

## Nursing Advocacy

### Sikkim Leads the Way

With visionary innovative thinking.  
This thinking must be put into practice for the benefit of  
the Community and Nursing Services of the State.

Even a glimpse at the war zones around the world reveals something of the critical condition Nurses are in. Where insurgency, militancy and straight out war is the order of the day in a world awash with weapons including 64

0 million firearms or one gun for every 10 people on the planet. A world in which most media depictions are blatantly denigrating to Nurses.

It is time that Nurses rose above the banality of politics, culture and religion and united under the hand of the Almighty God to allow Him to work a mighty work of redemption in the Health Services and Society through Nursing.

I said to the man who stood at the gate of the year

“Give me a light that I may tread safely”.

He replied,

“Go out into the darkness and put your hand in the hand of God and  
that shall be better than a light and safer than a known way.

### The Siren Screams

*The tremendous loss of life of Nurses* e.g. in just over 3 ½ years well over 160 Iraqi Nurses killed and more than 400 wounded. Add this to the loss of both military and civilian Nurses in other parts of the world, plus the fact that in 2006 such deaths trebled in the second half of the year

The large number of Nurses fleeing from all war zones where their services are so much needed.

The constant exit of Nurses fleeing from impossible Nursing situations in areas heavily affected by AID's or other nefarious and loathsome conditions that require competent compassionate Nursing care.

The large number of Nurses who go overseas for better job opportunities and financial remuneration

The consistent poaching of Nurses by Western countries to fill their vacancies.

### The price Nurses pay in a Depraved Fallen World

#### Warning bells

#### The Fallen Angels at work in the Health Services.

1. Nurse caring for 150 patients results in physical violence and even death by patients and their relatives who are understandably in great distress.
2. Nurses caring for 100 women in labour = 2 Nurses caring for at least 200 mothers and babies.
3. Community health allocated to the least qualified, lowest paid Nurses who are all too often subjected to the humiliation of inadequate basic living conditions, no security or proper transport, minimum equipment, resources and facilities to serve all echelons of society.
4. Nurses employed on contract basis on drastically reduced salaries. Prepayment cuts channeled to benefit the Medical Directors, Superintendents, and other non- Nursing personnel.
5. Private Hospitals and Colleges of Nursing flourishing as profit making institutions that feed on the lifeblood of the students in training and the few qualified Nurses in Service.
6. Drug houses that are set up in blatant opposition to Government drug policy for patients and allowed to flourish in the hospital with the Medical Director's approval and reward.
7. Millions of Nurses with a grossly inadequate preparation and no subsequent opportunity for Professional development. *Sikkim, through Nursing, could provide true Ministering Spirits*

**A Message from the four Districts of Sikkim**  
**Shingthom is named after the Wood Bears that climb trees.**  
**Gyalshing is the 'King's Forrest',**  
**Namtchi – am = Sky, Tchi – Top Hills.**  
**Maga (Mangan) means 'not to like' and 'Don't Smile'.**

**The name of each of the four districts of Sikkim** has been aptly chosen and is not without significance. Together they hold an exciting message for Nurses.

**Each name** triggers enormous mental and physical vision-related activity. Wood bears climb trees to get a greater vision, the King's forest is expansive, filled with variety, purpose and pleasure, and to be at the top of the highest hills with a magnificent view of Gangtok the capital and Darjeeling in the adjoining state of West Bengal is quite something. Maga brings the response and reaction of the many people groups to repression, oppression and suppression of true justice.

**Nurses of Sikkim** have the potential to lead the way in Nursing Advocacy, not all bears can climb trees but the Sikkim Nurses could. Not everyone can enter the 'Kings Forest' but the 'King of Kings' who not only said *'He will never leave us nor forsake us'* and when praying as 'Son to the Father in Heaven' said *"All mine is Yours and all Yours is mine and I am glorified in them."* John 17:10

Unleashed, the vibrancy of Nurses in Sikkim could well let the Glory of the LORD fill and flood the Health Services of Sikkim and shine out into the Nation and into the world.

**The Beginning**

It is to the credit of Sikkim that one Chief Medical Officer invited us to her office where she first raised the issue of the dismal record of non-recognition of Nurses in Sikkim, and then served us lunch..

This was the very first time I had heard a Medical Officer express genuine concern that Nurses in the Districts be recognized and appreciated for their service, with suggestions that we could endorse.

