It is a global issue that everyone must pay attention to, but Brazil has to put extra focus on it due to limited resources and lack of space in the hospital. After



Center patio at CAPS—
Center for Mental Health Care

our meeting and tour, we evaluated the program schedule with some of the UEL professors and discussed our experiences. In the afternoon, we visited Londrina's history museum and learned how this little farming town of what should have been 30,000 grew into the massive 500,000 person city it is today. Its rich history in coffee farming and fertile soil has made it a thriving community in a short 81 years. We genuinely learned a lot from our tour, and loved hearing about the city we had been living in the past two weeks. The rest of the day was left to us and our hosts as most of us relaxed, ate dinner, and started saying our bittersweet goodbyes for the early flight we were taking the next day.



Center patio at CAPS—
Center for Mental Health Care

Journal Entry #2

by Tianna Nicholas

I remember waking up that Tuesday morning in a room that was not mine, but feeling happy to be there. The sun was shining so bright that day, and the view from my host's apartment was to die for! There was one area to the left filled with tall colorful buildings, and another side filled with typical Brazilian houses with balm trees everywhere. I was shocked to walk out of the bedroom to have a huge breakfast laid out for me. My host prepared fresh fruit, yogurt, bread with cheese and turkey and hand brewed coffee. And for dessert, she had a chocolate cake with chocolate frosting. The cake was nothing like I have had from home, but I knew immediately it would be something I would crave for. She later explained to me that this was a typical Brazilian breakfast. My host is a nurse in residency, which is somewhat comparable to our masters nursing degree. And on this morning, she had to leave before I did. However, she left me the sweetest note that I kept.

Later on that day, I went to shadow a nurse on pediatrics. I was ecstatic to find that the person I was following was my beloved host, Louise. She toured me around the facility, and introduced me to all the children and their parents. I was intrigued with not only meeting the kids, but I wanted to know what the reason for their hospital stay was. There was one child that I was instantly drawn to. She was 5 months old, and was being hospitalized for Macrocephaly. The baby was so smiley that I couldn't help but immediately fall in love with her. I quickly found out where she got those traits. Her mom was just as smiley and although we spoke different languages, I could tell she was a very sweet woman. She allowed me to watch her daughter's physical therapy, and even let me stay and play with her. In fact, I would have stayed there all day, but unfortunately I had to leave. I was also intrigued by how the nurse, my host, communicated with the children. There was one child who had his urinary catheter removed, and was not able to be discharged from the hospital until he urinated. The child was crying and in pain due to his urinary retention. I watched how Louise spoke to him at eye level to console him. She spoke to him in Portuguese so I do not know what exactly she said, but I do know she suggested that he relax and try taking a shower. Whatever she did say to him seemed to calm him, and he was able to urinate during the shower. The child was so overwhelmed with happiness that it made me smile. Although I had an amazing experience on the pediatrics unit that day, I don't know if I could handle the heart breaking moments.



The amazing pediatric staff at UEL's hospital

Later that night, my host took me to one of the places I was dying to, the mall. There were about five malls in Londrina, and my plan was to go through all of them. However, I found out quickly that would be very difficult. The first mall I went to was called Cantuaria. This mall was



Londrina is referred to as "Little London". Therefore, these classic red telephone booths can be found throughout the town. This picture is from the Cantuaria mall.

so big that we weren't even able to get through it in three hours! I rejoiced when I realized that on average for every one American dollar I would get about 3.6 Rais (Brazilian dollars). This means, I had plenty to shop with! I left that day very pleased with all my purchases, and optimistic to get through all of the malls before I left Brazil.

