

# NURSING TRAINING FOR CARE TO THE HOMOSEXUAL AND BISEXUAL POPULATION: STUDENTS' PERCEPTION

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## FORMAÇÃO DO ENFERMEIRO PARA O CUIDADO À POPULAÇÃO HOMOSSEXUAL E BISEXUAL: PERCEPÇÃO DO DISCENTE

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## FORMACIÓN DEL ENFERMERO PARA EL CUIDADO A LA POBLACIÓN HOMOSEXUAL Y BISEXUAL: PERCEPCIÓN DEL DISCENTE

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**Objectives:** get to know the nursing students' perception on the concept of homosexuality and bisexuality and analyze the nursing students' perception of their education to take care of homosexual and bisexual individuals. **Method:** qualitative and exploratory research, developed between September and October 2015. To collect the data, a semistructured interview was held with undergraduate students taking their Supervised Curricular Training. **Results:** in the first category, concerning the students' perceptions of the homosexuality and bisexuality concept, difficulty and confusion were identified when they discussed their perceptions: in the second, about homosexuality and bisexuality in nursing training, it was evidenced that the themes were addressed superficially. **Conclusion:** the nursing students' perception of the homosexuality and bisexuality concept showed deficient knowledge on the themes; as regards training to take care of homosexual and bisexual individuals, it was observed that the theme is addressed superficially during the classes, leading to the search for extracurricular activities.

**Descriptors:** Nursing. Education, nursing. Students, nursing. Homosexuality. Sexual minorities.

*Objetivos: conhecer a percepção de discentes de enfermagem acerca do conceito de homossexualidade e bissexualidade e analisar a percepção de discentes de enfermagem quanto a sua formação para o cuidado com homossexuais e bissexuais. Método: pesquisa qualitativa, do tipo exploratória, desenvolvida entre setembro e outubro de 2015. Para*

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*coleta de dados, utilizou-se entrevista semiestruturada com discentes de graduação realizando Estágio Curricular Supervisionado. Resultados: na primeira categoria, referente às percepções dos discentes acerca do conceito de homossexualidade e bissexualidade, identificou-se dificuldade e confusão ao discorrerem sobre suas percepções; na segunda, que abordou homossexualidade e bissexualidade na formação em enfermagem, evidenciou-se que os assuntos foram contemplados de modo superficial. Conclusão: a percepção dos discentes de enfermagem acerca do conceito de homossexualidade e bissexualidade mostrou fragilidade no conhecimento das temáticas; quanto à formação para o cuidado com homossexuais e bissexuais, observou-se que o tema é abordado superficialmente nas aulas, levando-os a buscar atividades extracurriculares.*

*Descritores: Enfermagem. Educação em enfermagem. Estudantes de enfermagem. Homossexualidade. Minorias sexuais.*

*Objetivos: conocer la percepción de discentes de enfermería sobre el concepto de homosexualidad y bisexualidad y analizar la percepción de discentes de enfermería respecto a su formación para el cuidado con homosexuales y bissexuales. Método: investigación cualitativa, del tipo exploratoria, desarrollada entre septiembre y octubre del 2015. Para recolectar los datos, fue utilizada la entrevista semiestruturada con discentes de pregrado en pasantía supervisada. Resultados: en la primera categoría, referente a las percepciones de los discentes acerca del concepto de homosexualidad y bisexualidad, fueron identificadas dificultad y confusión al discurrir sobre sus percepciones; en la segunda, que trató de homosexualidad y bisexualidad en la formación enfermera, se evidenció que los temas fueron discutidos de manera superficial. Conclusión: la percepción de los discentes de enfermería respecto al concepto de homosexualidad y bisexualidad mostró fragilidad en el conocimiento de las temáticas; respecto a la formación para el cuidado con homosexuales y bissexuales, se observó que el tema es tratado superficialmente en las clases, levándoles a buscar actividades extracurriculares.*

*Descriptorios: Enfermería. Educación en enfermería. Estudiantes de enfermería. Homossexualidad. Minorías sexuales.*

## Introduction

Homosexuality is historically set in a context of prejudice and discrimination, also when addressed in public health care<sup>(1)</sup>. In the historical sense of homosexuality, sexuality manifests itself in the cultural and repressive effects of a society, with different meanings and particular aspects, according to the focus of the field of knowledge<sup>(2)</sup>. Although the terms “homosexuality” and “bisexuality” are recent in our language, homosexuality has existed in all kinds of society over time, being accepted or not in different ways according to the customs of each population.