This discussion lacked the superficial spurious rhetoric that is commonly presented in strategic gatherings, when a doctor wants to impress those present, which never fails to leave one cold.

Dr. (Mrs.) C. Yethenpa made it clear that any body and every body, *except Nurses*, were shown appreciation on important public occasions such as Republic and Independence Day.

**Another ministering Angel at work!**

In addition this CMO stressed the importance of our meeting as many Nurses in these widely scattered, remote PHC's as possible, and in particular not to miss out the Nurse in the PHC situated at the highest point in the whole of India. Though this was also the desire of my heart, sadly it was not possible.

Her appreciation of the work and hardship the Nurses in these more remote areas were subjected to with absolutely no encouragement, showed clearly her understanding, empathy and caring concern, which can only be attributed to a Doctor of integrity having worked closely with many of these women.

Nursing With A Difference not only appreciates Dr. (Mrs.) C. Yethenpa's insight and concern but whole heartedly endorses her request for action by the State Government.

**Endorsement and Recommendation**

**That on the two key functions for the Nation, Independence Day and Republic Day**

- ✓ All Nurses in the District PHC's to receive a certificate and letter of appreciation for their services.
- ✓ Provision be made for a regular monthly one day carefully planned retreat for professional growth to strengthen and extend each Nurse's competence thus enhancing their value.
- ✓ Travelling and Daily expenses to be provided by the Ministry of Health.

## Nurses fighting their own war

Unjustified adverse publicity directed at Nurses is a world wide phenomena Sikkim Nurses could take the lead for India in helping to redress this situation which is growing worse by the day:

**Baltimore, MD, January 10, 2007** -- The Center for Nursing Advocacy has announced its fourth "Golden Lamp Awards," the group's annual list of the best and worst media portrayals of nurses. The 2006 list includes a range of media from all over the world.

**Among the "worst" award recipients were the Nobel Prize-winning Médecins Sans Frontières (Doctors Without Borders), Italian political leader Silvio Berlusconi, nurse recruiting campaigner Johnson & Johnson, and hit Hollywood shows including ABC's "Grey's Anatomy" and Fox's "House."**

A few Nurses with a vision in Sikkim, having chosen to be Nurses ought to be the nucleus of change within the profession that leads Nursing in Sikkim to become known for its true value and strength.

To this end 6 Nurses need to have a computer, printer, landline and triband installed in their homes. Government has to recognize that these Nurses are heavily over-committed on duty due to the grossly inadequate staffing levels. To be realistic and effective each Nurse has to fit this work in around her home and other responsibilities which will mean working late at night or early in the morning.

It is inexcusable that the key Nurses in the Ministry of Health and Family Welfare have no computer or telephone facilities in their cabins which are grossly inadequate for effective functioning.

The same provision is essential for the Nursing Superintendent in her office where the Nurse Administrators have direct access to essential information as well as becoming competent to streamline much of their recording systems for greater effectiveness. Time has to be saved for Nursing functions.

This means two computer facilities specifically for the Nursing Cell of the Ministry of Health and at least one for the Nursing Superintendent's Office in Gangtok, one for the office of her counterpart in each District Hospital, plus two for Nurses in their homes in Gangtok and one for a Nurse in each District. Thirteen computer facilities will enable all Nurses to receive and use information to upgrade .

Considering the State does not have a functional Nursing Council, there is no Continuing Education for Nurses, very few Nurses have been out of the State for short programs and none for substantial higher studies, only 1 has Post Basic B.Sc. with 2 currently enrolled at IGNOW, it is incumbent on the State who has the ultimate responsibility for the quality of Health Services in which Nurses comprise the largest part, to help these Nurses make a significant contribution in the shortest time possible.

A Nurse's son, already competent in the field of computer technology who is established in Gangtok ought to be the key person appointed to ensure the best computer equipment and help is given the Nurses so that they can quickly learn to draw on the best international resources available.

Nurses ought to know that Central Government provides substantial funding, at least 3 Lack for

The Secretary of Health may state there are no funds, this has to be seen for what it is, a political ploy by those that hold the purse strings to keep Nursing Services at an unacceptably low state. It is misappropriation of funds. the upgrading of Nursing, this is in addition to the State's responsibility to allocate funds for the same.

### The Fallen Angel's work based on lies is never ending

Therefore the action by Nurses has to be carefully planned, preceded and surrounded by effective fervent prayer for the mighty work of the Holy Spirit to over rule in the life of all involved so that integrity and justice become the hallmark of the Health Services of Sikkim

All resources come from and belong to the God of Creation.

