

District Visits

Preamble

The following account is given to demonstrate how, when God works mightily in man he becomes a genuine ministering spirit of love and compassion, while the devil stands at each person's shoulder to send his fallen angels to undermine and destroy.

Having been much impressed and eternally grateful for all communication and assistance received from the Secretary of Health prior to my arrival in Sikkim, our meeting in the 2nd week came as a shock. The total change in attitude was such that it was hard to believe it was the same person. Later this was identified as and therefore attributed to misinformation being fed to the Ministry of Health

It behooves us to be alert to the wiles of the evil one and to walk steadfastly in God's path of righteousness, love and compassion

Having discussed by telephone from Delhi some of the factors involved in travel to the 4 districts and been assured e.g., that the roads were very good and travel in Sikkim no problem, extension of permit would be taken care of etc. it was a rude awakening to find this same gentleman presenting multiple blocks, very few Nurses too busy to take time, no patients, no funding available, no where to stay, the need to travel in a group of 5 but that the SSP would not grant another extension of the permit and so on.

Was a fallen angel at work?

Any effort to consider alternatives such as bringing the Nurses in groups to a central point for a day were refuted due to communication difficulties and lack of funds. He was rigidly adamant.

Dismayed but not convinced, such responses are not uncommon in Nursing. The first priority was a brief prayer with the two Deputy Directors Nursing for wisdom to know God's will and sensitivity in allowing His will (not mine) for the Nurses of Sikkim to be realized, whether it be to press on or stop.

Later a phone call to a Mr. P.J requesting prayer support fired the response 'God does shut doors!' True, but we must be sure He has shut the door and that it is not 'road blocks set up by the principalities and powers of a fallen depraved world. Prayer must be specific.

A quiet sense of resignation prevailed among the senior Nurses. When seeking to elicit names and contact details of Nurses, retired or free to accompany me, the final and only positive response was 'Why don't you ask at the Church, you went there on Sunday?'

A ministering spirit at work.

Unbelievable! A Nurse desiring the company and assistance of professional colleagues, in my experience, searches among Nurses of every different socio-religious-political identity and not in a formal place of worship that may prove more restrictive.

God's love and compassion is for all

Protected Area Permit. Surrounded by uncertainty, prayer was 'To be kept alert and my footsteps guarded'. Having planned to get the permit extended the next day, Saturday, I asked the Nursing Superintendent directions only to find she had already arranged for her helper to go with me!

In 5 mins. of entering the office I had the permit.

The silent support of Nurses convinced of a need.

Saturday the Office would have been closed and I would have had no option but to leave Sikkim.

Saturday evening with no firm plans for the districts I somewhat reluctantly attended what proved to be a superb dinner with an influential group of men and women The grapevine had worked and curiosity fuelled. A test with a difference!

Charity or caring concern? For the first time in more than 15 years in 17 States of India and in all of Sri Lanka the question of charity was raised. One wonders how anyone could conceive the idea that Nurses helping Nurses, our own professional sisters, or brothers, in a remote area of the country with limited resources was charity?

Had the Biblical meaning of charity i.e. 'love' been intended that would have been different.

Trust funds! Money is always a focus of interest but why so much interest by those for whom it has no concern? It is however, a privilege to be able to vouch for the integrity of the Trust receiving neither Government nor overseas funds but that it is Nurses, with occasionally a Nurse's family, helping Nurses.

To be able to state that since arriving in Sikkim a retired Major General (Nursing) had sent Rs. 1000 and just that day a Sikkimese Nurse had donated Rs.500. Both received an official receipt with the assurance that the money was accepted as a gift to be used to help Nurses in Arunachal Pradesh and not in payment for modules and song books donated to Nurses in Sikkim

Probing of intent! Was this natural curiosity or one more evidence that anything a Nurse does must be critically evaluated by all and sundry?

Be that as it may, discussion related to visiting the Districts, without Government approval brought forth a great deal of useful information. My purpose was clear, apart from enjoying the scenic beauty of a reputedly small but beautiful State, as a professional colleague I had the freedom to introduce myself to the Chief Nurse in each District Hospital, offer her the modules and other resources which she may accept or reject. Thus it would be possible to fulfill my commitment to the Trust and the Nurses of Sikkim without in any way violating Government decision.

