

Summer 2010: Himalayan Health Exchange – Lahaul Expedition

On June 18th 2010, I began my journey on an incredible experience. While waiting to board my flight to New Delhi, I felt anxious and excited. Having grown up in India, I thought being familiar with the country would prepare me for what I was about to embark on. In retrospect, there was no way I could have been ready for this type of an expedition. I had never been camping before and now I was on my way to set up tents in the Himalayas!

It is so difficult to articulate all the interactions, feelings and situations I was a part of. The purpose of the expedition was to set up healthcare tents in various villages in Himachal Pradesh, India. On our first clinic day, I worked in the pharmacy tent. It was unique in that not only did we visit new villages for each clinic day but I also had the opportunity to rotate through general medicine, pediatrics, ob/gyn and triage tents. Our supervisors on the trip were residents and physicians. Their expertise and knowledge was crucial in helping us learn and develop more clinical skills.

Another amazing aspect of this trip came from my interactions with the local villagers. To arrive in the inner Himalayas, we had to drive through Rohtang pass, a highway that traverses the peaks and valleys. At its highest point, it is at an elevation of 15,000 feet. This pass is only open during the summer. There is absolutely no way of getting to the remote villages we were in for three-quarters of the year, which means that the healthcare we provide, in its constraints, is the only healthcare the villagers receive.

Being able to speak to the locals in Hindi made my experience on this expedition a truly memorable one. The female patients had difficulty speaking about their reproductive health via our only translators, who were all middle-aged men. In many instances, the translators would alter the responses from the women or interpret their answers according to their cultural and gender-biased perspective. It was empowering for me to be able to help in those situations and serve as the primary translator. We were even successful in handing out birth control to women in these rural areas. I will never forget the one instance when a woman came back on our second clinic day to ask for me specifically so she could speak candidly about her health concerns. It was also humbling to see women who were my age or younger be so resilient. I cannot wait to go back on a similar expedition when I am in a position to provide more clinical knowledge. I know the emotional connections I made will only strengthen if I go back. The last thing this trip reminded me about is how insignificant my presence really is. I loved being able to stand next to a waterfall in between the vastness of the Himalayas, watch kids make toys out of rocks and be so elated at their creation. It made me value where I am in life and rediscover the reason why I wanted to pursue medicine in the first place – to take my insignificant presence to people in need.







