

NURSING WITH A DIFFERENCE

TRUST Established in Delhi 1998

"Let Each Day Be Your Masterpiece" Galatians 6:9

THE RISE AND FALL OF NURSING – ASSAM THE GATEWAY TO EAST

INTRODUCTION

1. Why Assam?

- a. An increasing awareness by Nursing With A Difference Trust, of the continuous, seemingly unjustifiable, difficulties, Nurses in the North East of India are courageously facing. We felt an urgency to make our resources available and to encourage these Nurses.
- b. Discussion with the Secretary General, Trained Nurses Association of India, confirmed the importance of reaching Nurses in specific areas of need such as the North East. where fear associated with travel and communication is a reality.
- c. In any disturbed area, fear arises from the prevailing hostility and insurgency, policing and defence services, that dominate daily life.
- d. Nurses in these situations are the very ones who should not be neglected and every effort ought to be made to meet and encourage them.
- e. Silence prevailed as the strategic planning for Manipur and Nagaland was completed. The magnitude of the task in highly sensitive areas was now to be realized. Suddenly, a Manipuri Nurse stated. "No! you must start in Guwahati Assam". An inexplicable authority in the statement, while mind- boggling, was accepted with no comment.
- f. Next day, having finished the business in hand, I mentioned to the Nurse Advisor Government of India that we were planning to go to the North East, "Where would he recommend we commenced?" his immediate response was Assam, Guwahati.
- g. Having prayed for guidance it was clear that a greater wisdom was taking over our planning. Confirmation of this came with the ease with which a complete change of plans were brought to fruition in less than one month.
- h. The welcome and rich sharing with thousands of Nurses in Assam during the next four months reinforced the correctness of our decision, with a growing conviction that this was the beginning of something much greater for Nurses in the whole of the North East.
- i. How this will evolve will, to some extent, depend on the response to this report.

ASSAM POPULATION 26,866,000

Forward Castes (FC) Backward Castes (OBC) Scheduled Castes (SC) Tribal (ST)
15 million Assamese and 60+ People groups.
6 million Assam Tea Estate Workers includes large scale migration from Bihar Orissa etc.
Large scale immigration from Nepal and Bangladesh

**The need of the hour is
Wisdom, understanding, knowledge, and love to bring reconciliation and peace.**

II. Intent

- a. Initial intention to submit a report was a natural act of courtesy to the Deputy Director Nursing and to the Nurses in Assam.
- b. This focus was sharpened when the Deputy Director Nursing, Assam requested 'Even a page with any suggestions that may be helpful'.
- c. The focus enlarged to open a meaningful presentation of facts and consequences, within the frame- work of practical reality and values, as expressed, by Nurses in Assam who had shared with professional understanding and integrity.
- d. This deeper and wider focus is expected to substantiate and garner, effective support for any decisions the DDN may now consider wise.

