Mass killings in the U.S. have escalated beyond anyone’s expectation. Such events place an unreasonable burden on the emergency medical response system. Because death from gunfire or bombing can occur in a few minutes from onset, professional first responders are often at a distance, unable to arrive in time to save lives.

The past decade’s increase in mass casualty events has prompted the collection of more meaningful data on bystander intervention.

Detailed in Simon H. Okoth’s recent book titled Responding to Black Swans (2017), new information verifies that bystanders have saved more people in emergencies than has been previously reported.

Until now, the only information available about bystander intervention was from large-scale drills and exercises, not from actual disasters; consequently, earlier results have been inappropriately rationalized.

The black swan metaphor arose when, in past centuries, Western Europeans mistakenly thought black swans did not exist. “When I see a black swan” came to have the same meaning as “when pigs fly.” After the 2008 economic crisis, financial writer Nassim Nicholas Taleb invoked the metaphor to label any unanticipated event with shocking and far-reaching consequences.

So-called “Black Swans” inspire debate over why warning signs were overlooked or ignored. Unfortunately, the unpredictable nature of Black Swans makes them nearly unpreventable.

Common sense teaches that we cannot prepare for every scenario—especially a Black Swan event.

But we can establish principles and protocols to be better prepared for the unexpected.

The need to have a better-trained population for emergency response was so well understood in 2006 that the government included bystanders in disaster response scenarios. President George W. Bush signed the Post-Katrina Emergency Management Reform Act (PKEMRA), expecting to train and engage non-professional first responders (ordinary citizens). The PKEMRA goals have not been fully realized.

Emergency public safety agencies are struggling to maintain adequate staffing; for example, a shortage of paramedics in the U.S. puts the aging American population at risk.

Planning anticipated this shortage, but, when emergency responders are deliberately ambushed with gunfire, people understandably become reluctant to seek a career in emergency services. Meanwhile, senior paramedics and EMTs are retiring, often without adequate replacements.

FEMA recently began publishing this stat: “In 95% of all emergencies, the victim or bystander provides immediate assistance first.”

Recent scholarly studies report important findings; for instance, a CPR study found that bystander-initiated CPR produces a 27% survival rate compared to a 13% survival rate when CPR is delayed until the arrival of EMS personnel.
In a report involving 619 survivors of the Haiti earthquake in 2010, it was found that 71% of the injured people said that a “friend, family, or neighbor” had pulled them from the rubble. Professional rescue forces were responsible for saving fewer than 1%.

In the aftermath of the Mexico City earthquake of 1985, volunteers helped rescue more than 800 people, but, because these bystanders did not have disaster response training, more than 100 of them suffered mortal injuries.

Untrained bystanders can be dangerous to victims and to themselves. Various uncontrolled arterial bleeds can become fatalities in under 5 minutes. Launched in 2015, the Stop the Bleed campaign grew from the 2012 mass shooting at Sandy Hook Elementary School in Newtown, Connecticut, and was designed to train non-professional emergency responders. Such campaigns offer models for imitation.

Because the shortage of professionally trained emergency responders is expected to continue—and because the normal EMT response time can be beyond the time required to save a life—everyone is better served when a broad base of the population has experienced a level of emergency response training.

I personally encourage everyone to seek emergency response training. Learn to become a helpful responder, not a helpless bystander, by completing these five steps:

1. Become CPR and AED trained. Call your local fire department to inquire about their CPR and AED training. Most fire departments have a regular schedule for public education.
2. Attend fire extinguisher training. Many fire departments regularly conduct this training.
3. Attend a Stop The Bleed class. Class listings are here. If you find no local class, send me an email to be placed on a training list.
4. Attend a disaster medical training class. Learn to deal with mass casualties prior to the arrival of professional responders. Such classes are covered by the Community Emergency Response Team training (CERT) and by the American Red Cross.
5. Attend a disaster psychology class. Such classes teach skills necessary to function at the scene of a chaotic disaster and are covered by CERT.
6. Learn more at Warren County Ohio CERT (Community Emergency Response Team).

By: Lee Hite — April 2018
Warren County CERT

Sources:
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