In 2010, the Brazilian Ministry of Health launched the National Comprehensive Health Policy for Lesbian, Gay, Bisexual, Transvestite and Transgender Persons (LGBT), providing a significant advance for the care of the LGBT population in the health scenario. This cross-sectional policy, which contemplates social participation, promotion, care and health care, represents a historical framework of recognition

of the demands of a portion of this population that is in vulnerable conditions<sup>(3)</sup>.

In a systematic literature review, it has been shown that primary care and family planning services for LGBT people are rapidly evolving<sup>(4)</sup>. In order to do so, it is necessary to ensure that health professionals are prepared from their training to attend to them. The health professionals who need this approach since graduation include nurses. In a study carried out with nursing students, it was evidenced that the curriculum improperly addressed LGBT patient care, revealing the importance of the educational intervention by incorporating content about the theme in the curricular matrix of the nursing courses<sup>(5)</sup>.

In this context, “new” nursing professionals need to increase their knowledge about certain areas of work, attending to a social and health demand of the population<sup>(6)</sup>. Thus, it is necessary to consider the academic space as a place for diversified knowledge construction, where students are stimulated to reflect and act, joining

the scientific fundamentals with their social practice in order to train qualified professionals who are sensitive to different realities.

For this study, the concepts of homosexual and bisexual exposed in the LGBT Communication Manual of the Brazilian Association of Lesbian, Gay, Bisexual, Transvestite and Transsexual will be used. In that manual, persons are considered as homosexual if they are sexually, emotionally or affectively attracted by people of the same sex / gender; bisexual is the person who relates affectively and sexually with people of both sexes/genders<sup>(7)</sup>.

Thus, the guiding question of the research was: What is the perception of nursing students regarding their training to take care of homosexual and bisexual individuals? The objectives of this study were: to know the perception of nursing students about the concept of homosexuality and bisexuality and to analyze the nursing students' perception of their training to take care of homosexual and bisexual individuals.

## Method

This is a qualitative, exploratory research. The study was developed with undergraduate nursing students from a federal university in the state of Rio Grande do Sul. The choice of this scenario is justified because the course studied is reformulating its curricular matrix and the themes homosexuality and bisexuality emerged during the discussions.

The population of this study included a total of 19 senior students from the undergraduate nursing course, considering that their academic experiences could contribute to the discussions about the research problem. To select the participants, the following inclusion criteria were established: being enrolled in the second semester of 2015, in the discipline "Supervised Training-I", referring to the 7<sup>th</sup> semester. It is noteworthy that, in this semester, students are already enrolled in supervised curricular training in the health services, experiencing the practice of nurse practitioners. Exclusion criteria were: students enrolled in subjects from the 8<sup>th</sup> semester,

in order to avoid conflicts of interest, constraints and possible weak points of the study, due to the fact that one of the researchers was part of this group of students. This criterion resulted in the exclusion of two participants. Also excluded were members of the study group in which this research was designed, totaling two students. Thus, the final study sample consisted of 15 participants and no data saturation was used.

The data collection took place from September to October 2015 and was conducted through a semi-structured interview, containing questions on the participants' characteristics, the students' perception about homosexuality and bisexuality and the preparation and influence of undergraduate nursing education in care for homosexuals and bisexuals. The interviews, which lasted between 22 and 49 minutes, were recorded and later fully transcribed.

The data analysis and interpretation process was based on the Content Analysis technique<sup>(8)</sup>. Thus, the three stages of data preparation for the analysis were: pre-analysis, exploration of the material and treatment of results and interpretations. In the pre-analysis, the data were organized and systematized; careful readings were carried out in order to identify and get familiar with the most relevant statements and expressions for the analysis<sup>(8)</sup>.

To explore the material, the interviews were printed and the chromatographic method was used, in which the relevant data were marked with different colors in order to identify the core meanings. Similar information was displayed in the same color, resulting, in the end, in groups of information distinguished by color and arranged in registration units. It is emphasized that grammatical corrections were made as needed, being careful not to change the meaning of the statements. The final phase was the treatment and interpretation of the results, in which they become meaningful and valid, permitting the production of empirical categories that reveal the constituent elements of the research phenomenon<sup>(8)</sup>. In this stage, through the synthesis and selection of results, inferences and interpretations of the results are possible, with

the help of available literature on the subject, aiming to answer the research objectives.

