



Brazil-Canada: Launching seeds through community consultation on tackling violence against women^a

Brasil-Canadá: Lançando sementes através de consulta comunitária sobre o enfrentamento da violência contra a mulher

Brasil-Canadá: Lanzando semillas por medio de consulta comunitaria sobre la lucha contra la violencia contra la mujer

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ABSTRACT

Objectives: To report the first experience of the Research Chair in Urban Health (Ryerson University-Canada) in Brazil in collaboration with the Federal University of Paraíba through a community opinion consultation about strategies to face violence against women. This experience also offers insights to stimulate renewed visions of international collaborations and partnerships among nursing programs. **Method:** A descriptive design with the report of experience of Canadian and Brazilian nursing faculty and students about the process from the consultation planning to the analysis of the gathered information. **Results:** This experience was fundamental to establish new scientific collaborations recently implemented and in planning. It demonstrates the nursing potential to participate in Brazil-Canada technological and scientific agreements. **Conclusion and Implications for practice:** Brazilian Nursing undergraduate and graduate programs are recommended to promote an exchange of their faculty and administrative staff with several countries. These exchanges would not be only for research projects but also for social development projects, which are equally valued for the creation of global, nursing-specific knowledge.

Keywords: Violence against women; International Cooperation; Global Health; Community Participation.

RESUMO

Objetivos: Relatar a primeira experiência da Cátedra de Pesquisa em Saúde Urbana (Universidade Ryerson-Canadá) no Brasil, em colaboração com a Universidade Federal da Paraíba por meio de uma consulta de opinião comunitária sobre as estratégias de enfrentamento da violência contra a mulher, e oferecer subsídios que estimulem uma visão renovada de colaborações e parcerias internacionais entre programas de Enfermagem. **Método:** Abordagem descritiva do tipo relato de experiência de docentes e discentes de Enfermagem brasileiros e canadenses, desde o processo de planejamento até a análise das informações obtidas. **Resultados:** Essa experiência foi fundamental para o estabelecimento de colaborações científicas recentemente implementadas e em planejamento, consolidando o potencial da Enfermagem em participar de acordos científicos e tecnológicos entre Brasil-Canadá. **Conclusão e Implicações para a prática:** Recomendamos que programas de graduação e pós-graduação de Enfermagem no Brasil promovam o intercâmbio de seu corpo social com diversos países, não apenas em projetos de pesquisa, mas também em projetos de desenvolvimento social valorizados igualmente na construção de um corpo de conhecimentos para a Enfermagem global.

Palavras-chave: Violência contra a mulher; Cooperação internacional; Saúde Global; Participação da Comunidade.

RESUMEN

Objetivos: Presentar un informe de la primera experiencia de la Cátedra de investigación en salud urbana (Universidad Ryerson-Canadá) en Brasil en colaboración con la Universidad Federal de Paraíba a través de una consulta de opinión a la comunidad sobre estrategias para enfrentar la violencia contra las mujeres y ofrecer información para estimular una visión renovada de colaboración internacional y asociación entre programas de enfermería. **Método:** Un diseño descriptivo con el informe de las experiencias de estudiantes y miembros de las facultades de enfermería canadienses y brasileños sobre el proceso desde la planificación de la consulta hasta el análisis de la información acumulada. **Resultados:** Esta experiencia fue fundamental para establecer nueva colaboración científica recientemente implementada y en la planificación para consolidar así el potencial de la enfermería para participar en los acuerdos científicos y tecnológicos de Brasil y Canadá. **Conclusión e Implicaciones para la práctica:** A los estudiantes en los programas de licenciatura y posgrado en enfermería brasileña se les recomienda que promuevan el intercambio de sus agentes sociales con otros países, no solo para proyectos de investigación, pero también para el desarrollo social, los que son igualmente valorados para la construcción del conocimiento específico de la enfermería global.

Palabras clave: Violencia contra la mujer; Cooperación Internacional; Salud Global; Participación de la Comunidad.

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INTRODUCTION

This paper reports the first collaboration between the Research Chair in Urban Health, at the Daphne Cockwell School of Nursing (DCSON) at Ryerson University (in Toronto, Canada) and the Federal University of Paraíba (UFPB) (in the cities of João Pessoa and Campina Grande). The collaboration involved consultation with the community about the potential for women, if they are empowered, to act upon violence against women, as well as to mobilize citizens to express their ideas and visions about a future of empowered women. This project targets a serious public community health issue - violence against women - which is a particular challenge in the practice of global nursing.

