

Session Focus and Content

Each Day Be Your Masterpiece' opened up previously unexplored vistas for each group as well as providing opportunity to take a fresh look at obstacles, and the Nurses Pledge.

The reason why each Nurse had entered Nursing revealed at least 95% not wanting to be a Nurse. The main reasons for entering Nursing were: economic necessity, parents wish, job security, a better marriage prospects as less dowry may be required

The relief was obvious when these Nurses realized that we genuinely empathized:

- In the suffering they had experienced as students and since qualifying,
- Their loneliness from carrying a hidden resentment at being the victims of imposition;
- Their sense of remoteness while smiling and saying the right things to family and friends was well recognized as suppressed resentment; This and much more amounts to a real tragedy.

No wonder the morale and standard of Nursing is dropping!

Sharing with the few, i.e., 1, 2 or 3 Nurses in each group, out of 179 in 19 groups, that were in Nursing because they wanted to be a Nurse, gave a different perspective and hope:

- A few had entered because of the 'uniform' and experienced a terrible shock while adjusting
- Some, because they had witnessed terrible Nursing with a family member and wanted to overcome this.
- Two had come from remote areas with the desire to provide a good quality much needed service in their respective areas.
- A few had not wanted to enter Nursing, but after the initial period of *hating it* had gradually begun to gain both interest and job satisfaction

Discussion centered on the personal worth of each Nurse. The majority had never realized that they were a masterpiece of God's creation. While others had been instrumental in getting them into Nursing, each had been created with the ability and opportunity to fulfill the divine plan for her life to be a good Nurse.

The Nurses Pledge had lost relevance as few Nurses knew that they had taken the pledge before God who had created them and was watching and waiting to help each Nurse make every day a masterpiece so that with combined efforts the whole of Nursing would become a genuine masterpiece.

A two hour session in the middle of a busy day requires variation. Nursing With A Difference like Nurses round the world, have proven that *meaningful singing lifts the heart, inspires and edifies*. The songbooks are a collection of songs chosen by Nurses from within 17 States of India.

The selection made by Nurses within each group rarely, if ever, fails to draw the group together, as each song becomes a 'prayer' from the heart of the group. For the first time songbooks were not used!

With hind-sight and without breaking the AD's edict we could have sung selected songs such as:

'Its not by might, it's not by power
But by My spirit says the LORD
This mountain will be removed
By My spirit says the LORD

However, had a Nurse, chosen a song that contained the *forbidden word*, her choice would have had to be rejected or we would have violated the scripture that admonishes 'To knowingly, give no offence.' The last song, on the last page of the 6th and last module Module '**Technology**' was most appropriate

Let there be love shared among us,
Let there be love in our eyes;
May now Your love sweep through Nursing,
Cause us O LORD to arise;
Give us a fresh understanding
Of brotherly love that is real;
Let there be love shared among us,
Let there be love.

Comment: The Health Service Dilemma

Any Nurse considered worthless, has a negative impact on patient care.

When around 95% of Nurses in a State are deemed a necessary evil, to keep the health services functioning and to earn, it justifies the assertion that socio-culture-politics are conforming to the 'fallen world view' that life has no value, for the Nurse or Patient.

Nursing Conclave to address the problem

The stoic but powerless approach by Nurses has developed because of the cultural, religious and political implications of every Nursing related issue.

All Nurses in Sikkim could help break this vicious cycle of destruction to Nurses and Nursing, and Competency 8.0, AID's Module pp.108 to 110 could act as a spring board for discussion to this end.

Although religious, Nurses have failed to come together prayerfully for frank and free discussion, which would enrich each other, the whole profession and society. Where Nurses have united to draw on the transforming power and wisdom of God in addressing each issue the results have been exciting.

Nurses can be assured that the God of justice and mercy will guard and guide them in the initiatives they will need to take. With time a gift from God to every one, specific time scheduling to know and achieve His will through personal and collective prayer will be a challenge well rewarded.

Specific Confidence-Competence Building Programs for Nurses

Some Nurses, both GNM and ANM, during the course of each session, stood out as women with the ability to dream and act and in so doing to significantly help all Nurses to work together to bring about cultural and social change in those aspects that are a powerful negative influence in their lives.

Resistance by a few Nurses may well occur particularly as these Nurses will be easy prey to the wiles of the '*fallen world of non-Nurses*' whose job it is to break down and destroy by undermining.