The ethical aspects of the research were based on Resolution 466/2012 of the National Health Council of the Ministry of Health<sup>(9)</sup>. The project received approval from the Research Ethics Committee (CEP) of the educational institution, under CAAE: 47531915.3.0000.5346. Participants were identified by the letter "S" for the word student, followed by the number corresponding to the order of the interviews.

To prepare this manuscript, the criteria for the preparation of qualitative research reports were taken into account, as indicated in the Consolidated Criteria for Reporting Qualitative Research (COREQ) checklist<sup>(10)</sup>.

## Results

As to the participants' characteristics, 12 were female and 3 male. Age ranged from 20 to 33 years. After the organization of the results, two categories emerged: Students' perceptions about the concept of homosexuality and bisexuality; homosexuality and bisexuality in nursing training.

### *Perceptions of students about the concept of homosexuality and bisexuality*

Participants were initially asked about their perceptions of the terms homosexuality and bisexuality. The first term was "homosexuality" and opinions diverged, as some students answered more easily than others, according to the following statements:

*I consider homosexuality to be the affection, the love, any positive feeling that one person can have for the other of the same sex. As "homo" comes from the same. (S1).*

*I believe it is to like the person who has the same sex [...] to like, but to feel physical attraction, much more than just liking. (S3).*

*I think it's when you like, fall in love, are attracted to someone of the same sex as you. (S10).*

*I think it's an individual choice of every human being that has to be respected. (S6).*

*Homosexuality, I think it's an option the person has when she has one sex and chooses to like another person of the same sex. (S7).*

*It's the attraction to people of the same sex, and I consider that it's something learned [...] I believe that the person is not born homosexual; it is something she learns. It may be something, imposed by society, something learned gradually, not that the person was born with it. (S8).*

Still in relation to the students' perceptions of the term homosexuality, some demonstrated difficulties and confusion in their stories:

*Homosexuality is when ... You end up liking, for some reason, I do not know, and at some point in life, people of the same sex as you. (S5).*

*It is when a person feels attracted, but I know that this is not the right word, but it is when you are attracted to a person of the same sex. (S12).*

*[...] I do not know the concept of homosexuality but, in my view, this affection for someone of the same sex, both from man to man and in women. (S13).*

*From the concept [of homosexuality] I do not know. I think it's something we are born with [...] (S9).*

*Homosexuality ... I think all people are born with their way of being. I do not believe that it is something that evolves in the person, how should I say it? I do not know if a taste is an exact word, that person has a preference, but I believe she is already born liking men or liking women. That it is not a choice or a trend of society. (S11).*

When questioned about how they perceive the concept of bisexuality, there was agreement and similarity in the participants' statements:

*Bisexuality would be the person feeling attracted to both the same sex and the other sex. [...] man is interested in both women and men and vice versa. (S2).*

*Bi is when you are attracted to both sexes. (S3).*

*[...] it would be relationships you can have with both the person of the same sex and the other sex. (S4).*

*Attraction to people of the opposite sex and the same sex. (S8).*

Similar to the perception of homosexuality, however, some participants also expressed insecurity and confusion in reporting their perceptions about bisexuality:

*Bisexuality ... I do not know if it's right ... It's when you're interested in people of the same sex as her and people of the opposite sex. Now I was confused. (S1).*

*It is an option of the human being to like whomever he wants, male or female. I think all human beings make their choices and each choice has to be respected ... I do not know if I'm not a bit "confused". (S6).*

*[Bisexuality] The word I wanted to use is not attraction either; it is a form of love, of liking. An attraction you can have for both man and woman. (S12).*

## Homosexuality and bisexuality in nursing training

When asked about the approach of homosexuality and bisexuality in their undergraduate program, the participants reported that the subject was superficially addressed, as stated below:

*[...] it was a glimpse, something very vague, it was not something that we got into and discussed further. [...] was in the discipline of women, children and adolescents' health [...] it was in the sixth semester, which I think is late, because we have been in contact with primary health care services since the first semester. And you are bound to meet these people. So, you should be already oriented, prepared. I think this is a gap that exists in undergraduate education [...] the academy could offer more, fill that gap. (S1).*