That the Secretary for Health later notified the District CMO's of my visit indicated the efficiency of the grapevine and reporting system

God works in many ways to fulfill His plan for Nurses

The **DNS** suggestion took root, the phone call to Mr. P.J. resulted in two Nurses attending the following Sunday Service, where I had been invited to bring a message of encouragement specifically to the large number of young girls in their final year of studies. Hopefully some of these young ladies of promise will enter Nursing expecting to realize their potential to become good Nurses.

A meeting arranged by Mr. P.J. ensured that within a few hours I had left Gangtok armed with wise counsel and significant contact details and in the company of two very caring and able Nurses.

The greatest challenge of any assessment in life IS to be found blameless before God and man.

Considering Sikkim Tourism is doing so much to encourage visitors, as was obvious with the many *foreign tourists* traveling alone and staying in the many guest houses and hotels, that the restricting conditions imposed on an elderly Nurse involved only in Nursing endorses the fact that Nurses are seen as a threat and must be kept 'in their place' as decreed by Non-Nurses.

Difficulties may result in limitations but need not lead to impenetrable blockades.

Ministering Spirits work to fulfill the Will of God

Apart from the first day I traveled with just one Nurse. On one occasion unbeknown to me the gentlemen who met us, had arranged with my colleague to take us by car to the next District Hospital.

On another occasion it was deemed wise to return to Gangtok for a couple of days before proceeding to the last District. Thus, the only time I had to show my Protected area Permit was when submitting it on leaving Sikkim.

*The LORD Jesus Christ said
'These things I have spoken to you that in Me you may have peace.
In the world you will have tribulation; but be of good cheer, I have overcome the world. John 16:33*

The evil one will not give up, when he finds the blocks removed he will make a personal attack, in this instance it was his final blow. In all my extensive traveling in India I had never been car sick and this driver was as good as the best I have ever driven with. This test was indeed a test with a difference!

Shingthom District Hospital

Any apprehensions had been taken care of by Mrs. Kaymit Lepcha whose professional approach with the Nursing Superintendent of this 100 bed hospital with an average bed occupancy of 64 patients in 3 wards resulted in the maximum number of Nurses being freed for a two hour session.

A tour of the hospital ended with the joy of seeing patients and families watching good quality meaningful health education programs. The whole atmosphere was one of light and caring concern.

Time with the CMO was invaluable giving a deeper insight into some of the real needs of Nurses in the many PHC's as well as the apparent total lack of appreciation of the Nurses. This was a first time joy and made more so by the obvious sincere concern with which information and suggestions were made.

However more time should have been made available to the Nurses in both the hospital and PHC's

Gyalshing District Hospital

We were met by a gentleman who proved to be a respected and well known person to the hospital staff. Arriving late in the day there was just time to meet the Matron and some of her staff, make arrangements for the next day and then to the DMS and DTO. Each person gave a very warm welcome and we looked forward to further interaction.

Surrounded by hills and forest, one sensed an air of remoteness even detachment

How cut off from the hub of health services and resources was this hospital and the peoples of this district?

It is only a short distance, even at 40 km/hour is less than 4 hours from the hub.

Next morning it was only possible to have a very few minutes with the Matron a woman with a deep concern for the peoples of the District who are denied the services of this their hospital because of referral to Gangtok for virtually everything due to 'lack of facilities'. It is not uncommon that such reasons for lack of health services rather than satisfy the peoples of a district tend to produce strong negative feelings.

In remote hostile areas the health authorities would do well to learn the art of true justice with mercy for reconciliation.

Having done my own equivalent to the ANM training in a small 50 bed hospital where we had good results from for e.g., lower segment caesarian sections, cholecystectomies, head injuries including those requiring surgical intervention, trephining etc, renal and orthopedic surgery, as well as a wide variety of medical, pediatric and gynecological conditions, all done with only two surgeons and one physician cum anesthetist, makes one wonder where all the advances in medical science are taking us. when it comes to peoples in the remote areas of the nation. The majority of the population.

The fact that the matron had been in this hospital 32 years and I was the first to visit, gives a clear indication of the value that the Ministry of Health has in the past placed on the people of the District and the Nurses employed. That this attitude may be changing is cause for thanksgiving and must be nurtured.