They have been entrusted to man to manage and to use for the benefit of all, not the few as is current practice.

Those who administer the Health Service funds will be held accountable on the Day of Judgment.

Nurses can be the instruments God uses to help these 'Purse-string-holders' save there souls before it is too late to repent.

## The Nursing Council of Sikkim

Nurses without a vision perish. The delay in establishing the Nursing Council of Sikkim will best be achieved after the Nurses have come together for a 3 day retreat.

The Fallen Angels have done all to thwart this just due for the Nurses of Sikkim. Their next ploy will be to get a 'politically acceptable toothless Council' formed that will bring dubious glory to the State.

When Nurses have prayerfully worked together over each issue mentioned and others that will arise from their collective wisdom, they will be able to say like Nehemiah 'the mighty hand of God was and is upon us', Nehemiah accomplished in 52 days what had not been possible in 15 years. Such is the intervening power of God when His children seek to know and fulfill His will.

*This same power is available to every Nurse in the 21<sup>st</sup> Century*

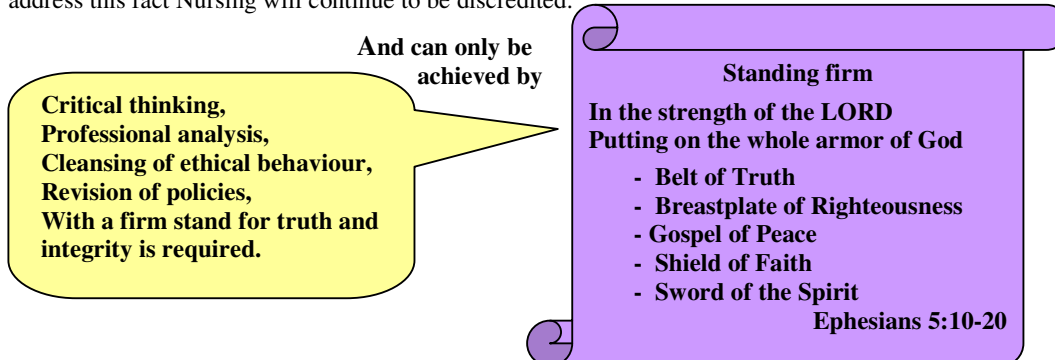
### Reward for Nurses and the Health Services of Sikkim

The Outcome of the above mentioned activities will be

- ❖ One of joyful reconciliation
- ❖ Producing fruits of quality Nursing Services
- ❖ The cause of State and National pride.

## Nurses the Cause of Suffering

Nurses are not exempt from the wiles of the spirit of selfishness that pervades the world and unless we address this fact Nursing will continue to be discredited.



That Nurses deserve a better deal in relation to salary is not questioned

**However Leave is another issue.**

A significant cause of leave problems is due to Nurses with tunnel vision and a selfish spirit that comes from the evil forces of an uncaring, greedy depraved world.

### Justified Leave

- ✓ The earned right of authorized annual leave
- ✓ Allocated per annum casual leave
- ✓ Allocated medical leave availed for self or for caring for her sick child
- ✓ Allocated maternity leave
- ✓ Authorized study leave
- ✓ Authorized sabbatical leave.

### Unjustified leave

Long leave overseas for personal financial gain  
Unpaid Leave post delivery  
Extended leave at festival times

**Behavioural Changes require courage**

Unsophisticated seekers and new believers take God at His word, approach Him in total simplicity, and God strengthens and encourages by giving them miracles.

## **Rationale**

When one third of the Nursing Staff are on Leave at any one time and 50% are availing unjustified Leave

- Nurses services are grossly under staffed
- Nurses on duty are grossly overworked
- More Nurses avail sick leave due to stress and inability to cope
- Patient care suffers
- Nurses are subject to verbal and physical violence from dissatisfied patients and their families.
- Nurse's marriage and family suffer

**With Nursing Shortage** a world wide phenomena and the current focus by WHO and the International Council of Nurses,

It would be to their credit if Sikkim Nurses come up with a workable solution that could influence the whole of India and the world.

## **Suggestion that lead to viable solutions**

These suggestions are offered on the basis of past experience and not just erudite thinking.

