Namaste: lessons learned in Nepal

By: Mallory Alcock and Lyndsay Howitt

With every great journey there comes a beginning. For us, it was a conversation over coffee in our second year of nursing school at McMaster University that sparked the idea to pursue a global health clinical placement in our fourth year of school. Wanting to broaden our understanding of health and nursing outside of Southern Ontario, it became the first of many conversations before fully committing to go together. Unbeknown to us, our promise to one another would evolve into a much deeper commitment and care for global health that would extend past the return date of the three months we would spend abroad.

Nepal. A country neither of us knew much about, but now a country that holds a monumental place in our hearts. Nepal is perhaps best known for the numerous trekkers it attracts each year who come to explore its majestic Himalayan mountain range. Unfortunately, the allure of the Himalaya’s has overshadowed a country deeply damaged by war, poverty and gender inequities. Although Nepal’s population resembles that of Canada’s, it is classified as a low income country with 23.7% of its population living below a poverty line of $1.25 per day (World Bank, 2014). To the average person this may merely be a statistic. However, once immersed in the culture for three months, we not only witnessed the effects of such staggering numbers, but we were able to build relationships with the Nepalese men and women deeply affected by such realities.

Our days began with frantically catching a local bus. Early in the morning, we would close our eyes as the bus wound through picturesque hills and rice fields as a Hindi soundtrack bounded through the speakers. We would arrive and walk to the grounds of Dhulikhel hospital, a hospital located an hour outside of Nepal’s chaotic capital, Kathmandu. Although, a majority of our clinical time would be spent at the hospital, once a week we helped a women’s clinic near the house we lived in.

Our first week was spent shadowing nurses in a variety of areas of the hospital. Dhulikhel hospital is affiliated with Kathmandu University, and as such there was a large number of nursing students in each area. In that first week we watched as nursing students in their second year delivered newborns, inserted intravenous catheters and performed electrocardiograms. The knowledge, efficiency and skill level that the nursing students possessed was astounding. Soon, the feelings of discouragement and incompetence overcame us. It was difficult to answer questions that pertained to our general lack of knowledge and experience in our final year of nursing. Furthermore, although doctors and nurses could communicate in English, our ability to communicate with patients was very limited and it impacted our ability to build personal relationships with them. It was after that first week, that we both decided to commit our time to working in the Emergency room. It was here that we began to overcome those earlier feelings of discouragement and where staff took us under their wings.
As weeks turned into months, we became highly aware of the devastating effects that poverty, corruption, gender inequality, and malnourishment impose on a nation. We witnessed countless cases of organophosphate poisoning due to women seeking an escape from the pervasive domestic violence that exists in a patriarchal society. The shock of seeing women being wheeled in flaccid and foaming from their mouths never got easier. It was here in Nepal that a passion for women’s rights and their health was ignited within us. Prior to this experience, we had taken our status and freedom as women in Canada for granted. Our hearts were stirred and deeply saddened by the injustices we saw among the women we treated, worked and lived with. It was through conversations that we found hope and were able to speak of the importance of empowering women. The issue of gender inequality is one that is arguably more arduous and daunting than Everest itself; however we were able to find many Nepalese who likewise dreamed for a better future for women.

We were and still are touched by the people we met and the experiences we had while in Nepal. One of the greatest gifts of our journey was meeting those whom we worked with—people like Rama, the head nurse and our preceptor in the ER. She was and still is a visionary, with high hopes to see improvements in the health of Nepalese people. It was people like Rama that brought about an interest for global health and women’s health that will surely remain with the both of us during the breadth of our careers. The journey that began over coffee a few years ago did not end when we returned from Nepal. Although our interests in global health now lie largely in health promotion and disease prevention, we have strong desires to continue to be involved in women’s health. Nepal should not just be known as the country home to Everest, but also as a home to endless beauty in its terrain, people and unforgettable cuisine. It is our hope and dream that our journey in global health will one day involve stepping back onto the grounds of Dhulikhel hospital, together.

References: