Editorial

First aid provides a role for the public in disaster response

In the past 30 years, natural disasters alone have claimed more than four million lives worldwide and have affected more than one billion people (Noji 2000). Other types of disasters, including terrorist incidents, have also claimed lives and produced a spectrum of injuries, some of them quite horrific in their nature. The pattern of injuries differs depending on the type of disaster, but the most common injuries tend to be soft tissue injuries, such as cuts and lacerations, or musculoskeletal injuries like fractures and sprains, such as after the World Trade Centre terrorist attack (Leggat 2003). In most cases, injuries of these types can be effectively treated initially using first aid techniques, such as those to control haemorrhage, treat shock and to stabilise fractures, thereby helping to prevent aggravation of, or complications due to, the initial injury, including, in some cases, death (Kano et al. 2005).

It is recognised that members of the public are often the actual 'first responders' in many disaster events (Kano et al. 2005; Leggat 2003). In some countries, like the United States of America (US), these "first responders" are organised into community-based disaster preparedness programs that trains members of the public in first aid, such as the US Community Emergency Response Team (CERT). First-aid training has been found to increase both expected and actual utilisation of first-aid skills as well as perceived competence in implementing those skills (Kano et al. 2005). Repeated skills training in first aid is recommended because of its association with higher perceived competence levels (Pearn 1998; Eisenburger et al. 1999). With the appropriate first aid training and skill retention, members of the public can potentially contribute to a post-disaster medical response.

At the 2005 Emergency Management Volunteers Summit, several priorities emerged that recognized the importance of linking volunteers in this sector, not just in first aid, but in all facets of emergency response. These mainly related to establishing links, understanding competencies required and creating economies of scale across the various volunteer groups (Foster 2005). This will be important as we consider the role of volunteer emergency responders in the aftermath of such recent disasters such as the Asian tsunami, Hurricane Katrina and the Pakistan earthquakes.

The Journal of Rural and Tropical Public Health continues to address important issues in public health, with a particular emphasis on rural and tropical regions, in the context of an international networking medium as an Internet based journal. The feature articles deal with practical issues written by professionals working or who have previously worked or researched in rural and tropical areas. The Journal of Rural and Tropical Public Health is continuing to make an important contribution to finding solutions to global problems.

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assistance following a natural disaster. Disasters. 29: 58-74.

References

Eisenburger P, Safar P (1999) Life supporting first aid training of the public-review and recommendations. Resuscitation. 41: 3-18.

Foster L (2005) Enhancing links to further benefit volunteers and their communities. Australian Journal of Emergency Management. 20: 31. Kano M, Siegel JM, Bourque LB (2005) First-aid training and capabilities of the lay public: a potential alternative source of emergency medical

Leggat PA (2003) Health and safety issues arising from the initial urban search and rescue response to the World Trade Centre attacks: Some observations for disaster planning. World Safety Journal. 13(3): 17-18.

Noji EK (2000) 'The public health consequences of disasters'. Prehospital and Disaster Medicine. 15: 147-157.

Pearn JH (1998) A history of first aid in Australia: the evolution of prehospital care. Medical Journal of Australia. 168: 38-41.