1. The first and foremost action is for Nurses to address every detail of the current shortage in prayer to our Creator and Sustainer for insight and wisdom.
2. This requires Nurse Administrators to review staffing patterns with the current ceiling levels, to determine the shortfall. Prayer must be specific if wisdom is to be granted.
3. The revised staffing plan should include a 'pool' of a determined number of Nurses to cover for those on leave.
4. Long leave extended for more than one earned year, the Nurse should be taken off the Staffing allocation to allow a replacement to be made to maintain actual staffing levels.
5. This Nurse may be placed in a special category of Pool Nurses who may be reinstated and obliged to undertake whatever duty is available when applying. Seniority in years or experience must not be the criteria for position in these cases.
6. Review of duty hours and actual hours worked. It would appear that Nurses in Sikkim presented for duty on time and worked their full shift which cannot be said for most Government Hospitals in India. Stealing time from patients is sin. Stealing money for services not rendered from Government is sin.
7. Transfers and appointments must be managed by the Senior Nurse Administrators and not influenced by the political pundits with their associated buttering.
8. All bribery and any corruption practices, which are covert but known, must be overtly recognized and stopped. This requires availing the power of God's justice.
9. While Nurses cannot expect answers to prayer from a Just God when indulging in wrong practices, we have the assurance that forgiveness, cleansing and the power to manage home and family and duty will be granted when there is genuine repentance and commitment to change.
10. It must be understood that wrong practices can never be effectively addressed or overcome without a genuine yielding of body and mind to God. That which is conceived and formulated in the mind is carried out in the body. It is not just a willingness to do but rather a decisive act by the individual to the will to God. The result is a transformed mind and thinking that brings about significant changes as the body works.

11. Nurses must appreciate that the devil and his fallen angels will do anything to pervert the law of justice in Nursing. Therefore, the need to be strong in the wisdom of God to get and keep the victory.
12. Specific Prayer for the Secretary of Health, other officials and all those employed who 'take their cut' along the way. They need the Spirit of Truth and integrity as much as Nurses do.
13. There may well be repercussions, but these must serve only to make each Nurse stronger and more committed at the throne of Grace and in the practice of Nursing.

#### Nurses in Sikkim

Have all the potential and could lead the way in redressing the staffing shortage in their own State.

Then to actively help Nurses, initially in neighboring States, and ultimately influencing the whole of India and the world..

**Appendix III** follows this page for ready reference and positive reinforcement it presents the key points taken in the ICN position paper displayed on their website.

### Priorities to Address Global Nursing Shortages Announced

Nurses in Sikkim, with the courage and vision to combine the thoughts presented in this resume with the best the world of Nursing offers and add to them their own insights and convictions, could provide a very practical and achievable solution to the current most alarming dilemma in Nursing.

The following is the latest list on the International Council of Nurses website.

- [19 December 2006 — NURSE MIGRATION CALLS FOR GLOBAL EDUCATIONAL STANDARDS](#)
- [13 June 2006 — ICN ISSUES A STRONG CALL FOR AN EFFECTIVE, FUNDED UN AGENCY FOR WOMEN](#)
- [25 May 2006 — NEW GLOBAL ALLIANCE SEEKS TO ADDRESS WORLDWIDE SHORTAGE OF DOCTORS, NURSES AND OTHER HEALTH WORKERS](#)
- [29 March 2006 — PRIORITIES TO ADDRESS GLOBAL NURSING SHORTAGES ANNOUNCED](#)
- [10 February 2006 — INTEGRATION OF INTERNATIONAL NURSES: FOCUS OF UPCOMING CONFERENCE](#)
- [1 December 2005 — HEALTHY AND VALUED HEALTH WORKERS ARE ESSENTIAL TO SAVE HEALTH SYSTEMS IN SUB-SAHARAN AFRICA](#)
- [14 November 2005 — NEW PUBLICATION ON MIGRATION BY ICN NURSE CONSULTANT](#)
- [24 May 2005 — CGFNS AND ICN LAUNCH NEW 'INTERNATIONAL CENTRE ON NURSE MIGRATION'](#)

#### **Psalm. 37:23:24**

“The steps of a good man (Nurse) are ordered by the LORD: and He delights in his way.

Though he fall he shall not be utterly cast down; for the LORD upholds him with His hand.”

Nurses who have the courage to address Transport deficiency, inadequate physical structure and supplies in the work environment, poor interpersonal relationships and all other issues that limit Nursing effectiveness, in a similar way will in time reap their reward with the joy of success.

