

Repositioning First Aid at the Center of IFRC Strategy 2030

Toward the renewed Commitment: Vision, and Policy for First Aid:

2021 General assembly

Background and Rationale:

First aid (FA) inclusive of resuscitation are vital actions to effectively and swiftly address injury and illness improving a person's chance of survival. Every year, millions of people die or experience complications from injury due to a lack of timely assistance or inadequate first aid. At the grassroots of the RCRC Movement, First Aid and resuscitation are acts of humanity, requesting willingness to save lives without discrimination.

The IFRC along with National Societies is the world's leading trainer and provider of first aid and resuscitation. All 192 National Societies are engaged in first aid as one of their major community activities, training more than 20 million, and reaching more than 46 million people through the delivery of first aid, resuscitation, and preventive health messaging every year.

Where are we now:

IFRC FA policy: adopted by the Governing Board meeting on 5 October 2007 in Geneva. The policy confirmed the commitment of the International Federation and the individual member National Societies to first aid and to adopting a community-based approach in first aid.

Global FA reference center: During the IFRC General Assembly in 2011, several National Societies requested that IFRC scale-up and harmonize its FA support. This led to the establishment of the IFRC Global First Aid Reference Centre (GFARC) in 2012, hosted & supported by the French Red Cross (FRC). The objective of GFARC is to act as the IFRC's hub of technical expertise & to support National Societies on FA. At the 32nd International Conference in 2015, a resolution was adopted related to FA that strongly "encourages States to consider all necessary measures to encourage trained non-professionals to provide First Aid, including, where appropriate, providing them with protection so that efforts made in good faith do not engage their responsibility & ensuring that they are aware of this protection".

The Global First Aid Vision 2015 – 2020: IFRC's vision envisaged a world where individuals, families, and communities are equipped with the First Aid skills to save lives if a disaster or emergency occurs, wherever they may be. The vision focused on reducing risk and building resilience in communities; promoting an evidence-based approach to FA; promoting NS sustainable financial capacity through commercial FA, improve communication and advocacy; scale-up programming; and develop strategic alliances and partnerships.

A global survey: was conducted in 2018 with NS to understand the reach of FA (collection of 2017 data). Key numbers are:

- 101 National Societies responded to the survey
- First aid education remains a core area of the RCRC network existing within each NS.
- Number of people trained every year in first aid by 101 RC/RC NS: 16,2 million
- Number of active first aid trainers in RC/RC NS: 160 767
- RC/RC first aid trainers' output: an average of 100 people trained for one trainer
- The percentage of the population trained by the RC/RC NS during the year is 0,33%
- NS are losing the market space with new actors coming into the FA ecosystem

GFARC REVIEW: as mandated by clause 14 of the Agreement, a review of the organization and management of GFARC activities was jointly planned by the FRC and IFRC. The review was facilitated by Quarternaire, an independent review & audit firm team jointly selected by IFRC and FRC. The key findings of the review are as follows:

Strengths	Weaknesses
<ul style="list-style-type: none"> GFARC’s mission is clear: the organization is mandated to serve an important function in providing high-quality First Aid & resuscitation guidelines, trainings, & services related to FA. Motivated GFARC staff team with a high team spirit. 	<ul style="list-style-type: none"> GFARC does not have the HR or financial capacity to fulfill all 8 objectives mandated in the MoU. A clear gap exists between what GFARC is delivering & membership expectations & needs. An unbalanced burden of work within the organization results in and overwhelmed GFARC staff. GFARC focuses on developing tools and not supporting enough NS in FA services scale up and modernization. National Societies are requesting to expand the scope of their first aid services, especially related to commercial first aid and the development of partnerships at the local, national, and international levels. GFARC with its present structure is unable to provide the expected support.

What we want to achieve:

This paper aims to present the opportunity that First Aid offers for all 192 National Societies across the globe. As Communities, governments, donors, the private sector, and others continue to look for credible partners to realize the FA agenda at the community level, the Red Cross Red Crescent has a unique opportunity to claim the space in the FA and Resuscitation ecosystem as a key partner and stakeholder nationally and globally, Specifically to:

Re-contextualize first aid and obtain a renewed commitment in membership locally, nationally, and globally where the RCRC network reclaims its space and reposition itself as the partner of choice for delivering quality, evidence-based first aid and resuscitation services at the institution, system, and community levels. Updating the IFRC first aid vision and policy: the current first aid policy and vision are out of date and no longer applicable to the current scope of work being done by the RCRC movement in First Aid and Resuscitation. It directly addresses this issue & the consultative mechanism ensures that the voice and needs of all NS are adequately represented in the new strategic direction.

- 1. Revise and update the IFRC first aid policy:** the IFRC first aid policy (adopted in 2007) is out of date and, although certain elements of the policy are still relevant, it needs considerable revision to be in line with changes that have since taken place in the first aid ecosystem, such as the evolving first aid and resuscitation needs inclusive of the broader scope of individuals educated and the types of education provided to communities & of National Societies as they work to strengthen this core pillar of their work. With the technical support of the IFRC secretariat and IFRC GFARC, the revised IFRC FA Policy will build on common approaches and contribute to the harmonization of membership responses, developed through a collaborative process, actively engaging NS, the IFRC, and relevant stakeholders and expert groups as needed. The revised first aid policy should be submitted for adoption at the General assembly 2021.
- 2. Develop the IFRC First Aid Vision 2030:** IFRC’s continued goal is to ensure that all Red Cross and Red Crescent National Societies are equipped to provide quality first aid and resuscitation and education to empower all staff, volunteers, and communities with the necessary skills to save lives. Current threats such as the effects of climate change, unplanned urbanization, road accidents, urban and rural violence, growing work-related stress-causing several NCDs, and current trends such as longer life-expectancy which lead to a society with an ageing population,

increase of poverty, migration, etc. should guide the development of the vision that is relevant in all contexts, during and outside emergencies, in low income/fragile settings as well as in middle- and high-income countries. The vision will be developed in line with IFRC S2030, Health and Care Framework 2030, and other developments in the field of First Aid, resuscitation, education, and evidence evaluation. It will determine the necessary capacity, resources, organizational structures, support, and partnerships to operationalize the new vision appropriately. IFRC Health and Care Department and IFRC GFARC will work together to develop the FA vision through a Membership-wide extensive consultation process.