*I went to see something about gender and sexuality in the sixth semester. So, in my third year of undergraduate education, and we start to attend to patients in primary health care already. (S2).*

*I had some classes ... loose and lost, nothing very concrete, that was problematized in practice. [...] we had a class about gender issues and there were some glimpses of what homosexuality and bisexuality were. (S3).*

*We talked in class about sexuality, corporeity, but special attention to that theme, no [...] In undergraduate education [...] we talk about it little. (S7).*

Regarding the way in which homosexuality and bisexuality are addressed in undergraduate education, the students mention the presence of the subject beyond the compulsory curriculum. Complementary undergraduate courses (DCG) and extracurricular activities are mentioned:

*[...] in a sixth-semester DCG, if I am not mistaken, which presented the issue of gender, autonomy, rights. In this sense, it was addressed, but in a complementary discipline [...] I, as a scholarship holder, through actions we do in schools, we discussed a little about this [homosexuality and bisexuality] ... some activities that we do ... which are extra activities, we usually brought something related. (S2).*

*Nothing was mentioned during the undergraduate classes. The only experience I had with homosexuals and bisexuals was in VER-SUS [Experiences and Training in the Reality of the Unified Health System] that I participated in. (S8).*

*[...] I do not remember if it was in a DCG, that she [teacher] talked a lot about gender. Homosexuality was not much discussed at the undergraduate level. (S9).*

## Discussion

As for the term “homosexuality”, the participants’ perception was similar to the concept used for this study, in which homosexuality is characterized as a physical/sexual or affective attraction towards a person of the same sex<sup>(7)</sup>. In a study<sup>(11)</sup> that analyzed student narratives, however, the presence of stereotypes was appointed, as they exposed a notion of heterosexuality as something presumed, as a standard considered normal. Consequently, for them, anything that differs from this heterosexual standard is disease or deviation.

Thus, as observed in the reports, some participants believed that homosexuality was something “chosen” and therefore susceptible to social influence. The term “option” suggests that homosexuality is a “choice”, not something intrinsic and personal to each being. The term sexual orientation replaced the notion of sexual choice, as the object of sexual desire is not an option or conscious choice of the person, being the result of a profound, contradictory and extremely complex process of constitution, in the course of which each individual<sup>(12)</sup>. It is also observed in the statements that the belief of society influences this “choice”, so that the person “learns” to be homosexual.

It is identified that, while some participants approach the definition of homosexuality brought by literature, the perception of some of them is subjective, demonstrating ignorance of its meaning. This fact may directly influence the students and the professional practice as, when the concept is mistaken, it may result in inappropriate care for the target population, especially in the case analyzed, given the range of taboos involved. Professional action based on heteronormativity is a limiting factor for quality care<sup>(13)</sup>.

The participants demonstrated insecurity in expressing their understanding of the term “homosexuality,” presenting a retracted posture during the interviews when questioned about

the topic. There were quiet lines and moments of silence, thus showing a possible conceptual weakness. In addition, this also revealed embarrassment regarding the subject, in view of the historical concept of the subject as something negative, shameful and embarrassing. This study showed that the professionals do not know how to proceed, despite this information, as they did not have the opportunity to discuss the theme of sexual diversity and its interrelationships with health during their academic education or in-service training<sup>(13-14)</sup>.

As for the concept of bisexuality, the participants also presented a similar perception to the concept used in this research, being the affective and/or sexual attraction to people of the same sex and the opposite sex<sup>(7)</sup>. During the questions about the understanding of bisexuality, the answers were clear and objective, giving the idea of a structured concept. This can be explained by the fact that this inquiry happened later than that about homosexuality and the participants were less tense during the interviews. Like when questioned about homosexuality, however, some participants revealed insecurity and confusion in their discourse. A study<sup>(14)</sup>, also carried out with nursing students, revealed distorted conceptions, surrounded by prejudice and evocations that revealed or foreshadowed hardly understanding attitudes towards homosexuals, transsexuals and bisexuals.

