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IN THE STILLNESS

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nd live your life with purpose!" my favorite high school teacher called out as I walked away from the last five years of my life and into what I could only describe then as a vast, expansive uncertainty. *Purpose*. It was the kind of word that always seemed to wedge itself into motivational messages, graduation speeches and tearful goodbyes. Adults spoke of it as something easily found, like a book waiting for you on the shelf. Yet at sixteen, I didn't even know where to start looking.

Was purpose a feeling I was supposed to recognize? A thunderclap? A quiet knowing? Would it rewrite my whole life? Would I even notice if I walked right past it? The questions were endless and so were the opportunities ahead of me. With no clear answers, I did the only thing that felt grounding at the time: I leaned into what I loved. I journeyed through the next few years pursuing sciences in CEGEP. I didn't know what "purpose" looked like, but I did know that the languages of cells and the intricacies of the human body made sense to me in a world where little else did.

As the months flew by and university applications crept closer, my friends were chasing medical schools, engineering programs, and research placements. Meanwhile, I was carrying the scattered pieces of who I was in a small bag over my shoulder, standing at a crossroads. Each path ahead promised a different version of myself. While I helped friends and school mates prepare for their interviews and applications, my own deadlines were closing in on me.

All I knew was the quiet fascination I held for the human body, and the pull to be near people. So, when nursing was suggested to me, it seemed a logical fit.

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Nursing is gentle, it is kind. It's a helping hand, a tender hug. It is unapologetically precise. It demands your full attention, your best self. It is trusting and being trusted with life itself. The silent pressure and fierce empathy that define nursing felt like everything I didn't know I needed.

I had no idea what the next few years would bring, but somewhere in the back of my mind, a small voice hoped, "Maybe this is it. Maybe this career will give my life purpose?"

Looking back, I realize how naïve I was expecting purpose to arrive fully formed. But what came next was quieter and harder to name.

I found nursing school quite bland and lifeless for its first three-quarters. Like many healthcare students, I was searching for purpose *everywhere* I went. During each rotation, I would force myself to try and *feel*. Geriatrics, postpartum, community, psychiatry... the list went on. I kept waiting for a calling, yet I was always met with the same, familiar feeling of aimlessness.

On every unit, I would hear nurses and doctors share stories about patients who changed their lives – moments that reaffirmed why they chose this path, or how they just *knew* they were meant to be there. "I love it here," they'd say. "This is exactly what I was meant to do." I wanted to feel that too. So I listened closely, hoping their clarity would offer me some of my own. I kept waiting for my defining moment, for something that would make it all click.

By the end of my junior year, I felt hopeless. Not some dramatic sadness, but a quiet heaviness in my chest. I was so focused on trying to find some profound sense of meaning within nursing that I had missed the smaller, more human moments taking shape. As if I were riding a train, eyes glued to the window, scanning for signs of home, while the view quietly passed me by.

Heading into my last semester, I felt no closer to purpose than when I'd started. The only thing ahead was my final rotation in the emergency department. Unlike the slower rhythms of other specialties, the ER was a hub of ceaseless activity. There was no stillness. No time to pause. Everything and everyone moved quickly, shifting gears constantly.

I remember walking into the unit on my first day feeling completely overtaken by the movement around me. That night, I went home defeated. The pace, the pressure, the unpredictability... I was crushed under the weight. A few hours later, my mom showed up with a hot chocolate in hand. She didn't say much, just sat beside me on my bed as I stared blankly at my textbooks. Looking back now, I think part of me was scared I couldn't keep up with the pace, while a deeper, more honest part was scared that this would be my last

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chance to feel something meaningful. If not now, when? But in that exact moment of uncertainty, that same quiet voice I'd heard years earlier came back again:

"Maybe purpose is built right here, in the discomfort, the stretch, the struggle."

This time, nearly four years later, the voice sounded older, wiser. No longer wishful or expectant, the words were steadfast. As if they'd been there all along, waiting for me to grow into them.

And so, as I have always done during moments when the world feels like it's crumbling down, I sat up, lifted my chin up high, and prepared to face this trial head-on.

The emergency room was daunting. It was vast and chaotic, but beneath it all, it was powerful and wise. Over the weeks that followed, I grew to love it. I no longer questioned whether I belonged; slowly, I started to trust that I did.

