Expanding FA Training Worldwide: Strategies and Challenges

Written by Mary Mosley

A mission of the International Federation of Red Cross and Red Crescent Societies (IFRC) is to enhance, expand, and improve training in first aid (FA) worldwide. Pascal Cassan, MD, IFRC Global First Aid Reference Centre, Paris, France, reviewed the results of a global survey conducted in 2013 by the IFRC to characterize the current situation and identify gaps in education among their member national societies [IFRC. *First Aid for a Safer Future: Update Global Edition, Report 2013.* 2014].

Although some countries have high proportions of their population who are trained in FA, there is tremendous variability worldwide. The response rate to the IFRC questionnaire was 40% (77 of 189 societies). The national societies reported that nearly 14 180 000 people were trained annually (about 0.4% of their total population) by some 115 000 active FA trainers (average of 123 persons/trainer/year).

The proportion of countries that had a legal requirement for FA training varied across occupations. About 35% required it for professional drivers and medical students, 33% for police officers and persons applying for a driving license, about 27% for child-care staff and 24% for school teachers, and 21% for elder-care staff. Of the participating countries, 32% reported a requirement for bystanders to respond to an emergency. In addition, 34% of countries reported that a bystander could be legally sued in the case of an adverse outcome. This must be addressed to increase the willingness of the public to respond to an emergency, stated Dr Cassan. Only 32% of countries confirmed a requirement for a FA kit to be kept in private vehicles.

The length of FA training courses was ≤ 6 hours in 53% of the people trained. The training remains valid only for a limited time period in 71% of countries. A refresher course is required by 82% of countries. This was accomplished by face-to-face training in 91%, e-learning in 6%, and a combination of these two techniques in 3%. Dr Cassan anticipates a shift toward more e-learning in the future. The survey confirmed implementation of automated external defibrillator (AED) use by nonmedical personnel in 55% of countries, yet only 23% of the total countries had a law requiring training to use the AED. Only 18% of countries had a law requiring the availability of a public access defibrillator.

The major challenges for the decade ending in 2020 identified by the survey were the aging population, road and home accidents, disasters, and heart diseases. FA was identified as a major prevention tool for making communities more aware of potential dangers, especially in disasterprone areas. Notably, providing FA is cost effective by reducing the severity of injuries and the high cost of downstream medical costs, especially in cases of heart disease and stroke.

The IFRC has developed 10 recommendations based on the results of its global survey to guide future activities:

- 1. Access for everyone to FA education
- 2. Compulsory FA training at distinct stages (eg, school, driving license)
- 3. Compulsory FA training at work
- 4. Time limit for valid FA certificate; refresher course in \leq 5 years
- 5. Harmonization of FA education
- 6. Active role given to each citizen for disaster prevention and preparedness
- 7. Fund more information campaigns to encourage undertaking FA training
- 8. Target more vulnerable groups for FA training (eg, family of persons with heart diseases, elderly individuals, persons with disabilities, and minority groups)

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- 9. Access to AEDs in all public places
- 10. Clear regulation against holding FA providers responsible for poor outcomes after an accident

Susanne Schunder-Tatzber, MD, OMV Group, Vienna, Austria, addressed the practical challenges to disseminate FA and resuscitation training worldwide and to increase the quantity of people skilled, competent, and equipped to deliver FA. To expand the reach, specific audiences must be targeted using traditional pedagogical approaches or modern technological approaches such as smart phone applications (apps) for FA and cardiopulmonary resuscitation (CPR) training. Materials and training for persons with special needs have been developed by some national societies, such as a Braille training manual for the blind. Material has been developed even for FA care of pets.

Community FA training builds capacity, emergency response preparedness, and health promotion. It is especially important in less developed countries, Dr Schunder-Tatzber stated, where FA must be presented with a broader focus than just CPR. The outdoor FA course provides scenario training in the field, such as for motorcycle accidents. In some countries, the Occupational Safety and Health Administration requires training in FA for first responders in certain industries.

A course for training schoolteachers has been developed to provide them with the skills and training packages to train students in FA, accident prevention, and healthy habits. The content of the training packages is age appropriate for language level, subject matter, and local culture.

Documents developed by the IFRC include the 2007 First Aid Policy and the *International First Aid and Resuscitation Guideline* (available in 5 languages) [IFRC. 2011], which provides information on FA science and implementation. The guideline and training materials recognize the need for harmonization with national laws as well as the need to adapt them for the local language and culture. The European First Aid Certificate is awarded to national societies whose FA courses meet the established standards. The IFRC successfully engaged the EU Parliament to require (by a 2003 directive) that professional drivers have basic FA training.

Dr Schunder-Tatzber stated that the type of training and the materials must fit the needs of the specific audience, including being age and culturally appropriate, and fit the local medical environment. World First Aid Day, held every second Saturday of September, was created to raise awareness of FA training through popular and media events.



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