The IFRC First Aid Vision 2030 will define the renewed ambition of the RCRC network & may include:

- Strategic priorities, on an RCRC network level, will substantially contribute to the implementation of the vision. Enhance, expand, and improve first aid and resuscitation tools, and education worldwide for the community and staff and Volunteers.
- Contribute to people's emergency preparedness and response at all levels from individual injury and illness through major scale events, during, and after the crisis at the individual, family, community, national and international levels
- Support to develop Commercial FA and Resuscitation as income-generating activities in National societies.
- Better positioning of NS: the RCRC National Societies are recognized and trusted everywhere as the leading first aid and resuscitation provider and educator for the broad group of individuals and organizations we serve to include laypersons, and healthcare providers.

A detailed framework will be developed after extensive consultations with membership to operationalize the vision: this will include

- key and concrete actionable measures to be implemented by the IFRC, and National Societies that will help to achieve the strategic priorities the detailed plans, and priority action areas.
- Resources needed to achieve and operationalize the vision – HR, Technical, structural - changes in GFARC and IFRC secretariat and field offices, Revised MoU of GFARC, etc
- Monitor the progress through objectively verifiable indicators by 2025 and 2029.

How do we get there: the key steps will be as follows?

- Discussions on repositioning First Aid at the center to S 2030 at Global First Aid Reference Centre (FARC) Steering committee meeting held in July 2020 with French Red Cross, GFARC, and IFRC Health and Care department
- Draft zero of the Discussion paper titled: **First Aid and Resuscitation: Repositioning First Aid including resuscitation at the Center of IFRC Strategy 2030, Toward the renewed Commitment, vision, and policy for First Aid:** developed jointly by French Red Cross, the American Red Cross and IFRC Health and Care Department, and GFARC. This will be finalized after the consultation and inputs from IFRC Regional health teams' inputs, IFRC Policy (Geneva and NYC), and IFRC Management Team.
- The first draft, incorporating comments from IFRC internal consultation, will be presented to the IFRC and FRC Senior Management for review and guidance.
- A Joint announcement by IFRC, French Red Cross, and the American Red Cross for the joint initiative on First Aid.
- A final draft will be shared with the membership and relevant stakeholders/ forums (e.g. Reference Group on Global Health) for feedback
- The Policy and vision of renewed commitment are included as an agenda item for adoption at the 2021 General assembly.
- **Establishment of consultation mechanisms:**
 - **Technical Working groups:** comprising NS, and IFRC Field offices that have expressed interest to contribute to the process and will provide guidance, actual consultations, drafting of the policy, and Vision through virtual and in-

person meetings as needed, functioning as a high-level ‘sounding-board’ and champions, which will be able to discuss all technical aspects and possible advocacy tracks. This will ensure that there are buy-in and consensus about the policy and vision from RCRC networks. The Working Group may establish a smaller sub-group to do active drafting. This will include at least 5 sub-working groups to work on the following 5 key areas:

- Commercial first aid
- First aid and resuscitation education and training
- First aid and resuscitation in operations, prehospital health care, and healthcare institutions
- First aid and CPR in schools
- First aid and resuscitation standards and qualification
- Research, evidence, evaluation, and promulgation
- **Steering Committee:** comprising representatives from 1 NS from each region, IFRC, the French Red Cross, the American Red Cross who have expressed interest in supporting the project. The role of the Steering Committee is to follow the implementation, decides on the overall direction, to take overall strategic and final decisions in case of any conflict. The Steering Committee will meet via teleconference or in-person meetings. The full-time staff along with the head of GFARC and Focal point in IFRC Health and Care Department, Geneva will report to the steering committee.
- A detailed work plan is defined and finalized
- The IFRC first aid policy is revised, and First aid Vision is developed through an extensive consultation process with National Societies, IFRC field, and regional offices.
- Plans for side events and workshops at the General assembly will be developed.
- The consultation process may occur through the existing NS groups and FA networks in different regions, Global Health and Care Reference Group, and through a new working group on first aid that would draft the policy, vision, and operational framework and align the IFRCs first aid direction with Strategy 2030, the Health and Care framework, and the Community Health Strategy.
- Consolidated drafts to be refined and shared with the Membership for inputs. This consultation period will remain flexible to the Membership’s needs to ensure National Societies can input their comments and engage in dialogue.
- The Policy and vision adoption & resolution of renewed commitment are included in the 2021 General assembly.

Success Factors and Risks:

Critical Success Factors:	Constraints and Risks:
<ul style="list-style-type: none"> ● The relevance of the topic in humanitarian terms ● Clear purpose, objectives, & expected results (scope). ● Strategic communication – Strong storytelling (negative and positive) ● Strong support and ownership by key stakeholders ● Broad ownership among National Societies ● Existing knowledge and expertise within the RCRC network 	<ul style="list-style-type: none"> ● Limited time ● Challenging topic and other priorities (COVID 19) ● Competition with other topics proposed for the General Assembly ● Resources both funding and more critical human resources. ● Availability & engagement of key stakeholders

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