

Community-based first aid in Kinshasa: a public health priority

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Introduction

In the DRC, the response time for healthcare professionals at hospitals is often too long due to a lack of emergency medical services, caused by logistical challenges related to transporting victims and the isolation of certain residential areas. Every year, thousands of deaths from choking, bleeding, or cardiac arrest could be prevented if first responders knew how to perform basic life-saving procedures. The first link in the emergency response chain is currently missing.¹

The traffic accidents were around 34.9% of deaths per 100,000 inhabitants in 2020 in the DRC.² In a megacity of over 10 million in habitants like Kinshasa,³ traffic congestion and urban sprawl complicate the rapid access of ambulances, or rather, the transport of victims by volunteer road users (taxi drivers, private vehicle drivers, motorcyclists, etc.). The Democratic Republic of Congo has one of the highest road fatality rates in the world, making eyewitnesses the crucial first link in the chain of survival. The knowledge survey reveals that despite a positive attitude, the majority of households in Kinshasa have inadequate knowledge of first aid.⁴

Faced with these challenges, the DRC's National Multi-Risk Plan emphasizes the vital importance of training the population in basic first aid to reduce preventable deaths before arrival at the hospital.¹ With the surge in road accidents and the overcrowding of emergency services, the first witnesses to an incident in Kinshasa are often a victim's only hope for survival. In a city where every minute counts, learning life-saving skills is no longer optional, but a civic duty.

A high-stress urban environment

The Congolese capital faces major road safety challenges. Between collisions involving motorcycle taxis and massive traffic jams that delay the victim's transport to the nearest healthcare facility, the response time of professional emergency services can be critical.

However, according to a recent study on the acceptability of first aid programs in Kinshasa, training citizens ("layperson responders") is identified as the most effective solution for strengthening out-of-hospital care capacity.^{5,6}

Life-saving actions in an urban context

The first aid protocol must follow a strict hierarchy to stabilize the victim:

- i. External bleeding:** Frequent in motorcycle accidents (called Wewa), it requires immediate direct manual pressure. This simple technique remains the gold standard for stopping massive bleeding in the pre-hospital setting.⁷
- ii. Airway obstruction:** In case of total suffocation, the Heimlich maneuver (abdominal thrusts) is recommended to expel the foreign body and prevent asphyxiation.³

iii. Unconsciousness and breathing: If the victim is breathing but unresponsive, they should be placed in the recovery position. This prevents airway obstruction by gastric fluids or the tongue.⁸

iv. Cardiopulmonary arrest: In the absence of any signs of life, Cardiopulmonary Resuscitation (CPR) should be initiated. This involves alternating 30 chest compressions with 2 rescue breaths, a cycle that should be maintained until medical care arrives.^{3,9}

Training: Several organizations are working to train the population, such as the Red Cross of the DRC, which regularly offers training modules for the general public and the Congolese Lifesaving Federation (FCSSA), which organizes seminars on first aid and water rescue. Becoming a first responder means transforming a feeling of helplessness into the power to take action that can save a life in a second.

Conclusion

By 2026, survival on the streets of Kinshasa will depend as much on how quickly victims can be transported to the nearest appropriate medical facility as it does on the helping hand offered by a trained bystander.

Enhancing the community's capacity on a large scale to practice first aid is crucial to reducing mortality and morbidity rates associated with basic medical emergencies in the DRC. The training of "layperson responders" (ordinary citizens) is a solution to address the shortage of ambulances.^{6,10} by the generalization of first aid training across Kinshasa's municipalities is a key strategy for strengthening urban resilience.^{1,4} Integrating these skills into school and workplace environments would enable every citizen to become a public health actor capable of responding to sudden emergencies.¹¹⁻¹³

Recommendation

Community engagement, awareness campaigns, school-based education, and practical first-aid training on a national scale, as well as advocacy for training for driver's license applicants, are essential.

Acknowledgment

None.

Conflicts of interest

The authors declare there is no conflict of interest.

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