It was heartening when The CMO arrived to welcome and inform me that The Secretary of Health had instructed him to give every assistance.

The ministering spirits had done their work

All Nurses, including night Nurses, made a positive contribution. Their eagerness for a set of the modules indicated the hunger for professional resources.

However my grief was real as not having any proper idea of numbers I had to restrict the distribution of Modules. This brought overt disappointment to mainly the ANM's. This could have been avoided had careful planning been possible in Gangtok.

This was a double disappointment as the ANM's in Sikkim demonstrated an overall much higher standard of English than experienced in any other State in India

Once again time was a factor leaving no time for less formal interaction. A quick lunch and we were on the way to the next District. ***Our Nurses deserve more.***

Namtchi District Hospital

The entrance with its creative design and art work was imposing and gave the impression of business.

Arriving around 4pm we received a very warm welcome by the Nursing Superintendent and her Deputy with a brief introduction to the CMO. With arrangements set for the next morning we were escorted by the DNS to their most wonderful provision for our comfort complete with a magnificent view of Mt. Kunchenjunga.

This 100 bed hospital is more often than not home to well over 100 patients. Needless to say the morning is a very busy time and my request to come early to see a little of the hospital was conveniently bypassed.

As a tour of the hospital is most often one of the first offers of the Nursing Superintendent one wonders whether there had been a discreet directive, 'Keep her out' after all border hostility is a marked feature in the whole State of Sikkim, if it were not so there would be no need for Protective area Permits. The District Hospitals will inevitably be the first to receive casualties.

The session with the Nurses was one of the most rewarding. In some ways it was as if a well spring had burst challenging afresh, why have we failed so dismally to reach out to our sisters in need?

A quick but superb lunch and we were on our way back to Gangtok.

Mangan District Hospital

It was regrettable that even though we left Gangtok shortly after 7am. the Assistant Nursing Superintendent and her Nurses were kept waiting for ½ hr. due my having to keep stopping the car.

Feeling far from my best, we went immediately to the ANS office where the Nurses were gathered to receive the best I could offer in the 2hours available. We left immediately the session concluded which meant that once again there was no opportunity for any informal interaction.

While the ANS and her Nurses deserved much more, my prayer was that each would have gained at least one small thing of value in spite of my inadequacies.

Without the provision of car and assistance by my colleague and now friend Tsering Lachungpa, it would have been extremely difficult, if not impossible to have done what I did that day. Thus God's provision is greater than the onslaught of the principalities and powers of this world.

The assurance that the LORD Jesus left us is important when faced with the many faceted tribulations of this fallen depraved world.

**“But when the Helper comes, whom I shall send to you from the Father,
The Spirit of Truth, who proceeds from the Father, He will testify of Me.”
“And you also will bear witness.” John 15: 26-27**

The return journey was no less painful and it was with thankfulness that I fell onto the bed and into the loving care of the Dorji family.

To be alert to the physical or mental battering by the evil one is important for all Nurses to understand, Is this not why the scripture give very clear accounts of the various forms of healing that the LORD Jesus engaged in as he taught His disciples.

**And I will pray the Father,
And He will give you another Helper, that He may abide with you forever.
Even the Spirit of Truth...” John 14:16**

There is a place for pills, potions and other interventions, but when the cause is clearly a demonic attack the Great Physician is the only one to whom we may come with confidence.

A sever temporary loss of hearing, no glasses to see clearly and my mobile phone failing to connect., communication with the world outside of the Dorji home was directly to a prayer answering God.

What joy when eventually contacting the Nursing Superintendent of STNM to find that the Almighty Sovereign God before whom we had all taken our pledge was in control proving again the words of the LORD Jesus Christ and the reality of Ministering Spirits.

Just prior to leaving Delhi the Major General Nursing had urged me to visit the Nurses in the 158 Base Hospital and to meet this request I had earmarked sufficient resource materials and informed the Nurse Administrators, even though the Trust had earlier allocated the whole consignment for Sikkim

Now I could tell the Nursing Superintendent who had restrained from meeting all the requests from Nurses that I would now include the 158 Base Hospital at a later date and all the remaining resources were for the Nurses in Sikkim.