On Wednesday I woke up in the same room, and although it had been less than a week, I felt a little sense of home because of how welcoming my host was. Like every other day, I walked out of the room to find my typical Brazilian breakfast and coffee. And her dog, Fredjy, who was curled up in a ball waiting by my door for

me. I have to admit that it took me over half the trip to learn how to pronounce his name. However, he didn't seem to mind. I have dogs at my house in America, so it was very nice to meet this four legged friend. This morning was really nice, because my host was still there. We sat and talked as if we were old friends. She bought me a notebook so that we could write down Portuguese words and phrases, so I could remember. She also had a matching notebook so that we could write

down Portuguese words and phrases, so I could remember. She also had a matching notebook so that we could write English words and phrases for her to learn. I was very pleased to have a host that was not only willing to help me, but wanting to learn more English. It was very easy for me to communicate with her, because she was so good at speaking English. However, I told her I really wanted to learn her language, so we switched to speaking more Portuguese.

This morning we went to visit Sesi, which is an international high school. They explained to us that international in this sense means that they have more classes in English. Talking with the students was great. It was really nice to answer their questions, and be almost a role model for them. Regardless of the country, I think it is very important to communicate and help the students. I am very amazed by the work these students have done. I can't imagine myself at 15 years old knowing another language fluently. I love what Sesi is doing for its students, and I really hope they are able to grow and take in my students as they plan. The other students and I gave them high school students our Facebook, so that they could contact us with any questions. There was one student that has been messaging so that she can practice her English. I am more than happy to help them in any way I can.



Some of us students, and a high school student from SESI

Later on, we with to a local community health center. In Brazil, they have a health care program called Sus. This allows free healthcare for all, because their new constitution declares that healthcare is a right for all Brazilian citizens. This includes anything from needing antibiotics for strep throat to needing heart surgery. This concept was mind blowing for me. It truly is a beautiful system. We toured the community center, but then we unexpectedly were told that we were going on house visits. This day, which I really didn't think much of, ended up being such an influential day for me. The first house

of, ended up being such an influential day for me. The first house we visited was of a 3-year-old girl with Harlequin ichthyosis. This is a severe genetic disease that causes deep fissures in the skin. When we came into her house, she immediately greeted us with a big smile and blew kisses to us. For such a little girl, I could tell she had such a big heart. The nurse told us that she had many complications after birth, and that she was very lucky to be alive. I was very saddened to find out that people with this condition are not often expected to live past 20 years old due to their increased risk of infections. The second house visit was of an 11-year-old boy with Cerebral Palsy. During delivery, his birth was delayed due to complications with his twin. The result was that he cannot speak, has a tracheotomy, gastrostomy, and is unable to walk. The mother of this child was unbelievable. She was so happy and eager to improve home health care for not only her child, but for everyone. She truly is a blessing. The situation that both these patients and families were going through was heartbreaking. However, it was beautiful what they have done with the situations they are in.

Journal Entry #3

by Caitlin Pongracz

On May 19th, our group of ISU nursing students began the day by visiting CIDI (center for reference for STI/AIDS and Tuberculosis). A Nursing Resident gave us a tour of the building. Nurses performed quick tests, which showed results for HIV, TB, Hepatitis B and C and syphilis. The quick tests are an improvement for the healthcare system because it helps to identify people who have the diseases and allows for early interventions in order to reduce the rates of HIV in Brazil. The nursing resident explained to us that in 2016, the clinic has completed 860 quick tests; 38 men and 5 women tested positive for HIV with the majority of the cases being from the ages of 12-29. 4,132 patient files were paper recorded.



4,132 paper files at the HIV clinic, part of the CIDI Center for communicable diseases in Londrina.

The staff has an efficient way of managing the clinic. We learned that dentists were previously reluctant to help people who were HIV positive; thus, patients would not tell dentists their conditions or many HIV positive people were turned away from dental care. Fortunately, the HIV clinic has a dentist on duty with a room for teeth cleaning. The clinic is amazing because it not only offers free medications and testing, but also psychologists and social workers are available to help these patients who struggle in other areas of their lives. As culturally sensitive nurses, we must look at the patient's holistic health and provide them with the resources to help them get better. I found it incredible that the state offers living corridors for patients with HIV or TB because it facilitates independence while the patients still support one another. The clinic has helped to reduce the rates of transferring HIV from mother to her baby through early screening and giving free formula to HIV positive moms for 6 months.

