

Further details: CASE studentship, closing date 9<sup>th</sup> February 2018

## **Situating Everyday First Aid: Social Practices and Settings of Incidents and Help**

### **Introduction**

This project investigates the social organisation of first aid. It focuses on the social and institutional settings within which first aid 'incidents' occur and on how those settings influence the kinds of 'responses' that follow. The aim is to provide a better understanding of accidents, risks, and harms by positioning first aid incidents not as random events but as embedded in the spatial and temporal ordering of social practices. While particular kinds of first aid incidents arise in and are shaped by specific social settings, first aid training education and research are not currently informed by the specificity of place, or by the histories of accidents that occur in distinct contexts. The proposed project develops a novel sociological approach to the study of first aid incidents and responses, drawing on theoretical resources from social theories of practice (e.g. Shove et al., 2012) and emerging empirical work in public health (Blue et al., 2016).

The proposed research will bring a fresh perspective to the field of first aid education research, a field in which behavioural paradigms dominate (see, for example, Latane & Darley, 1968). One of the limitations of a behavioural approach to first aid is that by focusing on the physical, biological, and psychological 'responses' of individuals, it brackets off the social settings in which first aid incidents and responses occur. By contrast, the studentship will develop, for the first time, a 'symmetrical' analysis of first aid incidents and responses, and of how both intersect with everyday social practices. Investigation of the 'case' of first aid will, in turn, inform practice theoretical accounts of socially situated and responsive phenomena like 'help'.

The research will have a real impact on the work of the Red Cross. Red Cross studies have shown that 39% of pre-hospital deaths are potentially preventable (Oliver et al., 2017). This finding echoes two decades of research into harm reduction which highlights the discrepancy between the numbers of people who witness an incident and of those who respond by offering help (e.g. Hussain and Redmond, 1994; Cho et al., 2010). Further understanding of the social organisation of help will put the Red Cross in a better position to promote first aid skills, to help save more lives, and reduce harm.

Through a detailed investigation of first aid provision, capability, and experience, across a variety of locations, the project will address the following 'high level' research questions:

- How is everyday first aid practice organised and ordered as part of social life?
- How do first aid incidents and responses relate to the spatial and temporal organisation of social practice?
- How do the different social settings within which first aid incidents happen matter for how they are dealt with and handled?

### **Research design**

The four-part strategy outlined below has been co-designed with the Red Cross to be practical, innovative, and manageable. The empirical work investigates first aid incidents and responses in different 'types' of social settings, including semi-public spaces, settings involving multiple practices, and locations in which certain types of injuries are more common.

We have integrated three periods of placement at British Red Cross Offices at key stages of the work. The first will enable the student to make use of a Red Cross affiliation to help identify and select case study sites. The second will allow the student to develop and integrate ethnographic ways of working within the Red Cross and the third to disseminate research findings across the organisation.

### **1: Positioning the research**

The student will begin by reviewing relevant literature and integrating a range of relevant theoretical resources (on theories of practice and the settings of social action) with existing research on first aid.

### **2: Characterising and selecting locations**

The second step is to characterise first aid settings and select three types of location to study. The student will use their first placement to review resources on the Red Cross shared drive, visit the Red Cross archive, and learn more about the distribution and frequency of first aid events within different organisations and settings (in collaboration with the Red Cross Workplace team). The selection of research sites will be 'led' by the significance of specific risks, but in all cases, the aim is to focus on the relationship between risk and response. Examples of types of settings might include:

- a) *Semi-public spaces*, e.g. train stations  
Places where there is some formalised first aid provision, but in which the populations involved consist, of *unrelated members of the public*. Possible collaborators include major transport providers.
- b) *Settings involving multiple practices*, e.g. multi-functional institutions  
Places which encompass many activities (work, residential) and which are characterised by an array of different social relationships and practices, e.g. between colleagues; in an organisational hierarchy; and also with members of the public. Possible sites include universities and hospitals.
- c) *Settings in which specific types of injuries are more common*, e.g. service industry  
Head injuries and burns are more likely to occur in specific settings, e.g. in the service sector. Further work is required to establish patterns of risk, but possible sites and partners include hotel or pub chains.

