MEDICAL EDUCATION **Beyond the Classroom**

Text and photos by Sheryl Tan Yen Pin and Megan Chua

Sheryl is in her second year of study at NUS Yong Loo Lin School of Medicine. She is the founder of Popping The Bubble, a community project for healthcare students to serve the more vulnerable communities with greater understanding and purpose.



Megan is a second-year medical student at NUS Yong Loo Lin School of Medicine. She is a resident at the College of Alice and Peter Tan, and enjoys engaging with communities through the college's programmes in her free time.





From the coconut shorelines of the Alappuzha backwaters to the grandeur of the Himalayas mountain range, the National University of Singapore Study Trips for Engagement and EnRichment (STEER) trip to India opened the door to experiences and realities far beyond the Zoom screens that dominated our COVID-19 pandemic era university experience. We saw the lives of people in rural India with our own urban eyes. What we perceived to be challenges that they faced on multiple occasions gave us insights into their resilience.

We had read about their difficulties with water supplies, healthcare accessibility, electricity, and education outreach, but these were initially mere words and concepts. Experiencing their impact firsthand gave us a newfound, unforgettable perspective. We also remain in awe and respect that Kerala has one of the highest literacy rates in the world.

Travelling in the backwaters of the scenic stretch of lagoons and canals of Kerala and hopping off at various islands filled our naive minds with pensive thoughts. As we watched children carried on their mothers' backs, women hunched over scrubbing clothes against rough rock surfaces, and some diligently descaling the fresh fish for their families,



we deliberated the subtly engineered techniques that enabled Kerala to successfully battle the COVID-19 pandemic, as well as the hybridisation of traditional medication with their all-toofamiliar Western counterparts.

Despite prevailing gender norms, women played a quintessential role in the efforts against COVID-19. In Kerala, self-help groups such as the Accredited Social Health Activist (community healthcare workers part of an Indian Ministry of Health and Family Welfare initiative) and Kudumbashree (a poverty eradication and women empowerment programme implemented by the Kerala government) did not waver but tapped on their existing capabilities. They formed extensive WhatsApp channels to educate and engage the community on safety measures, reinforcing efforts by the Indian government. In addition, they ran cookhouses and learnt to sew cloth masks, augmenting Kerala's effective COVID-19 response.

Following our flight from Kochi to Bagdogra, driving up 2,000 m above sea level into the mountainside terraces of Darjeeling brought a plethora of new experiences. We were welcomed by Lamagaon's vibrant community where we saw how close-knit relationships formed the foundation of their sustainable healthcare efforts. Treading along the bumpy and winding road, the sparse furnishings of the rural hospital caught our attention. Infographics on the treatment of rabies, snake bites, hypothermia and dengue dominated the walls, highlighting how hospitals tailor their approaches according to epidemiological concerns and the specific risks faced by their populations. It was fascinating to read the depth of the information and instructions provided for such conditions, given that their relative lack of relevance in Singapore

meant we never had a strong reason to study them closely.

More striking still were the obstacles faced by the inhabitants of Lamagaon who lived high in the mountains, a place accessible only via steep and narrow paths. We learnt that they had to carry their sick down the footpaths and trails to reach the hospital for treatment, posing a great risk to themselves. At times, pregnant women would not be able to reach the hospital in time, consequently giving birth at home or in cars while on the way down. However, we also had an inspiring conversation with one of the

village mothers on how she learnt about nutrition from a government campaign and passed on her knowledge to her children and relatives. The conversation shed light on how good, practical and contextual knowledge about the communities they serve can help governments plan their outreach efforts.

This STEER trip was a user journey. Our eyes widened. Our ears piqued. It was an unforgettable experience, being able to tap into the lives of the villagers. In all, this trip enabled us to plant seeds: seeds of trust, openness and community in many people we passed. ◆

Catch a glimpse of our experience through two videos curated by our friends who came along on this STEER trip at the following links:

- https://bit.ly/3NxpEe6
- https://bit.ly/3NA8GM2

Legend

- 1. Gifting the children with donated English books brought over from Singapore
- 2. A lady cleaning a slice of fish against a concrete slab while looking after her child along the waterways of Kerala