**Justification based on integrity and facts is central to good advocacy**

## Precious Lord Take My Hand

Words & Music by Thomas A. Dorsey

Precious Lord, take my hand  
Lead me on, let me stand  
I'm tired, I'm weak, I'm worn  
Through the storm, through the night  
Lead me on to the light  
Take my hand precious Lord, lead me home.

When my way grows drear  
Precious Lord linger near  
When my light is almost gone  
Hear my cry, hear my call  
Hold my hand lest I fall  
Take my hand precious Lord, lead me home.

When the darkness appears  
And the night draws near  
And the day is past and gone  
At the river I stand  
Guide my feet, hold my hand  
Take my hand precious Lord, lead me home.

Nearing journey's end  
Be my friend, be my guide  
Give me strength, to overcome  
I'll not go alone,  
For by grace I'm Thine own;  
Take my hand, precious LORD,  
Lead me home.

Precious Lord, take my hand  
Lead me on, let me stand  
I'm tired, I'm weak, I'm lone  
Through the storm, through the night  
Lead me on to the light  
Take my hand precious Lord, lead me home.

Grief and suffering in its many forms surround Nurses threatening to overcome and engulf each one along the way.

May the facts and basis of this song found on the next page act as an encouragement for overcommitted, disillusioned Nurses who are justifiably tired of struggling against odds in difficult situation and yet must press on.

### A TRUE STORY ON THE HYMN PRECIOUS LORD

The Birth of "Precious Lord" by Tommy A. Dorsey

Back in 1932 I was 32 years old and a fairly new husband. My wife, Nettie, and I were living in a little apartment on Chicago's Southside.

Note: this black gospel composer should not be confused with Tommy Dorsey the white bandleader

One hot August afternoon I had to go to St. Louis where I was to be the featured soloist at a large revival meeting. I didn't want to go. Nettie was in the last month of pregnancy with our first child. But a lot of people were expecting me in St. Louis.

I kissed Nettie good-bye, clattered downstairs to our Model A and, in a fresh Lake Michigan breeze, chugged out of Chicago on Route 66.

However, outside the city, I discovered that in my anxiety at leaving, I had forgotten my music case. I wheeled around and headed back. I found Nettie sleeping peacefully. I hesitated by her bed; something was strongly telling me to stay. But eager to get on my way, and not wanting to disturb Nettie, I shrugged off the feeling and quietly slipped out of the room with my music.

The next night, in the steaming St. Louis heat, the crowd called on me to sing again and again. When I finally sat down, a messenger boy ran up with a Western Union telegram. I ripped open the envelope.

Pasted on the yellow sheet were the words: YOUR WIFE JUST DIED.

People were happily singing and clapping around me, but I could hardly keep from crying out. I rushed to a phone and called home.

All I could hear on the other end was "Nettie is dead. Nettie is dead." When I got back, I learned that Nettie had given birth to a boy. I swung between grief and joy.

Yet that night, the baby died.

I buried Nettie and our little boy together, in the same casket. Then I fell apart. For days I closeted myself. I felt that God had done me an injustice. I didn't want to serve Him any more or write gospel songs. I just wanted to go back to that jazz world I once knew so well.

But then, as I hunched alone in that dark apartment those first sad days, I thought back to the afternoon I went to St. Louis. Something kept telling me to stay with Nettie. Was that something God? Oh, if I had paid more attention to Him that day, I would have stayed and been with Nettie when she died.

From that moment on I vowed to listen more closely to Him. But still I was lost in grief. Everyone was kind to me, especially a friend, Professor Fry, who seemed to know what I needed. On the following Saturday evening he took me up to a neighborhood music school. It was quiet; the late evening sun crept through the curtained windows. I sat down at the piano, and my hands began to browse over the keys.

Something happened to me then. I felt at peace. I felt as though I could reach out and touch God. I found myself playing a melody, one in my head - it just seemed to fall into place:

Precious Lord, take my hand,  
Lead me on, let me stand,  
I am tired, I am weak, I am worn,  
Through the storm, through the night  
Lead me on to the light,  
Take my hand, precious Lord,  
Lead me home.

As the Lord gave me these words and melody, He also healed my spirit. I learned that when we are in our deepest grief, when we feel farthest from God, this is when He is closest, and when we are most open to His restoring power. And so I go on living for God willingly and joyfully, until that day comes when He will take me and gently lead me home.