### **3: Case studies of first aid provision, experience and capability**

The student will undertake a programme of empirical research, working with partners in each of the types of sites characterised above. The exact number of sites and the time periods covered will be determined case by case, but the aim is to investigate:

- a) *Provision: Identifying formal first aid provision*  
Reviewing and analysing organisational risk assessment procedures, first aid training and equipment, and relevant health and safety regulations.
- b) *Experience: Analysing records of first aid incidents*  
Analysing types of events and responses, paying close attention to the affordances of the social environment and the context of incidents and help.
- c) *Capability: Interviews with staff responsible for first aid and health and safety*

Interviewing a selection of trained first aid providers and administrators at each site, focussing on site-specific types of knowledge and technologies involved and on how those relate to the types of practices enacted in the selected locations. Total number of interviews, 15.

The second placement allows the student to communicate the benefits of the approach and of ethnographic ways of working, as well as to refine the methodology with the Red Cross.

#### 4: Analysis, interpretation, synthesis, and implications

The final stage of the project is to compare the three case studies to identify similarities and differences in first aid incidents and responses with respect to the social settings and practices involved. The final placement will enable the student to feed insights and findings from the project into the work of the Red Cross and to inform the design of 'tailored' forms of first aid education that are sensitive to the practical and social settings of incidents and responses. During this time, the student will organise and deliver a final dissemination event, hosted and funded by the Red Cross.

#### Timetable

	Year 1												Year 2												Year 3											
	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	A	S
Induction																																				
1. Literature reviews and positioning the research																																				
2. Characterising locations and selecting sites																																				
Ethical Approval																																				
3. Investigating first aid provision, experience, and capability																																				
Case Study 1																																				
Case Study 2																																				
Case Study 3																																				
4. Analysis, interpretation, synthesis and implications																																				
Time at Red Cross																																				
Focus on Writing																																				
Supervision with Case Partner																																				
Annual Panel																																				
Confirmation Panel																																				
Intellectual Party/Summer Conference																																				
Other Conferences																																				

#### Academic outcomes

PhD in Sociology from Lancaster University.

Submission to peer-reviewed sociological journals (e.g. *Sociology of Health and Illness*, *Society and Space*) and the new *International Journal of First Aid Education*.

Presentations at national and international sociological conferences (e.g. BSA Medical Sociology Group) and first aid conferences (e.g. The Annual First Aid Education Conference).

Final dissemination event at the Red Cross Lecture Theatre (London).

Research impact through articles and reports (e.g. *The Conversation*, *The Guardian Higher Education Network*).

#### Outcomes for the student

Training and experience in sociological research and interdisciplinary collaboration.

Working as a member of the largest humanitarian network in the world, with the ability to impact upon its organisational processes.

Becoming equipped for a career in sociology, in the third sector, or a cross-sectorial role, such as policy and advocacy.

### **Outcomes for the non-HEI partner**

Advancing the Red Cross 2020 Strategy: 'Refusing to Ignore People in Crisis', by putting the Red Cross in a better position to be able to save lives and reduce harm.

Intersecting with ongoing projects within the Red Cross (e.g. developing the International First Aid Guidelines 2021).

Seeding an understanding of first aid as inseparable from its settings, forming a bridge between non-governmental organisations and public policy-makers, between public institutions, training programmes, and advocacy initiatives.

### **The role of the CASE partner**

Through bi-monthly supervisions and periods of placement, the student will learn how leaders in the field of first aid and first aid education approach their work. The student will develop a full picture of the sector context, allowing them to tailor their engagement with projects and people to serve their research needs.

In the introductory period, the student will be inducted into the Red Cross, giving them a basis in humanitarian law, first aid and an understanding of the structure of the organisation. The student will be established on Red Cross systems with a log-in and email address. Through the period of their literature review, they can use this access to explore the shared drive, education research repository and archives.

