



# CHIRAG

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## India, Finally!

by Sophie Low-Ber

**I had wanted to go to India for as long as I can remember.**

My father's stories about playing polo with maharajas, having tea at Udaipur's Lake Palace and hiking through Himalayan rhododendron forests were what first inspired me. And then, probably as a result of growing up in an economically, politically and climatically temperate place like Vancouver, I became

drawn to the extremes India offered: rich and poor; hot and cold; wet and dry; unbearably crowded cities and sparsely populated mountain villages; clearly designated gender roles and two often conflicting religions.

I felt mentally prepared to go after graduating from Queen's; waiting on tables for four months provided me with the means. All that was left was to find the perfect volunteer development position. Determined not to perpetuate the north-south stereotype by working on a culturally insensitive project put together by some top-down Western agency, I found it difficult to locate such a position. Luckily, almost giving up on securing something before my departure, I spoke with Sarah McAlpine, who gave me Kanai Lall's address at CHIRAG, in Sitla, Uttar Pradesh.

Kanai and I corresponded in December and it was arranged that I would arrive in May and help with one of CHIRAG's health care projects sponsored by CIVA. His letters were friendly, enthusiastic and full of assurances that my work would serve a purpose.

I left Vancouver in a flurry, literally, and arrived some 23 hours later in war-torn Sri Lanka. Spontaneously deciding to spend two weeks there, I then flew to Madras. Slowly making my way over to Kerala and up the west coast of India, I felt surprisingly comfortable and confident bargaining for mangos and bananas, sitting on curbs to watch samosa being made, and helping to bake Naan in a small Kerala village. With every step, overnight train trip and make-shift accommodation, I



became more and more interested in India. I felt at home moving from place to place and was eager to see as much of the country as possible. Still, I was eventually prepared to shed my traveller's coat and settle down for two or three months in one place, in the sweet picturesque town I imagined Sitla to be.

Unfortunately, when I arrived exhausted after an arduous 28-day trek above the Everest Base Camp, Kanai wasn't there to greet me and his wife Lakshmi had no idea who I was. Incredibly, she invited me into their home anyway and offered me a fresh garden salad and some homemade chocolate chip cookies. As one can imagine, after travelling for five months on a five-dollar-a-day budget, these gustatory delights were so overwhelming that I almost forgot to be disturbed that neither my face nor my name had elicited any spark of recognition on her part. It wasn't until Kanai arrived a few hours later and also couldn't place my name that my feelings of unease returned. In desperation I sorted through my pack for the letters he had sent me before, in a classic Indian-type flash, he remembered and, with exquisite demure and a warm smile, invited me to stay.

After a prescribed week of orientation and R & R, it was decided that I evaluate one of CHIRAG's oldest ongoing projects, the growth monitoring program. This involved hooking up with Miriam, the one health extension worker who spoke English, and visiting each of the ten villages in the Sitla block. After walking through apricot groves, along dirt roads or sometimes riding in the back of a truck or jeep, we would arrive at our destination, meet with the village health worker and, over many cups of chai, discuss the villagers' health. Then, scale and notebooks in hand, we were off to weigh infants.

Although I spoke only very basic Hindi, through gestures and Miriam's patient translation I managed to decipher most of the interactions. Our days were always full; when I would finally return to the Lalls' at nine or ten in the evening, worn out both physically and emotionally, I was very grateful for the opportunity to indulge in incredible food, a glass or two of plum wine and the BBC World Service.



As the villages were remote and poor, we could regularly count on having to do much more than weighing and measuring mid-arm circumferences. We usually brought immunizations, a bag of mixed first aid supplies, and Hindi and English copies of *Where There Is No Doctor*. Antenatal checks were also routine: I remember particularly

clearly trying, in my broken Hindi, to convince a women to come in from the field to give birth. I made a few diagnoses (mostly snake bites) and referred several people to Sushil, the only competent and licensed doctor close by.

One of these referrals was a 23-year-old woman suffering from pre-eclampsia. Her husband had come to the Sitla clinic and had asked Miriam and me to come back to his village to see his pregnant wife. We walked for four hours over terraced potato fields to arrive at what was undoubtedly the poorest home I had visited so far. His wife was lying on the mud floor moaning in pain; her entire body was swollen and she was having trouble breathing. I walked as quickly as possible back to Sitla to get one of CHIRAG's jeeps to take her, her husband, son and mother-in-law to Sushil's. Sushil made the diagnosis and strongly advised the family to take her to the hospital in Nainital. They said they didn't have enough money but would try to borrow some to take her the following day.

Four days later Miriam and I returned to her house to see how she was recovering—she hadn't. After seeing Sushil, her family had taken her to another "doctor" who had given her something to induce delivery. She delivered, went into shock, and both she and the baby died. In retrospect, what sticks with me most about this incident is the attitude of the family and villagers. To them this was not a tragedy, it was reality: *things like this happen*.

Writing up my report during my last few weeks in Sitla, I realized how much this incident, my time at CHIRAG and, in fact, my whole trip had opened my eyes. I now understand that values I had taken to be universal are not so, and that what is logical, reasonable and rational to me is not necessarily so to others.

After leaving Sitla I travelled to Dharamsala and to Laddakh. In eight months I had travelled the length of the Subcontinent, and miraculously had remained healthy. Peeling back the tin foil from my cup of airplane orange juice and focussing my attention on the in-flight movie *Waterworld*, I was already homesick for India, yet comforted by the knowledge that I would soon return.

—Former Board member *Sophie Low-Beer* is now practicing medicine in *Victoria*.

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