Violence against women is a global phenomenon, and involves physical, sexual, physiological, and economical aspects, as well as acts of control, threat, aggression, and abuse.¹ Violence against women affects women of all ages and can occur in many ways including infanticide, child abuse, incest, rape, sexual harassment, intimate partner violence, abuse, and neglect of senior women.¹ These forms of violence are not new, and have consequences over women's physical, mental, and reproductive health. In fact, violence against women is a violation of women's human rights which limits their participation in society, and harm their health and well-being.

Violence against women is a global public health issue affecting almost one third of women in the world;² it is a complex, and difficult phenomenon that is embedded in the unequal relations between women and men.³ The roots of these unequal relations are located in the social, economical, political, cultural, and environmental structures. A large proportion of this violence is enacted by a male intimate partner.¹ Globally, 38% of all murders of women were committed by their male intimate partners.¹

In Brazil, the federal government delayed recognizing that violence against women is a serious problem. Brazil was the one of the last Latin American countries to sanction and enact specific legislation to curb and prevent domestic and family violence against women (Bylaw nº 11.340/2006 – popularly known as *Lei Maria da Penha*). In 2010, Brazil established a network to address violence against women,¹ and in 2015, the Statute nº 13.014 altered the Penal Code, art. 121 to consider femicide as a qualifying circumstance for a crime of homicide.

Despite this legal apparatus, the prevalence of violence against women remains high in Brazil. There has been a significant increase (from 18% in 2015 to 29% in 2017) in the percentage of women who alleged that they have experienced violence enacted by men.⁴ Physical violence was the most common type of violence reported by 67% of women, followed by psychological violence (47%) and moral and sexual violence (36% and 15%, respectively). It is noteworthy that the percentage of women reporting sexual violence increased from 5% in 2011 to 15% in 2017.⁵

This evidence highlights the need to examine both sociocultural and economic factors that promote a culture of violence against women. The evidence also indicates the importance of educating about, and preventing the controlling behaviours within the sociocultural perspectives of hegemonic masculinity. This would

help design actions to reduce the levels of exposure to violence in childhood, update legislations, strengthen economic features and legal rights of women, and eliminate gender inequities, such as access to post-secondary education and stable paid jobs.⁶ The phenomenon of violence against women became a challenge for its definition, specifically to the *corpus* of knowledge and revised extend of scope for nursing practice within a multidisciplinary team based on evidence-based nursing and the philosophy of patient-centred care.

Objective

The objective of this paper is to report the experience of obtaining community opinion about strategies to address violence against women and offer evidence that stimulates a renewed vision of international collaborations and partnerships between nursing programs.

Rationale and objectives of the consultation

Owing to existing specific legislation as well as unfavourable statistics about violence against women in Brazil, a community consultation project was designed. The project was entitled "Stakeholders' consultation about the development of strategies to intervene at different levels of health care to tackle violence against women" and had the following objectives: (a) understand the beliefs, perceptions, and expectatives of the main social actors about interpersonal, family, and community violence against women; (b) explore the social actors' perceptions about possible strategies to tackle violence against women; (c) discuss with social actors and citizens as future social entrepreneurs about the enactment of existing legislation, the success of preventive and educative measures, as well as other potential official interventions related to violence against women; and, (d) build new local and state-wide collaborations in Paraíba to ensure the visibility of a future, large scale project to address the issue of violence against women.

The project implementation was possible due to a previous academic relationship between nursing faculty, which was initiated in a doctoral internship at DCSON by the Brazilian faculty, who is currently a nursing faculty member at UFPB. This project was a pioneer activity for DCSON because faculty and students engaged in the *Ryerson International Experience Learning Program*, earning a travel grant which sponsored the travel expenses of five undergraduate nursing students.⁷ The UFPB, as the project academic partner, sponsored the students' accommodation expenses.

The project operation in all its phases was possible due to an academic collaboration between Ryerson University and UFPB. It is noteworthy that a Memorandum of Understanding for Scientific Collaboration was signed (in a fast way) for the period 2018-2023.