We walked behind the HIV clinic to visit the TB clinic. It is open for patients with TB to get their medications daily Monday – Friday. These



The maternity hospital had a competition to see who could paint the best picture of maternity/pregnancy, and this one resembles a typical Brazilian family.

patients take their medications in front of a health care professional every day (except on the weekends). There has been an increase in the number of multi-drug resistant HIV and TB cases. The supply of TB tests has decreased, so the health care professionals have been flexible and conservative with the use of these tests. It is beautiful to learn that these people make these poor circumstances work. Kids and pregnant mothers are given the TB test if they've been in contact with another person who tested positive. The staff cannot get annual TB tests because of the shortage. The staff is a prime example of culturally sensitive nurses because

they realize Brazil's economic instabilities has affected many patients. One patient in particular has been struggling to get back on her feet and the staff has pulled money from their own pockets to provide her with breakfast or lunch daily. We can learn to be culturally sensitive in the States by thinking of our patient's holistic health, including their financial burdens that hinder them from getting healthier.

Later that afternoon we visited the maternity hospital. The hospital is used solely for low risk pregnant mothers. Again, all their records are



Lactation room in the maternity hospital

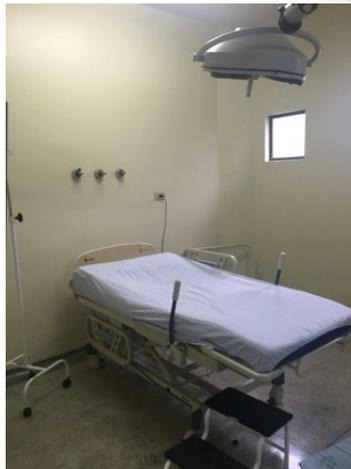
paper recorded. The rooms are divided by the stage of labor: 4 beds for antepartum, 3 beds for labor, and 17 beds for post-partum. Only 2 maternal deaths occurred in the last 10 years in this hospital. The hospital has been recognized and awarded for its achievements.

We also discovered that most parents chose to not circumcise their sons. We were taken by surprise because it has been such a norm for our society that anything different seemed “weird.”

This can help us to be more culturally competent nurses because we will be

prepared to accept the parent’s choices since we recognize that their culture is different than our own.

May 20th we spent 8 hours in the van, driving to Foz do Iguaçu. We settled into our hotel; then went to Tropicana Churrasco, which is an all-you-can-eat Brazilian Barbecue meat restaurant. The waiters bring out a big variety of meat on skewers, from lamb, to pork sausage, to chicken liver, to chicken, to many varieties of beef for you to eat. We headed back to the hotel to get some good rest because the next day we’d spend all day walking trails and exploring the beautiful falls.



Delivery bed in the maternity hospital

Journal Entry #3

by Lily Mularz

Sunday, May 15, 2016

I began a traditional Brazilian Sunday with my host and her family. In the morning, my host’s mother came over to meet me and introduce herself. She, as well as everyone I got the pleasure of meeting, was so loving and kind. While she was there, she told me about caqui, a persimmon fruit, and had me try two types: mole (the softer kind) and chocolate (the harder kind). I thought the mole type was very good,



*Lily Mularz with her host,
Dr. Cristina Bobroff, Professor of Nursing*

but it was strange to me because it identically resembles a tomato in America, and it took until I tried it to realize there was no miscommunication between my host and I. It really wasn’t a tomato. Because of this, I was concerned to try it at first. Her mother left after about an hour, and we left to get lunch at a family’s farm in the rural area of Londrina that only serves food on Sunday’s, called Vó Tatau. We ate there with her son and granddaughter, her husband, his son and daughter-in-law, and grandson, as well as Caitlin and her host, Cris. After eating, we moved from the inside of the restaurant to the beautiful outside area to listen to a live band.