We all have a task to do but none of us is indispensable. My desire was to do more for the Nurses of Sikkim! How many PHC's could have been visited in those last days? What about the SON staff?

There is a time and place in God's plan for everything.

More important than my 'doing' was that the 'Nurses of Sikkim were initiating and doing .

Suggestions and an invitation to return for a three day prayer conference for Nurses as well as to visit the men posted on the borders to encourage them in their isolation and deprivation, was like watching the buds of the dreams of the Nurse's of Sikkim begin to unfold.

**The eye of faith differs from the eye of sense in two points,
The eye of sense grows dim with age; the eye of faith brightens;
The eye of sense sees not far; the eye of faith sees beyond the stars.
Eastern Proverbs by j. long**

What about our plans to go to Arunachal Pradesh directly from Sikkim? All the modules allocated those Nurses were already sitting in Assam? Had the door shut?

With the valuable insights gained in Sikkim increasing understanding of the North East, over that gained in Tripura and Meghalaya, it became clear that more specific prayer ought to precede

In addition the suggestion that one of Sikkim's very able Nurses be approached to join me in Arunachal would be of immense value as she would gain first hand experience while contributing to the development of Nursing Services in a neighboring State which she could put to great advantage with the Nurses in Sikkim. This suggestion was reinforced from an entirely different source outside Nursing that with State Government approval of leave on pay this Nurse would become an ambassadors for Nursing in Sikkim which would in turn bring national recognition.

It was clear that by Nurses helping Nurses genuine interest was being generated by other significant people in Sikkim whose suggestions were much appreciated.

While I would dearly love one day to visit the highest PHC in India, it is much more important that Nurses in Sikkim and the other States, are encouraged to reach out to one another and learn how better to draw on the Kingdom power of the Living Christ to overcome the very real challenges and obstacles that have hitherto prevented them being and doing what they know is possible.

Cost of Obedience

It would not be right to conclude this section without reference to the cost to others when Nurses genuinely seek to know the Will of God professionally and seek to walk in obedience to His direction.

In the earlier section titled 'Goodwill that is beyond price' reference was made to the more tangible costs of hospitality, time, money, and 7 days of personal presence and assistance.

There is another type of hidden but very real cost which Nurses must appreciate.

The Deputy Director Nursing who gave so much help prior to and on my arrival, suffered the loss of her elderly mother and was therefore on leave from the latter part of my first week in Sikkim.

Leave or no leave, grief is suffering. Her first grief was filial thus mixed with relief and loss. She had the assurance that her mother was not only out of her suffering in this world but that they would be united in the Kingdom of God for all eternity because of their confidence in Jesus words.

**'My sheep hear My voice, and I know them, and they follow Me.
And I give them eternal life and they shall never perish, neither
shall any man pluck them out of My hand.'** **John 10:27-28**

Her second grief was professional caused by the reaction of the few Nurses to our sessions who had the ear of the Secretary of Health or some other official who wielded power. Thus her word would have been demolished by those unqualified to do so but who wielded the black power of a depraved world.

A 2nd cost was the continued professional deprivation for all the Nurses in the remote areas of the State

A 3rd cost was the silent grief carried in the heart of all the other thinking caring Nurse Administrators who have a vision for Nursing in Sikkim

A 4th cost was the immediate set back to the development of Nursing Services by the effort of Nurses who may have been inspired and were now caught in a dilemma .

Professional Cost can become Professional Gain

The Worth of Prayer

1.
What various hindrances we meet
In coming to a mercy seat;
Yet who that knows the worth of prayer,
But wishes to be often there.

2
Prayer makes the darkened cloud withdraw,
Prayer climbs the ladder Jacob saw;
Gives exercise to faith and love,
Brings every blessing from above.

3
Restraining prayer, we cease to fight;
Prayer makes the Christian's armor bright;
And Satan trembles, when he sees
The weakest saint upon his knees.

4
While Moses stood with arms spread wide,
Success was found on Israel's side;
But when through weariness they failed,
That moment Amalek prevailed.

5
Have you no words? Ah, think again,
Words flow apace when you complain;
And fill your fellow creature's ear
With the sad tale of all your care.

6
Were half the breath thus vainly spent,
To Heav'n in supplication sent;
Your cheerful song would oft'ner be,
"Hear what the Lord has done for me."

By William Cooper