THE EXPERIENCE

The project's initial aim was to be part of the official collaboration with the Federal University of Rio de Janeiro (UFRJ) (2017-2022), including the Anna Nery School of Nursing, as well

as another emerging partnership with the Fluminense Federal University (UFF) – Aurora Afonso Costa School of Nursing. A decree for military intervention in the city of Rio de Janeiro (March 2018) led the team to transfer the project to the city of João Pessoa, extending to the city of Campina Grande (Paraíba). The change did not cause a major shift in the project aim since the aforementioned cities also responded to the issues raised in the project's preliminary scope.

Pre-departure work

To operationalize the academic collaboration between Canadian and Brazilian nursing programs, the Canadian leaders of the project (including a Brazilian-Canadian faculty member) launched a book donation campaign among 39 DCSON nursing faculty. The outcome was the donation of 150 kilograms of scientific books to the UFPB Central Library for its archive expansion.

For their travel to Brazil, the Canadian students were prepared by the following: (1) taking a free online course about the analysis of gender issues;⁸ (2) reviewing the conceptual feminist framework that guides projects and policies for Canadian international cooperation;⁹ (3) reviewing the Canadian model of population health promotion including the concepts of social determinants of health, community capacity building, social justice, as well as citizen entrepreneurship and Freirian concepts of critical awareness and empowerment;¹⁰ (4) training in Portuguese language offered by Brazil Ministry of Education – Languages without Borders Program; (5) participating in a short orientation about the *Lei Maria da Penha* and the philosophical underpinnings and the operational structure of the Brazil Unified Health System; and, (6) reflecting about knowledge and values that help women know how to behave within the social context of hegemonic masculinity.

At UFPB, a project was submitted to the Program of Outreach Grants, which selected five undergraduate nursing students and two graduate nursing students. Moreover, a nurse agreed to collaborate with the project. These selected students participated in similar training to the Canadian students' training and helped the Brazilian supervisor in obtaining acceptance from community organizations to host the project.

The implantation

The community consultation used a descriptive approach to report the experience of the Canadian undergraduate students who collaborated with UFPB students. The consultation allowed a practical perception of the Canadian feminist framework for the analysis of gender issues in the local society. The consultation also led to a critical analysis of areas for improvement of the local assistance network for women who are victims of violence.

Community consultation allows the community to voice their social problems and the participation in local developments. The consultation is characterized by a strategic approach for an emancipatory policy that offers a perspective of opportunity. By doing so, the consultation has an implicit new matrix for political governance and planning, which aims to learn new forms of social organization based on the management in democracy, strengthening of citizenry, and tackling the problem.¹¹

The activities were implemented in the cities of João Pessoa and Campina Grande. In these settings, the concept of territory was understood as the place where the individuals perceive themselves as integrated and accepted. Such perception allows them to explore what the territory can offer to them and not fear of lack of integration. The territory is a place where the citizens' rights and obligations are recognized since they enjoy the territory and the community.¹² The territory and the community are simultaneously perceived as unified and diverse; they are defined by the implementation of infrastructure, the economy, and society dynamics. The city of Campina Grande was chosen due to its high rates of violence against women as well as its proximity to the city of João Pessoa, which facilitated project implementation.

The North and Northeast regions lead the high ranks of violence against women in the country, where an average of 17.2% of women who live in the regional capital suffer at least one episode of physical violence in their life. The city of João Pessoa has the highest proportion of domestic violence and sexual violence, the second highest for emotional violence, and fifth highest for physical violence.¹³

The Canadian students' field-entry and sociocultural immersion in the city of João Pessoa necessitated a tacit acceptance of their vulnerability due to language barriers, community violence, and the culturally-rooted, masculine approach to women. The students were informed by the Brazilian-Canadian faculty about Brazilian social norms, and still were aware of possible cultural shock once they arrived in the city. The students decided to take part in several activities to observe the daily manifestation of the social dynamics among individuals of diverse genders. For example, they attended soccer games in restaurants during the World Cup, participated in religious celebrations, held informal meetings in bars with UFPB students, participated in major religious (festa junina) parties in the city of Campina Grande, and attended dance classes. These activities helped them to understand some of the implicit social norms in informal relationships for Brazilians, for example in forms of greetings such as hugs, kisses on cheeks, and shoulder touching.