Initial periods of placement at the Red Cross will provide the student with opportunity to undertake the following Red Cross training: Everyday First Aid for the Public (one day), First Aid at Work – Low Risk (one day) and First Aid at Work – High Risk (three days). The student will emerge with an understanding of what constitutes a first aid incident within existing first aid guidelines and how first aid education aims to equip people to respond. This will be invaluable when it comes to step two of their research, characterising locations and selecting sites.

The subsequent periods of placement with the Red Cross are characterised by activities aimed to engage the Red Cross with this research process. The student will be invited to present the rationale for their case studies at meetings with internal stakeholders, in anticipation of the dissemination of the published findings. The student can shape how Red Cross thinks about first aid scenarios and first aid education, asking: what role should place and space play in learner-centred practices in first aid? In turn, the Red Cross can help to shape the student's alertness to public/private, multifunctional institution and high-risk settings of first aid incidents, with experience working across all three of these sectors. Their supervisor will support their access to sectors of first aid, such as Red Cross trainers, enriching emerging aspects of their research.

The synthesis and analysis step of this research brings together Red Cross and Lancaster University representatives. The student will be supported in strategising the inclusion of other IFRC National Societies. They will be brought into the writing process of the IFRC International First Aid Guidelines

2021. The student will be invited to publish in the *International Journal of First Aid Education* and to become a peer reviewer. Through these multiple activities, we hope to support a dynamic student, giving them valuable experiences throughout the successful completion of their doctoral programme.

## **Supervisors**

### **Stanley Blue**

Stanley Blue is a Lecturer in Sociology at Lancaster University. His work has re-invigorated contemporary practice theoretical analyses with questions and concepts of time and rhythm and his writing with Elizabeth Shove, Chris Carmona, and Mike Kelly has broken new ground in applying practice theoretical approaches to issues of public health (*Critical Public Health* 2016). Most recently he conducted a project on Institutional Rhythms which examined how the temporal organisation of working practices in hospitals shape patterns of demand for energy and travel. From this work, he has written on ways that practices connect and change as part of hospital life (*The Nexus of Practices* 2016) with Nicola Spurling and on how complexes of practices make and sustain institutional rhythms (*Time and Society* 2017). This combination of expertise in theories of social practice, on institutional setting, organisation, and change, and application to contemporary issues related to public health place Stan in a unique position to be able to supervise and support a PhD project that examines the social settings and practices that situate and matter for everyday first aid incidents and responses.

Blue, S. 2017. 'Institutional Rhythms: Combining Practice Theory and Rhythmanalysis to Conceptualise Processes of Institutionalisation'. *Time and Society*.

Blue, S. and Spurling, N. 2016. 'Qualities of Connective Tissue in Hospital Life: How Complexes of Practices Change'. In A. Hui, E. Shove and T. Schatzki (Eds.) *The Nexus of Practice: Connections, Constellations and Practitioners*. Routledge.

Blue, S., Shove E., Carmona C., and M. P. Kelly. 2016. 'Theories of Practice and Public Health: Understanding (Un)Healthy Practices'. *Critical Public Health* 26 (1):36-50.

### **Elizabeth Shove**

Elizabeth Shove is Professor of Sociology and PI of the DEMAND (Dynamics of Energy, Mobility and Demand), a £7.1 million RCUK funded research centre (2013-2018). Elizabeth is a leading figure in the field of 'social practice theory' (see, *The Dynamics of Social Practice: Everyday life and how it changes*, with Mika Pantzar and Matt Watson (Sage 2012). More recent work has focused on the relation between practices (see *the Nexus of Practices: connections, constellations, practitioners*, edited with Theodore Schatzki and Allison Hui, Routledge 2017). This research, developed through a series of empirical projects and studies of everyday consumption, technology and practice, has been influential in moving beyond discussions of the 'individual' – as user or consumer, and as the subject of policy intervention, and in conceptualising relations between co- and pre-existing material arrangements, and the complexes of social practice that such configurations variously transform and sustain. Much of this research has focused on questions of energy demand and carbon reduction,

but a widely cited article, co-authored with Stanley Blue, Chris Carmona and Mike Kelly (2016) links theories of practice with debates in public health.

