

Where are the nurses?

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I had seen the same woman lying on a stretcher on the path, half a day's walk from the hospital. Some days later, when I was flying back to Kathmandu from the tiny airstrip at Phaplu in the lower part of Solukhumbu, writhing with pain, she was carried into the tiny Yeti plane. She was in labour. It was a breach and the hospital there could not help her. She was being flown to Kathmandu in the hope that she and the baby could be saved.

On my way to Phaplu the day before, a young boy, his face grimacing with the pain was walking to the hospital there. He had also come from Deusa, where his arm had been bandaged and put in a sling. Maybe it was broken. The healthpost at Deusa is unstaffed. Dilkumari Rai works overtime caring for the pregnant mothers and giving babies inoculations. She is not a qualified nurse, but tries her best to help whenever she can. The healthpost in Deusa stocks paracetamol and antibiotics, but nothing else.

In Kathmandu, there are hospitals, clinics, doctors and nurses. Highly trained doctors and nurses work in well-equipped hospitals. There is healthcare to match all pockets. Doctors work their shifts in the government hospitals, then by lunch time are off to work in one, two or more private practices for a few hours here and there, across the city and its suburbs. Along with the nurses working in Kathmandu and other cities, they are happy to take advantage of the sophistication urban living brings: electricity (even if there are powercuts), water (even if this runs short at times), shops, transport and communication. Teaching English to nurses in Kathmandu, they would tell me "Kathmandu has lots of facilities. Life in the village is hard." Many nurses dream of working abroad, where they can earn much more money and escape the poverty in Nepal.

In the countryside, it is a very different story. Doctors cannot earn the multiple incomes that the private clinics in the city bring. Life is much harder in the countryside. Most villages in remote areas do not have electricity. Communication is difficult, transport even more problematic, especially in the hill and mountain districts.

Healthposts serve the healthcare needs of the rural population. In most villages, there is a healthpost or sub-healthpost. Often run by unskilled and under-qualified people, it is difficult to find a qualified nurse, let alone a doctor. Even more difficult, is to find one who will stay and not leave for the bright lights of the city after a year or so.

So no wonder Nepal suffers the highest maternal death rate in the world. No wonder that infant mortality is so high. No wonder that life expectancy in the countryside is maybe twenty years less than that of Kathmandu. When over 80 percent of the population live in rural districts, the healthcare that is available to the vast majority of the population is very inadequate.

Phaplu hospital, located near to Saleri, the District Headquarters of Solukhumbu, now runs with just two qualified nurses and a few juniors assistants. There is medical equipment, but no doctor to operate it. Other than going to Kathmandu — a flight or four days on foot to Jiri and a six hour bus ride, the nearest hospital from Phaplu is one in Lukla, two to three days on foot, that was set up by a generous benefactor.

On the positive side, where there are qualified nurses, like at the healthpost supported by Community Action Nepal in Gunsar, about three hours' walk from Phaplu, here they have saved lives and run an effective healthpost that provides good healthcare to the community. However, this is privately supported and not the norm. One of the nurses there had to operate when a woman was bleeding after giving birth. Action was needed immediately. Now this woman brings her presents all the time: "She's grateful, I saved her life."

Like teachers — who also prefer to teach in the towns where they too supplement their main job by tutoring or even working in more than one school at a time, doctors and nurses do not want to face the harsh environment found in most villages.

So what are my chances to find a qualified nurse, willing to work in Solukhumbu, at a sub-healthpost in Deusa village in the foothills of Everest? Will this be as difficult as finding a teacher for the secondary school there? My experience from a year ago, of interviewing and offering the job to four candidates who in turn turned the post down after at first accepting but then getting cold feet about

living in a village, still haunt me. Eventually, an undergraduate in the middle of his science degree, from a village not far from Deusa, took up the job. Fed up with life in Kathmandu and keen to be near home, he is studying while he works as a science teacher and has no problem with village life.

We have posters plastered in all the nurses' hostels and the hospitals of Kathmandu hoping to find a nurse from Solukhumbu who wants to go and work nearer to home, or misses life in the countryside to that in the city.