This major, perennial challenge will bear fruit as individuals witness the positive effects, made possible by the initiating Nurses whose achievements are a direct result of specific united prayer, and who appropriate the truth that 'Effective, fervent prayer of Nurses made righteous by God, avails much..

Education of the Potential Nurse Population and their Parents.

Nurses can approach this important issue in several creative and meaningful ways.

Planned visits by a Nurses *who have a heart for Nursing*, to speak specifically about Nursing, its opportunities, challenges, hard work and real rewards, not just financial, to all College students, with a particular session for the final year students. The Principal and faculty will become strong advocates for students entering higher studies and the Nursing work force, to do so thoughtfully.

This became a dream for Nursing in Sikkim after meeting the thoughtful dynamic Principal and later, two staff members of the prestigious Tashi Namgyal Academy as well as through sharing as a Nurse, with many final year students from the Girls School attending the Evangelical Presbyterian Church.

It has been my privilege in New Zealand to speak to College students, at Rotarian dinner meetings, to students and parents at Rotary Career nights, and as Principal Tutor to organize day programs in the Base hospital for students to gain first hand appreciation of the academic and practical aspects of Nursing. A marked change in the overall preparation and attitudes of entrants to Nursing was achieved.

In 1968 in Dehra Dun, India the heartening response from a very full hall of Rotarians and their wives was, more than letters of appreciation received, the fact that 5 families encouraged their daughters to become Nurses and for the right reasons. A first from this very large Rotary Club.

Sikkim could well take the lead the way in this very worthwhile approach to creating a healthy interest and respect for Nurses and Nursing.

Review of the Selection system for Student Nurse Entrants.

Because of the afore-mentioned findings, it was disappointing not to meet with the Principal and Deputy of the SON to specifically discuss possibilities of change.

In every State in the whole of India, the selection process in all areas of Nursing is a mockery and shame that is stamped by the double-bind of bribery and corruption. The unfortunate victim, later to bear the title of Nurse, is significantly a pawn, with all too often the selection panel decisions being over-ruled by the *'powers that be'* who have no real concept of Nursing. *All areas of Nursing suffer..*

When inquiring the number of students in the College of Nursing, the question was evaded with the response that numbers are not what had been expected, and 'we don't know why.'

Newspaper reports on the High Court directing SMIMS to get its MCI act together, verbal and written reports of the *'self-protection at all cost'* attitude of the MCRH Administration with, e.g., the dismissal of 4 Nurses who dared to defend the truth, later verified in the Military Hospital in another State.

Nurses can be thankful and pray that 'heart' of the CON Faculty and the MCRH administration who provide the service experience for all students, *be transformed* with evidence of all staff working towards competency in every aspect of Patient Care prior to further admissions to the CON.

Inclusion of Purpose-Directed input for Students in School, Service and Hostel.

With the current trends throughout India, e.g. in December 2006 out of the graduating class of 50 students from one accredited SON only one wanted to be a Nurse, and with a research study by TNAI in the late 1980's showing a similar pattern, Sikkim is not alone in this problem

*Addressed with wisdom by all qualified Nurses,
each issue can be resolved or better managed..*

The current students in Nursing deserve to have their personal fears and frustrations understood with every effort made to demonstrate in practice, a more excellent way. Students are vulnerable and impressionable. With wisdom a distressing beginning can be turned into the blessings of maturity and satisfaction in the real purpose of life, and a nightmare transformed into a dream that blossoms with fragrance.

Sikkim as the 3rd smallest State in India, and certainly one of the most beautiful, has all the potential to take a firm stand. With the Secretary of Health endorsing innovative Nursing efforts to effect change the influence of this State could spread throughout the whole of India, and much further.

**I'm pressing on the upward way
New heights I'm gaining every day,
Still praying as I onward go,
LORD plant my feet on higher ground**

Nursing initiative to influence the Health Secretariat

Through the wisdom that comes from above, the Joint, Deputy, and Assistant Directors, in collaboration with the Nursing Superintendents and their deputies, the Principal Tutor and her Deputy will find they have a voice that will come to be respected.

NB The Administrative Doctor Director or any of his counterparts, medical or otherwise, if confronted when critically ill, or nearing death, with 'merely technical Nursing' their condemnation of Nurses and Nursing with immediate dismissals would be well broadcast

**The Power of God available to every Nurse is not found in religion
It crosses the barriers of religion
It comes from a personal relationship with God our Heavenly Father.**