Another important aspect was the students' concerns about racial discrimination in Brazil, since two of the students were of South Asian backgrounds and would not correspond to the Brazilians' possible perception about Canadians being white. Accommodations in the UFPB student residency still allowed students to have close knowledge of the daily relationships among Brazilian youth that could be equivalent to domestic conviviality.

The fieldwork

When the Canadian students began their fieldwork, they were joined by the Brazilian students who also helped resolve any communication difficulties in their use of Portuguese language.¹¹ This mixed team conducted individual and groups consultation in the form of informal conversations. This team worked for 6 weeks (June-July 2018) for a total of 205 hours, gathering opinions of 223 individuals.

The first entry to fieldwork for Canadian students involved being introduced to the local community and representatives of social organizations and public administration. In this meeting, the team clarified doubts of the attendees. The next step was arranging individual and group meetings with Brazilian students. The Canadian students initiated consultations by asking questions, and a Brazilian student was responsible for translating both participants' questions and answers.

Three major questions guided the consultation: What is your opinion about what a woman should do to help another woman experiencing violence against women? What is your opinion about what a nurse should do to help a victim of domestic violence? What is your opinion about what a community health agent should do to help a woman who is a victim of violence? The conversations were audio-recorded with no identification of the participants, and the Canadian students wrote a summary of the contents, and later debriefed with their local faculty supervisor.

In the conversations, local community members and those from the support network shared stories of local victims of violence. The consultations were done with 92 women and 17 men from the local community, 46 UFPB staff/faculty/students (João Pessoa and Campina Grande), 37 health professionals, 14 police officers (police chiefs and male and female officers), 5 religious leaders, 5 psychologists, 4 social workers, 2 members of the judiciary, and 1 high school educated worker. The visited environments included: a radio station, a police station, a community centre, a hospital ambulatory and emergency room setting, a catholic church, a legal assistance office, and a university.

Experiential learning

The described experience demonstrates a synergistic initiative implemented between faculty and students as part of an international collaboration. Such initiatives have the potential to reveal new solutions for urban problems that may have international impacts. The initiatives indicate a need for social innovation and disassembling of practice paradigms to stimulate community participation with proposed ideas, which have never been tested before. During experiential learning in the field, new ways of thinking can emerge to solve common social and health problems across various settings, leading to the exchange of knowledge and experience across countries.

The experience for both teams of students went beyond the fieldwork; today, they continue to learn with their faculty members about how to engage in knowledge dissemination. The opportunity to work within an international network, share experiences, and enhance knowledge about policy-related actions implemented in another country expands our professional horizons.

A relevant outcome upon the Canadian students' return to Toronto was the mobilization of their social leadership skills by creating the *NSSJ Group - Nursing Students for Social Justice*, which was formally supported by the Brazilian-Canadian faculty. This initiative added to other community projects and actions in multiple situations of social vulnerability in Toronto. At UFPB, the projects resulted in: (1) reflection about the University policy

of internationalization, making the process more transparent, simple, and efficient; (2) discussion about strategies to host foreign faculty and students; (3) increased interest among nursing faculty and students about the establishment of other international partnerships; (4) perception among the members of the Brazilian team regarding the need for professional development to engage in international collaboration about the phenomenon of violence against women; (5) strengthening of Forensic Nursing Group of Research and Studies with the approval of a project for a competition launched by the National Council of Research (CNPQ); (6) participation of a student in a forum of discussion for defense of women's rights; and (7) design of research and outreach projects by two nursing faculty about this topic.

The nursing faculty learned that a community consultation involves an alternative form of participating in programs of scientific collaboration. Moreover, knowledge was gained about the feasibility and value of future research rooted in actual problems in another international context of practice, reinforcing thus, the value of exploratory activities such as this pilot-project. In other words, this experience demonstrates a nursing contribution in the operationalization of the Canada-Brazil Framework Agreement for Cooperation on Science, Technology and Innovation by the Decree n^o 7.345.¹⁴

Contributions

The community consultation allowed the Canadian students to achieve a learning experience beyond the university walls and the conventional settings of internships. The Brazilian students had the opportunity to be exposed to Canadian nursing and its principles of health promotion, while acting as ambassadors of coordinated actions to be implemented in Brazil about violence against women.

