Holistic Nursing in La Paz Bolivia

Rebecca Lauren Smith

University of Tennessee - Knoxville

Follow this and additional works at: https://trace.tennessee.edu/utk_chanhonoproj

Recommended Citation
Holistic Nursing in La Paz, Bolivia: A Student’s Perspective
Rebecca Lauren Smith, BSN student
University of Tennessee at Knoxville
Knoxville, Tennessee
rsmith57@utk.edu

Carolyn Robinson, PhD, MPH, RN
Associate Professor of Nursing
University of Tennessee at Knoxville
Knoxville, Tennessee
crobins1@utk.edu

Correspondence should be addressed to:
Dr. Carolyn Robinson
836 West Woodchase Road
Knoxville, TN 37922
Phone: (865) 671-8071
Holistic Nursing in La Paz, Bolivia: A Student’s Perspective

As nurses, it is imperative that we recognize the inseparable bond between the physical and emotional dimensions of an individual. It was not until I took a trip to South America that I began to understand those complex emotional dimensions as they applied to my personal life, as well as my life in the health care field. I began to see myself and my role as a nurse as more than a medication distributor or “I.V. starter” and realized my potential to become an instrument of healing for myself and others. Dr. Barbara Dossey and Dr. Cathie Guzzetta describe the nurse who is an instrument of healing as one who “creates a healing space within herself or himself that can enhance the opportunity for another to feel safe” (2000, p.6). In other words, creating a safe environment for a person encourages a therapeutic relationship and promotes an individual connection through security and trust, which are critical elements in nursing practice.

This valuable, yet simple, lesson was one of many I learned during the summer before my senior year of nursing school spent in La Paz, Bolivia. My classroom became the slums and street corners of a third world country, and my professors were natives who worked alongside me teaching me the importance and power of healing by connecting with people as individuals, not just as patients.

During my ten weeks in Bolivia, I worked with the homeless population through a faith-based organization, Amor en Acción, which performed basic wound care, weekly visits, and focused on building relationships with the people. When literally translated, Amor en Acción means “Love in Action,” and I cannot imagine a more fitting name for a group that strives to incorporate the healing of mind, body, and spirit. This volunteer ministry consists of college students and young adults who work with underprivileged
populations of La Paz. The purpose of Amor en Acción is to offer support and guidance to those people who are often overlooked by the rest of society and help them rebuild their lives by getting off the streets. The group goes every Saturday night into the slums of the city and offers food, basic wound care, clothing, and emotional support to those living on the streets. In addition, weekly visits are made by one or two of the volunteers who continue to build the relationships with this population. The weekly visits serve as a time to incorporate more social services such as transportation to rehab centers, assistance with food/clothing, and obtaining medicines that may be needed.

Those street corners, those places in which cardboard boxes were homes and newspapers were blankets, became my clinic and, subsequently, the places in which I learned how to become an instrument of healing through authentic interaction and trusting relationships. Indeed, when working with vulnerable populations such as the homeless, establishing and maintaining trust between the nurse and the patient is of principal concern. In order to promote and encourage communication and respect, the patient must feel comfortable with the nurse and know that person can be trusted. Only then can there be a safe environment for both to share in a genuine, caring relationship.

Often times, as nurses, it is difficult to describe those moments in which the “healing” occurs, that exact second that one knows that he or she has not only fulfilled one’s role as a nurse but truly connected with another human being. In Holistic Nursing: A Handbook for Practice, Janet Quinn captures the essence of that very experience. Quinn writes, “In these moments with patients, there is often a felt sense of awe, reverence, and wonder. Nurses intuitively know that they are standing on holy ground, that they are in the presence of something sacred” (2000, p. 43).
I can think of no better word than sacred to describe my experiences with Amor en Acción. I realize it may seem odd to describe interacting with a homeless population or those addicted to drugs as sacred, but for me, the connections I made with that population and the things I learned as a result of being in their company are those very things that encouraged me to think and act holistically.

I can recall one Saturday night, in particular, in which I knew that I was standing on that “holy ground” that Quinn mentions. It was the fifth Saturday I had been out with Amor en Acción, so I was feeling more comfortable in my ability to communicate with the patients (in Spanish, of course) and also more confident in performing the wound care that the group provides. That evening many people needed to be treated and as such, the medical student who volunteers with the group gave me one of the two tackle boxes filled with medical supplies and told me to start working with half of the patients while he worked with the other half. Please note that when I say “medical supplies” I am referring to the bare essentials i.e. antiseptic, hydrogen peroxide, triple antibiotic ointment, Band-Aids, gauze, and tape.