It is emphasized that, in his statement, participant D9 employed, in his statement, the term homosexuality and this refers to a pathogenic condition. The suffix "ism" is related to medical vocabulary and other health knowledge, used to define a situation as a "problem"<sup>(15)</sup>. In that sense, besides the students' difficulty and confusion when they expressed their perceptions of the terms homosexuality and bisexuality, it is noticed that they are getting their education and are the future professionals who will provide care to that population. In a study involving nursing students, it was evidenced that, when the students attended to LGBT individuals, they presented neither the knowledge nor the skills needed to provide

care. This fact demonstrated the importance of developing educational activities with those students, granting this knowledge during their education<sup>(16)</sup>.

On the opposite, in a study about nursing students' knowledge of human sexuality<sup>(17)</sup>, its participants demonstrated confidence in their perception of homosexuality, approaching the concept currently used, justifying that the students worked to enhance their knowledge due to the relevance of the theme for their future professional activity. Nevertheless, there were students who reported an inappropriate or confused perception, reflecting their limited contact with the theme<sup>(17)</sup>. Therefore, it is identified that the students' singularity plays a determinant role in their perceptions about the themes homosexuality and bisexuality.

Advances are needed in relation to the LGBT population, considering that there are still prejudices in social relationships, which characterize discrimination towards this population, and this has a direct impact in all fields, including health. Training by itself is part of this kind of change that needs to occur in the general population. Thus, the approach of the subject during the training, as well as the personal search for enhanced knowledge about this population, is fundamental for the understanding of the subject, as it involves a population that needs to be respected and cared for with equity and completeness, in view of the vulnerability these people present during health care. Thus, addressing the theme during the education process permits the students' ethical-social (re)thinking, as well as strengthening education with the development of engaged citizens and respect for the subjectivity and diversity of the human being.

The study participants revealed that homosexuality and bisexuality are hardly addressed as themes during nursing training. The distance between what is taught in undergraduate nursing courses and what the professionals experience in their training can be confirmed in the literature<sup>(18)</sup>. It is noticed that the LGBT population needs better welcoming, with



professionals who are appropriately trained and able to refer them to health services according to the specific need presented<sup>(19)</sup>.

The term “glimpse”, identified in one of the statements, as well as the phrase “loose and lost lessons”, suggest the lack of specific discussions about the themes. The students reported attending classes on the subject of gender, which the terms homosexuality and bisexuality could be related to. The lack of a consistent approach to the subject of sexuality with nursing students, during undergraduate education, may harm nurses in their future professional practice, regardless of their area of performance<sup>(11)</sup>.

In a study<sup>(20)</sup> involving dentistry students from 27 US and Canadian universities, students were unable to name subjects that addressed issues on the LGBT community, characterizing a flawed curriculum in preparing to provide care to this population. The authors identified this as a gap the students interpreted negatively, about which a large number demonstrated neutrality or reported that the classes did not prepare them sufficiently to take care of these patients. The study also revealed that the students agreed on the need for changes to a curriculum that would allow preparation during training to practice care for this population<sup>(20)</sup>.

In the research carried out, there was a small presence of homosexuality and bisexuality in academic nursing education, as well as insecurity and confusion among the participants when talking about these subjects. It should be noted that, at the end of the interviews, the students reported concern with the possibility of not having answered the questions in a clear and “correct” way. There were moments of doubt, confusing statements and facial and body expressions that showed retraction and uncertainty in the testimonies.

As the participants mentioned, the institution where the study was carried out has a Complementary Undergraduate Course (DCG) that addresses issues such as gender and sexuality, including themes involving homosexuality and bisexuality. The observation of the curricular matrix of the nursing course at this institution

showed the DCG Integration Seminar: themes of women, children and adolescents’ health. Not being a compulsory subject in the curricular matrix, however, not all students may take it. The study of human sexuality<sup>(21)</sup> is necessary knowledge for the nurse, whether as a student or professionals, in view of frequent experiences of situations involving this knowledge.

The participants mentioned personal initiative to pursue extracurricular activities. On these occasions, they could have contact with the themes homosexuality and bisexuality and, consequently, clarify their doubts. Students who are more frequently exposed to information and materials about the LGBT population will be better prepared to attend to this specific population and will feel more comfortable and secure in providing care<sup>(20)</sup>.