These actions allowed dialogues to unfold between generations of nurses who could share other cultures of nursing and social realities of practice. The Canadian students also created social networks with Brazilian collaborators, in addition to becoming confident in their new role as agents of social development. The refinement of their theoretical and technical knowledge for interventions in matters of violence against women is noteworthy, as well as learning about new personal and professional abilities.

The social impact of this collaboration, which aims to promote the health of urban populations, also extended to some of the consulted individuals. Some professionals disclosed their intentions to change professional practice and attitudes. Therefore, it is expected that these positive reflections would provoke changes in social practice, and, perhaps, they will stimulate cultural change.

The seeds of social change were also well-received by a priest, a journalist, nursing students, especially by nursing faculty in Campina Grande, as a way of enhanced and differentiated awareness (regarding a systemic, complex problem) about violence against women. At the end of the field-stay, some changes were also observed among the Canadian students regarding their perception of Canadian nursing, global nursing,

as well as feminist philosophy. This philosophy demands equal opportunities and rights for men and women in the civil society.

The community consultation pointed out important critical perceptions among some respondents about the timid action of nursing professionals who face the enormous responsibility of intervening in the demeaned human rights of women. This criticism became the object of analysis by our team who intends to design future action-research projects with nurses and their women clientele who experience violence. Understanding and discussing the nurses' global role in addressing and preventing violence against women revealed to be fundamental. It is justified by the crucial role of nurses in the approach of clients/patients and the help to identify cases, follow-up with victims, support in health issues, stimulate discussion of the issue in communities, and educate multiple agents of health.

CONCLUSION

The Brazilian community seeks to develop strategies to tackle violence against women and is questioning if the country has advanced towards practicing prevention. To pursue the consultation further, the Brazilian faculty member and her team of undergraduate and graduate students are developing an outreach university program in the aforementioned cities. New partnerships allowed the Canadian faculty member to propose, as co-investigators, a multi-center research project sponsored by MITACS^a under the leadership of the Brazilian-Canadian whose implantation was in 2019. The research aims to study the implantation of a program that aims to humanize the labor and birth addressing issues of obstetric violence. Furthermore, the Canadian faculty are co-investigators in a research project led by the Brazilian faculty member and continue to collaborate on presentations at international conferences about the topic.

This experience substantiated a future application to Global Affairs Canada (a department in the government of Canada that manages Canada's foreign relations) regarding a multi-centre project of social intervention in nursing in the situations of violence against women. We expect that results of future projects could assist with the redevelopment of policies, social and health strategies, and actions to tackle violence against women; these policies, strategies, and actions would be grounded in local reality with attention to Brazil's different social and cultural contexts.

The multiculturalism and sharing of knowledge allowed the development of proposals to enhance help for victims of violence, as well as to help educate health and social agents regarding an approach that is free of prejudice and judgments about violence against women. The Canadian multicultural experience can help the Brazilian community to adopt more integrative practices regarding gender, ethnicity, language, and social class.

It is recommended that Brazilian undergraduate and graduate programs promote the exchange of their members in several countries, not only for research but also for social development projects (which are equally valuable in the construction of knowledge of global nursing). Such exchanges can help to overcome conventional teaching strategies towards the development of

new abilities, as well as to help health professionals participate in the process of intellectual and professional maturity as global citizens. The internationalization of actions is extremely positive to all involved parties, in addition to contributing to a new generation of nursing professionals sensitive to the social aspects of global health within a more equitable and fair world.

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REFERENCES

1. Guruge S, Roche B, Catallo C. Violence against women: an exploration of the physical and mental health trends among immigrant and refugee women in Canada. *Nurs Res Pract.* 2012;2012:434592. <http://dx.doi.org/10.1155/2012/434592>. PMID:22685644.
2. World Health Organization, London School of Hygiene and Tropical Medicine. Preventing intimate partner and sexual violence against women: taking action and generating evidence. Geneva: WHO; 2010.
3. Barufaldi LA, Souto RMCV, Correia RSB, Montenegro MMS, Pinto IV, Silva MMA et al. Violência de gênero: comparação da mortalidade por agressão em mulheres com e sem notificação prévia de violência. *Cien Saude Colet.* 2017;22(9):2929-38. <http://dx.doi.org/10.1590/1413-81232017229.12712017>.
4. Presidência da República (BR), Secretaria de Políticas para as Mulheres. Rede de enfrentamento à violência contra as mulheres [Internet]. Brasília (DF): Secretaria de Políticas para as Mulheres; 2011 [cited 2019 out 8]. Available from: <https://www12.senado.leg.br/institucional/omv/entenda-a-violencia/pdfs/rede-de-enfrentamento-a-violencia-contra-as-mulheres>