My first patient, Rodrigo, was a man in his early thirties, worn and weathered from living in the streets for many years. He wore the streets on his clothes and had an unpleasant odor that was a blend of urine, sweat, gasoline, and glue. The gasoline and glue are actually a mixture that many of the homeless people make and then huff in order to get high and/or relieve hunger pains. Rodrigo had a gash over his left eye, (approximately $\frac{1}{2}$ inch by 3 inches) and a large knife cut (approximately one inch by seven inches) on his right forearm. It is not uncommon for the patients in the streets to
have multiple cuts or abrasions and many of these injuries are usually the result of fights in the streets involving either knives or broken glass bottles.

I began to treat the wound over this man’s eye with the most basic supplies that we had i.e. an antiseptic agent similar to alcohol (know has “DG-6” in Bolivia), hydrogen peroxide, and an antibiotic ointment. Supplies were fairly limited and as such, so was the treatment that we provided for the patients. However, the moment I began to work on this man’s wounds, he started to thank me for the “excellent” care I was giving him.

Rodrigo repeatedly said “¡Gracias, Doctora!” which translated means, “Thank you, Doctor,” even though I had told him several times I was just a nursing student from the States. In fact, he repeated thanked me for my kindness, for attending to his wounds, and, I suspect, for simply giving him positive, individual attention which he apparently had not received in a long time. He essentially thanked me for being present with him in that moment, for caring enough to sit on a dirty street corner at 11 PM on a Saturday night and tend to his wounds.

What I did for this man was, by no means, miraculous. There was a very high probability that the next day the bandages that I had put on his cuts would become soiled, and his wounds would become infected again. It was also very likely that Rodrigo would have more cuts and injuries the next time I saw him, but for that moment, I could give him the care he needed. At that point in time, I could be present physically and emotionally for a man who needed someone and offer him a safe, caring place in which to interact and connect with another human being.

How is it then that this experience transcended the ordinary and was powerful enough to remain sacred in my mind? Here I was, a nursing student from Tennessee,
who rarely dealt with the poverty in my own country connecting with a man living in the epitome of brokenness in a third world country. I felt, in that moment, we were enveloped in the power of humanity, by our ability to relate to one another at the most basic level. We were both human, we both faced our own struggles, and despite our numerous differences in culture, language, and circumstance, we were connecting as two individuals; two people frozen in a healing moment. It was then that I realized that humanity is the unbreakable thread that weaves us all together. Regardless of where we are, whether we are standing over the bed performing the assessment or lying in the bed waiting for the test results, we are all intricately, emotionally, and spiritually bound by the sole fact that we exist together.

My time in Bolivia served as the catalyst in forming the holistic perspective that I continue to apply in my nursing practice and daily life. Understanding more about myself, recognizing the importance of relationships, and realizing that we all connect to our patients on the most basic level are experiences that happened in just a few short months but will last me a lifetime. When working with a variety of populations in diverse and unique settings, foundations are built that shape us into more compassionate, holistic nurses.

Connecting with others, by its very nature, encourages holism. It is a process in which two find a common bond that unites them and become a whole instead of two separate parts. In the field of nursing, there is always healing that needs to occur and as a result, there is always that potential for connecting with an individual in that process. For me, this concept came alive while I was in Bolivia, and I finally had a visual image of what it meant to have a healing relationship that explored the intellectual and emotional
dimensions of the individual as opposed to just focusing on the physical problem. However, the location is not nearly as important as the realization. I have no doubt that my life was enriched by the time I spent in Bolivia, and I am hoping to return to La Paz and work with Amor en Acción again. The reality is that we could be in Bolivia or Boston and in both places find those experiences that encourage us to learn more about ourselves and our profession. As nurses, we are given the distinct privilege to help others find healing physically, emotionally, and spiritually. Yet, the greatest reward comes when our patients and our experiences invite us to participate in that holistic process. Through holistic healing, we realize that we are part of something greater than any illness, and it is in that moment in which we become true instruments of healing.
References
