

American Red Cross Scientific Advisory Council Position Statement on First Aid Education in Primary and Secondary Schools

It is the position of the American Red Cross Scientific Advisory Council that first aid can be successfully taught to children as early as elementary school and that first aid education should be integrated into primary and secondary school curricula.

The American Red Cross Scientific Advisory Council strongly supports legislation and policies that promote the provision of first aid education in primary and secondary schools. Bystander delivery of CPR is associated with increased survival from out of hospital cardiac arrest, and it is estimated that up to 5.5% of traumatic deaths could be prevented by simple airway opening and hemorrhage control.^{1,2} Many victims, however, do not receive these life-saving interventions due to bystander fear that they will cause harm by performing these skills incorrectly.³ Studies have shown that first aid training results in better delivery of first aid and more willingness to help in an emergency. Increasing exposure to first aid education by providing it in schools will help to integrate these essential skills into daily life for much of the population and may increase bystander willingness to help in those crucial first moments.^{1,3–6} Additionally, providing first aid within a public school setting makes it accessible to a large portion of the population and may help decrease health disparities in underserved communities.

Multiple studies have shown that young children can successfully acquire and retain first aid skills. 3,4,7,8 After short interventions, children as young as four can assess a victim's consciousness and breathing, call the correct emergency telephone number and give the pertinent information, place victims in a recovery position, and perform simple airway management. 5,7,8 Children as young as six can readily operate an AED, and while very young children may not be physically strong enough to provide effective ventilation or chest compressions for adults, their comprehension and retention of these skills is good. 4,8,9 In addition, after training, children as young as seven demonstrate effective hemorrhage control. 4,10

Lack of time and funding have been cited as the biggest barriers to first aid education.¹¹ However, many studies have shown that these classes can be easily integrated into a school curriculum requiring little extra cost or time. Most instruction has been performed in a series of short (<1 hour) sessions or as a single multi-hour session taught either by first aid instructors or classroom teachers.^{4,5,7–9} A systematic review found support for trainings with both didactic and hands-on skill learning.² Additionally, there is experimental evidence that children can learn first aid knowledge and skills from web-based platforms, and there is ongoing work to develop mobile applications that may further contribute to their education.^{10,12}

While there may be concerns about the age-appropriateness of this type of education, to our knowledge there have been no reported adverse consequences of first aid education in younger age groups. In fact, this education of young children has led to desirable behavioral byproducts including increased demonstration of empathy and helping by participants.³ Additionally, children enrolled in study intervention groups have incorporated first aid into their play, taught other children who had not received the intervention, and shared their new knowledge with family members.^{3,8} Similarly, knowledge of first aid skills may help promote safety awareness among older children.² It may also help promote the importance of hand hygiene, a critical step in infection prevention during the ongoing COVID-19 pandemic.

Layperson provision of first aid has immeasurable importance as the first step in survival after a medical or traumatic event. Many studies have shown that children of all ages are capable of acquiring and retaining these skills. Education should start with basic concepts in the early years of schooling and layer in more complexity as children get older.^{7,13} Curricula should be developed jointly by content experts, school teachers and administrators to ensure age-appropriate topics, educational methods, and recognition of and adaptation around any participant stress. Making discussion and education about first aid a routine part of daily life is likely to make it a more routine activity which may lead to fewer barriers to its application in an emergency situation.³

Resources:

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