While listening to the music, our hosts convinced Caitlin and I to try Milho de Verde – corn-flavored ice cream. Upon hearing the name, we were apprehensive to try it; however, we were not disappointed. It was much more delicious than we initially anticipated. Before leaving, Caitlin and I saw that there was a pony outside, so we went down with my host to take pictures with it. When we arrived to take pictures, the man in charge had other plans – he wanted us to actually get on the pony. When we expressed our concerns of injuring the pony due to our size, he encouraged us by getting on the pony himself to prove we were not too heavy. After about five minutes of convincing and encouragement, we finally agreed to each taking a turn sitting on the pony. It was so much fun, and was well worth it. Finally, I went home with my host and I decided to nap for a while. After waking up, her husband had made us dinner, so we ate and talked for a few hours before deciding to go to sleep for the night.

Monday, May 16, 2016

Our official first day at the hospital was quite eventful and very busy. They dedicated the morning to introductions of the clinical instructors from UEL (the State University of Londrina), as well as presentations about UEL, its history, and how it works in terms of SUS (Sistema Único de Saúde—Brazil’s unified health system). After the presentations

came to a close, we went downstairs and outside to “La Cantina”, which is the place the students usually buy their lunches.

The second half of my day was my absolute favorite – shadowing in the OR. I have always wanted to go into the surgical field, so this opportunity was not only once-in-a-lifetime, but it was life changing.

I had the privilege of seeing six procedures: an epidural anesthetic procedure, hysterectomy, femoral artery aneurysm repair, the closing of an orthopedic wrist surgery, my first cesarean section (and first birth in general), and a neurosurgery tumor resection – the neurosurgery being the most influential. After this day, I realized that my goal is to go into neurosurgery. Everything about it was so fascinating, and it was everything I ever dreamed of. I feel so blessed to have been given that opportunity to experience my passion and what I want to do for the rest of my life. After our time shadowing was over, we all met to debrief and explain what we did with our day. By that point, it was time for the van to take us all to our designated host houses. The rest of the night was spent eating dinner, chatting with my host and her husband, and preparing for the next day’s activities.

Culture and Healthcare System

While there were certainly differences between the Brazilian healthcare system and American healthcare system, there were not as many as I anticipated. However, one difference that especially stood out to me was the nurse-patient relationships. The warmth, love, and compassion that the nurses showed



towards the patients was indescribable. This is partially because the Brazilian culture is very warm and loving in the first place; however, I admire the fact that they do not act any differently in the healthcare system. In America, it feels as though we are so concerned with professionalism and “not getting too involved” that we forget that our patients are real people who need love and support, and we may end up not getting involved enough. I admire the treatment that nurses in Brazil give their patients, because it is eminently clear that it gives the patients more of a sense of security and comfort, as well as more trust and confidence in their healthcare providers. They treat each other as family, and I feel that may result both in better care and patient satisfaction.

Cultural Sensitivity

During these two days, I gathered so much information from my experiences that can be applied to my nursing practice. I learned so much about the healthcare Brazilians are accustomed to, as well as their ways of life that can influence communication and patient care. First, I learned that almost all healthcare providers in Brazil show a family-member-like love and care to their patients. Keeping this in mind, if I am ever to encounter a Brazilian patient, I must take into account that simply coming into the room, asking medically-related questions, taking care of treatment, and leaving is not an option and would be seen as cold and improper patient care by the patient. While it is important to show love and care to all patients, it is especially important to excel in this area with my Brazilian patients. This can be done by simply asking about the patient’s family, what brought them to the US, how they are liking their stay here, what they have done, what they do for a living, etc. Asking any of these personal questions and getting to know the patient adds a dimension of intimacy that lets the patient know you care about more than just their medical problems that brought them here, but also about them as a whole. Also, I learned that human contact is very important to them. For example, every time they greet each other, they hug each other and kiss on the cheek. While it would not necessarily be a great idea to hug and kiss a patient in a hospital bed,



patient contact can easily be implemented into care. When greeting, the nurse can touch the patient's hand or arm and greet with a smile. Also, during times where the patient is showing concern, fear, or any sign that they are in need of support, the nurse can pull a chair up to the bedside and sit with the patient while holding his or her hand, to show the patient the comfort and support he or she is needing. There are so many things a nurse can do to show cultural sensitivity to Brazilian patients, but I feel these are two of the more prominent that will make the patients feel more at ease during their hospital stays.

