



Dying on the road
(not counted)



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Epidemic of injuries accelerating
- out of control !



40 – 50 % dying on the road

Mozambique (Lancet 1995;346)

N Iraq (J Trauma 2003; 54)

Cambodia (J Trauma 2003;54)

Iran (Prehosp Disast Med 2002;17)

Vietnam (TMC survey 2004)

Afghanistan (TMC survey 2003)

Afghanistan (BMJ 1995;311)

Most deaths are avoidable



Killer no. 1: Airway block



Head tilt – chin lift !

Any villager can do it
- but it's a matter of minutes !

Most deaths are avoidable



Killer no. 2: Poor breathing



Half-sitting position !

Any villager can do it
- but it's urgent !

Village-based = “sub-standard” ?



Ann Vi, Samlot, Cambodia 2004

My farmland is mined. Of course I am afraid when clearing the field. But we are poor and can not find food for the family, so I have no choice. If I don't clear I have no land to plant corn and rice. This is our destiny.

*First I cut the vegetation. When I see the mine I remove the soil around and lift it up. Carefully, not touching the pin – **hundreds** like this one.*

If the mines are left in the field, they will injure my children and grandchildren.

We are old, if we die it is no problem.

The children are young, they are important.

Whose standards count – Ann Vi's standards, or our standards ?

Most deaths are avoidable



Killer no. 3: Blood loss



Gauze packs into the wound !
Long compressive dressing !
(Please, no tourniquets)

Any villager can do it
- but it's urgent !

Has to be done there and then !

Village-based = "sub-standard" ?



City-based surgical center, Cambodia

- Transport time 6 hours
- Post-operative infection 21%
- Patient cost/day US\$ 120



District Hospitals, N-W Cambodia

3-year training program:

- Transport time 1.5 hours
- Post-operative infection 10%
- Patient cost/day US\$ 12

Defining “standards” is the privilege of power



? Who has the right ?

to tell former Red Khmer surgeons
Gea Phan and Bun Hay
to stop saving lives of fellow villagers:

“You’re doing it sub-standard”

Fact:

- Most mine clearing
- Most emergency mine victim assistance
- Most mine victim rehabilitation

is done “sub-standard” according to Western standards

Setting Universalist Standards: a deadly agenda

Africa: 5,000 doctors trained /year
Europe: 175,000 doctors trained /year

Zambia:
600 doctors graduated since 1964
Only 50 are still in country

? Access to care ?

*There is a current deficit of one million health workers in Africa alone.
And the deficit is increasing.*

(Harvard University research group)

Let them die on the road – or delegate life-saving skills



Deaths: 40%
Let them die
1996

N Iraq:

**140 paramedics ("doctors")
8,000 Village First Helpers**



Deaths: 10%
Trauma training
1997 – 1999



Deaths: 10%
Local take-over
2000 – 2006

The recipe: Paramedic training



Step 1
150 hours basic
Wait 6 months !



Step 2
150 hours advanced
Wait 6 months !



Step 3
150 hours
animal model
Certificate !

The recipe: Village First Helper training



In village

Stay night-over: talk together !

1/3 women, 1/3 children, 1/3 men

Rehearsal after 4 – 6 months

Train thousands !



PUTTING IDEAS INTO PEOPLES' HEADS
= COPYING KNOWLEDGE
(AND MISTAKES)



Access to care:

**Doing what is already done
(by them, on the ground, unattended)
in a better way**