III. Conviction

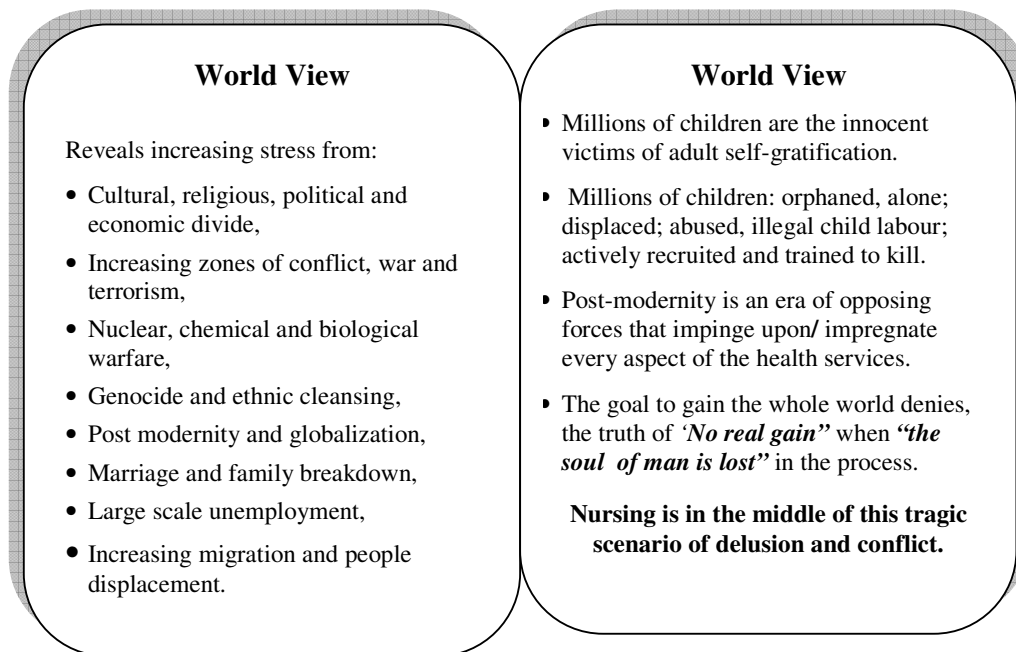
- a. Nurses in the North East genuinely desire 'A better way to bring good into Nursing'.
- b. Oppression within Nursing, comes from wrong doing by Nurses, which stems from recognized and unrecognized sin within.
- c. Oppression imposed on Nurses, is generated by the forces of evil operating in man, to destroy the commitment of Government to provide good quality health service for all people.
- d. Both (b. and c.) must be dealt with in ways that ***overcome and not compound oppression.***
- e. Attempting to first clean the outside of the cup is a waste of time, energy and resources.
- f. The first stage of cleaning the inside of the cup was made through discussions from the heart of thinking, caring Nurses, on what is currently wrong in Nursing and what should be.
- g. Acknowledgment of sins of deception, wrongdoing, blatant corruption, and powerlessness by the Nurses, was accompanied by their genuine desire to overcome these practices.
- h. The second stage of cleansing will have been entered into as these same Nurses have further examined the challenge of these issues in their own life.
- i. The third stage of cleansing will be made possible, when the first recommendation made in this paper, is implemented, with a nucleus of Nurses having opportunity to take a fresh look together at their own resources, and other resources available, but not as yet used.
- j. Nurses will be amazed as this process takes place, at how many external oppressive forces will be affected, triggering a reactive process that leads to their significant withdrawal.
- k. Nursing in Assam has an impressive history of dynamically influencing Nursing in the whole of the North East, in India as a whole, and through international recognition.
- l. ***Nurses in Assam have the potential to not only regain lost glory. But to re-establish it as a centre of excellence that will be demonstrated by academic achievement, which is applied in the best quality of Nursing Services within Institutions and the Community.***
- m. Nurses in the North East of India have the potential for being a very special instrument in God's hand, to execute true justice and mercy to all man.

Conviction will become reality as Nurses pray and work together with a fresh vision and renewed confidence in their God given calling as Nurses.

4. World View

While the delay in completing this report is regretted, the intervening circumstances, contributed to re-thinking the many serious issues Nurses in Assam face. And to place these in perspective from a world view from which the links, broken or otherwise, significantly connect with, and influence, the health services within every Nation.

The World View is a macro-view of each Country and State within a Country.



Recommendations

Privilege brings responsibility for substantive and achievable action.

In the ongoing spirit of collaboration, *Nursing With A Difference* offers some recommendations.

The six recommendations, surpass the approach of broad spectrum antibiotics or adhesive dressings, to be more in tune with keyhole surgery based on diagnosis for precision planning to eradicate the underlying source of problems, and allow healing to take place..

1. **Each recommendations** arises from translating and connecting the different facets of ethno-cultural strengths and weaknesses that can both build and break Nursing and the Health Services
2. **These recommendations** are based on the reality, that in the main, health service providers have
 - A zeal for money spinning technical advancement and drugs, with 'well done' hailed by the bigger and better;
 - A rhetorical adeptness coupled with a thinly veiled proactive agenda for consistent, *active destruction of the Government Health Services* that leaves no redress for the less affluent population majority.
 - They **Do not** attempt to cover the many horrendous anomalies within the Health Services.

Nurses cannot escape the ills that require Spiritual surgery and Divine healing.