Sexual diversity is a reality that is linked to taboos and prejudices, and this becomes an aggravating factor when experienced by health professionals. Thus, undergraduate courses sometimes approach topics related to sexuality and sexual diversity in an incipient way. Matters involving human sexuality arise as a challenge to teachers, so that they can be closely related to the intimacy of each being, making discussions and reflections in academic settings more difficult. Universities are educational centers with great autonomy in relation to the production and transfer of knowledge though, which guarantees, in the presence of teachers sympathetic to these themes, a broad and continuous approach throughout the disciplines, including the possibility to create specific disciplines dealing with themes such as sexuality and sexual diversity<sup>(21)</sup>.

This is in keeping with the importance of constant adjustments in academic curricula, in accordance with the changes taking place in society. This is a challenge for traditional higher education institutions with fixed curricula though. These may maintain some resistance to changes or adaptations in their curricular matrix though, a fact that contributes for many professionals to complete their academic education without these subjects being addressed<sup>(21)</sup>. The issues of sexual

and gender diversity should be included in the curriculum matrix though, and therefore be part of the academic training. Thus, professionals are granted a broad and general view of the diversity present in the current social context, as well as the development of strategies that question the idea of heteronormativity<sup>(22)</sup>.

At the same time, it is important that institutions provide extra-curricular alternatives during the academic education period, permitting enhanced knowledge about subjects not considered in their curricula. In this sense<sup>(23)</sup>, the controversial nature of themes related to sexual diversity generates curiosity, serving as a drive to organize events, courses and activities that include related discussions. These educational activities emerge as extracurricular experiences that enhance the academic education.

Thus, in the case of professionals working in the health services, the care provided to the LGBT community can be permeated by sociocultural dilemmas, as the relationship between professional and user represents the meeting of different worlds – a fact that would be mitigated by professional action based on ethical principles<sup>(17)</sup>. The LGBT population does not find the necessary care, as verified by the judgments and value judgments health professionals express<sup>(17)</sup>. Therefore, training should include proximity to the actual issues of professional practice and equip the development of interventions and research that may change and/or transform realities<sup>(18)</sup>.

The National Comprehensive Health Policy for Lesbian, Gay, Bisexual, Transvestite and Transgender persons (LGBT) states that this population, which is vulnerable, needs a differentiated look in order to receive equitable and high-quality care<sup>(14)</sup>. Thus, it is essential that educational institutions make adjustments in their curricula, inserting themes related to sexual diversity, so that the students have the necessary support to attend to this population. In addition, the students, as actors (co-)accountable for their training, need to try to understand and apprehend that nursing care, for the sake of cohesive care, needs to be based on the

premises of ethics, human rights, respect, equity and comprehensiveness.

The study is limited by the fact that only the students' perspective was addressed. The nurses' training process depends on several subjects, including the LGBT population, teachers and care and management professionals.

The development of this study contributes to the nursing and health scenario, insofar as it fosters reflections on a taboo subject. These reflections should start from the professional training process, with a view to (re)thinking strategies that permit the development of qualified and ethical nursing care.

## Conclusion

This study revealed the nursing students' perception about the concept of homosexuality and bisexuality. The results presented dualities, revealing conceptual similarity with the definitions adopted for the study, but also manifesting confused concepts, characterizing embarrassment when addressing the theme.

It was concluded regarding the academic education to take care of homosexuals and bisexuals that the subject is addressed in a superficial way, leading the students to take extracurricular activities to minimize this weakness. It is emphasized that the individuality of each student directly influences his/her perception about the subjects. Moreover, it is not enough that only the university is engaged in this change; society as a whole needs to move forward, in view of the existing stigma in relation to the LGBT population.

Considering the moment of (re)thinking and (re)adapting the curricular matrices with respect to the new National Curricular Guidelines for nursing courses and based on the results of this study, the importance of educational institutions recognizing their curricular demands is highlighted. In the face of the weaknesses identified, they need to (re)organize and implement alternatives to strengthen vocational training.



## Collaborations:

1. conception, design, analysis and interpretation of data: Elisabeta Albertina Nietzsche, Taís Tasqueto Tassinari and Liege Gonçalves Cassenote;

2. writing of the article and relevant critical review of the intellectual content: Elisabeta Albertina Nietzsche, Tierle Kosloski Ramos, Giana Beltrame, and Cleton Salbego;

3. final approval of the version to be published: Elisabeta Albertina Nietzsche, Taís Tasqueto Tassinari, Tierle Kosloski Ramos, Giana Beltrame, Cleton Salbego and Liege Gonçalves Cassenote.

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