Still, nothing could have prepared me for that day, engraved now in my mind forever. It started as any other day. I was assigned to the resuscitation zone – moving in and out of rooms, placing IVs, and adjusting oxygen monitors. Then suddenly:

Code Blue.

The call screeched over the intercom. I looked around, the nurses near me were still, frozen mid-step. For a second, time held its breath. We all waited, listening, trying to hear where the life in crisis was.

Moments later, a man arrived, his wife by his side. He was battling Stage IV liver cancer, I would later learn, and had come to the hospital for what was meant to be his final treatment before returning home to die peacefully, surrounded by family. But death hadn't been as patient.

It all happened so fast. The curtains were pulled shut. Staff moved swiftly and quietly. His palliative care team arrived. Chairs were brought in for his wife, his children, his grandchildren. The lights were dimmed.

This wasn't a patient we were trying to save. This was someone we were making space for. The room filled with the low hum of a final goodbye.

And then came the protocols. I was asked to complete a visual assessment. I remember standing at the foot of the bed, watching him breathe. Slow. Labored. Beyond reach. I felt every emotion rush through my body at once. Sadness, helplessness, humility, awe.

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There were no meds to administer, no vitals to stabilize. My job was to be still. To be present. To be human.

It was the type of care that formed the foundation of hospitals; the heartbeat of healthcare.

The patient's family stood in a semicircle around the bed. Eight people, holding hands, watching the

monitor, silently wondering which breath would be the last.

I don't remember what time it was, or if I ever finished the paper I had due that night. In that moment, none

of it mattered. I felt small, not in a belittled way, but in a way that reminded me how immense life was. How

unpredictable. How intimate death could be. And how, in a room full of people quietly bracing themselves

for the end, with nothing left to do but wait, purpose doesn't announce itself, it just is.

Purpose, to me, didn't arrive in a flash of clarity or a grand realization. It didn't hit like a lightning bolt or

change everything overnight. It didn't find me in a lecture hall or a textbook.

It brushed up against me in a dimly lit room, surrounded by eight grieving souls and a man preparing to

leave this world. That night, my role wasn't to save, but to witness. To stand quietly beside a family bracing

for loss. For the first time, I realized that presence itself could be the most profound form of care. That

moment didn't ask for interventions or answers – it asked for stillness, humanity, grace.

I went home changed. I replayed the family's hands interlocked, the steady beeping of the monitor, and

how quickly the room had shifted from clinical to sacred. I remembered how my own breath had slowed,

how I'd stood quietly at the end of the bed, looking death in the eyes.

Purpose, I realized, was a way of being, rooted in our humanity. A quiet decision to show up in a world that

so often forgets how to.

It is rarely loud.

It doesn't announce itself.

Most days, it doesn't look heroic.

But purpose lives in the margins, in fleeting glances and small human moments.

It is not a destination, but a way of life.

In healthcare, purpose lives in the cracks of how we carry ourselves.

How we listen.

How we look someone in the eyes.

How we hold space for joy, for grief, for pain, or for peace.

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Hospitals are places where people arrive in their most vulnerable states—quietly asking for help, for hope, for dignity—and our job is to be the closest thing to comfort, grace, and faith.

So yes, this found sense of purpose has given me direction, not by changing the course of my life, but by changing how I live it.

Since graduating, I've stopped asking nursing to give me a purpose.

Instead, I bring purpose *into* nursing through compassion, through presence, through laughter, and through kindness. The simple ways in which I shine my humanity into this life of service.

From this journey, a quiet clarity has taken root in me – a steady sense of who I am becoming:

Someone who listens.

Someone who shows up.

Someone who cares deeply and unapologetically.

Someone led by purpose.

Maybe now, six years later, I understand what my high school teacher meant when she told me to live with purpose, not as some grand destination or distant goal, but as a quiet commitment to compassion,

to faith,

to honoring our shared humanity.

Biographical Note

Ana Carrera graduated from the Ingram School of Nursing at McGill University in May 2025, earning a place on the Dean's Honor List in recognition of her academic excellence. She has a broad passion for nursing, with particular interest in pediatrics and primary care, and approaches her career with curiosity and openness to the diverse opportunities the field offers. Ana has contributed to infertility research, presenting her findings at the McGill University Urology Research Day and the annual Canadian Fertility and Andrology Society (CFAS) conference, and gained hands-on clinical experience as a camp nurse at a remote summer camp, developing both her clinical skills and her ability to provide holistic, patient-centered care.