5. Senado Federal (BR), Instituto de Pesquisa Data, Observatório da Mulher contra a Violência. Violência doméstica e familiar contra a mulher [Internet]. Brasília (DF): Instituto de Pesquisa Data; 2017 [cited 2019 out 8]. Available from: <https://www12.senado.leg.br/institucional/datasenado/arquivos/aumenta-numero-de-mulheres-que-declaram-ter-sofrido-violencia>
6. United Nations. Elimination and prevention of all forms of violence against women and girls. Implementation of strategic objectives and action in critical areas of concerns and further actions and initiatives; priority themes. In: Follow-up to the Fourth World Conference on Women and to the twenty-third special session of the General Assembly, entitled Women 2000: gender equality, development and peace for the twenty-first century. Commission on the Status of Women, Report on the fifty-seventh session, 4-15 March 2013 [Internet]. New York (US): United Nations; 2013 [cited 2019 out 8]. Available from: [http://www.un.org/womenwatch/daw/csw/csw57/CSW57_Agreed_Conclusions_\(CSW_report_excerpt\).pdf](http://www.un.org/womenwatch/daw/csw/csw57/CSW57_Agreed_Conclusions_(CSW_report_excerpt).pdf)
7. Sloan W. A view on urban health from Brazil. Ryerson Today [Internet], Toronto, ON, 14 dez 2018 [cited 2019 out 8]. Available from: <https://www.ryerson.ca/news-events/news/2018/12/a-view-on-urban-health-from-brazil/>
8. Government of Canada (CA). Gender-based analysis plus course [Internet]. Canada: Status of Women Canada; 2018 [cited 2019 out 8]. Available from: <https://www.swc-cfc.gc.ca/gba-acs/course-cours-en.html>
9. Government of Canada (CA). Canada's feminist international assistance policy [Internet]. Canada: Global Affairs Canada; 2018 [cited 2019 out 8]. Available from: <https://international.gc.ca/world-monde/assets/pdfs/iap2-eng.pdf>
10. Freire P. Education for critical consciousness. New York: Continuum; 1973.
11. Ferrarini AV. Desenvolvimento local integrado e sustentável: uma metodologia para políticas e programas de superação da pobreza. Interações. 2012;13(2):233-41. <http://dx.doi.org/10.1590/S1518-70122012000200010>.
12. Dutra VFD, Costa FA, Santos GRS, Cardoso LS, Xavier SCM, Oliveira RMP. The therapeutic potential of a workshop in the territory: autonomy and sense of belonging. Rev Fund Care Online [Internet]. 2017 [cited 2019 out 8];9(3):682-7.
13. ONU Mulheres(BR). Salvador, Natal e Fortaleza lideram ranking de violência física contra as mulheres no Nordeste. Notícias [Internet], Brasília (DF), 23 nov 2017 [cited 2019 out 8]. Available from: <http://www.onumulheres.org.br/noticias/salvador-natal-e-fortaleza-lideram-ranking-de-violencia-fisica-contra-as-mulheres-no-nordeste/>
14. Decreto n. 7.345 de 27 de outubro de 2010 (BR). Promulga o Acordo Quadro entre o Governo da República Federativa do Brasil e o Governo do Canadá para Cooperação em Ciência, Tecnologia e Inovação. Diário Oficial da União, Brasília (DF), 17 nov 2008 [cited 2019 out 8]. Available from: http://www.planalto.gov.br/ccivil_03/_ato2007-2010/2010/decreto/d7345.htm

^a Mitacs is a national, not-for-profit organization that has designed and delivered research and training programs in Canada. It sponsors research training programs for undergraduate, graduate, postdoctoral fellows in partnership with universities, industries and the government of Canada. For more information see www.mitacs.ca. In Brazil, the official partner is CAPES (Coordenação de Aperfeiçoamento de Pessoal de Nível Superior) that is a Brazilian federal government agency under the Ministry of Education, responsible for quality assurance in undergraduate and postgraduate institutions in Brazil.