Elizabeth has previously set up 9 CASE studentships and three sponsored studentships (co-funded by industry and the university). She has supervised 27 PhD students all of whom have completed within 4 years. Elizabeth's publications include 11 books, and 50 journal articles and more than 40 book chapters, the most relevant of which are detailed below.

Hui, A. Shove, E. and Schatzki, T. (Eds) (2017) *The Nexus of Practices: Connections, constellations, practitioners*, London: Routledge.

Shove, E. (2017) 'Matters of Practice' in Hui, A., Schatzki, T. and Shove, E. (Eds) *The Nexus of Practices: Connections, constellations, practitioners*, London: Routledge.

Shove, E. and Blue, S. (2016) 'How social practices generate, carry and require knowledge and know-how' in Orr, K., Nutley, S., Russell, S., Bain, R., Hacking, B., and Moran, C. (Eds), *Knowledge and Practice in Business and Organisations*. London: Routledge. P217-219.

Blue, S. Shove, E., Carmona, C. and Kelly, M. P., (2016) 'Theories of practice and public health: understanding (un)healthy practices', *Critical Public Health*, 26(1)36-50.

Shove, E., Pantzar, M. and Watson, M. (2012), *The Dynamics of Social Practice: Everyday life and how it changes*, London: Sage.

Shove, E. (2010) 'Beyond the ABC: climate change policy and theories of social change', *Environment and Planning A*. 42 (6): 1273–1285.

## **Penny Newell**

Penny Newell completed a PhD in English Research at King's College London, where she taught across the departments of Culture, Media and Creative Industries, English, and Comparative Literature. Her research was in the environmental humanities, concerned with the human cost of climate change. In March 2017, these research concerns carried her to the British Red Cross, where she is supporting the development of their peer-reviewed academic evidence base and helping to realise what is at stake in their work, devising presentations of Red Cross research at national and international conferences. She is based on the education research team, working in tandem with product development, disaster preparedness education, crisis education and marketing and communications. She is actively involved in research spanning all sectors of first aid and disaster preparedness, and has been instrumental in the following Red Cross projects: overdose education for drug addicts, trauma and coping skills for young people in flooding areas, developing a head injury pathway for laypersons. She has taken Red Cross research to the British Sociological Association and the Consortium of Universities for Global Health. She is a peer reviewer for the *International Journal of First Aid Education* and supports its development by working in collaboration with founder, editor and education research team leader, Emily Oliver. Penny manages the first aid research repository at the Red Cross, archiving and updating its contents for access across the directorate.

### *Publications*

Muise, J, Oliver, E, Newell, P. Can we improve individuals' propensity to act in a medical emergency? – A randomised controlled trial carried out by the Canadian Red Cross, extending a UK-based pilot study. *Injury Prevention* (forthcoming)

McKinney, D, Mulligan, J, Oliver, E, Newell, P. The First Aid Learner Effect: Theoretical Considerations for Educators Developing Bystander Helping Behaviors. *International Journal of First Aid Education* (forthcoming)

Colebourn, D, Gordon, E, Oliver, E, Taylor, H, Newell, P. Can we use blended learning in layperson first aid emergency medical education? *Health Education* (under peer review)

### *Conference Papers*

Lifescan: Mental Health and Wellbeing Workshops for Young People in High-Risk Flooding Areas in northern Scotland, *Environment and Human Health Conference*, British Sociological Association (2017)

The Multivalent Social Practices of First Aid, or Why First Aid Belongs on the Public Health Agenda, *Practice Theory and Public Health* (2017)

### *Education Research Team Member Publications*

Oliver, E, McKinney, D, Cooper, J. 2014. Can first aid training encourage individuals' propensity to act in an emergency situation? A pilot study. *EMJ*

### **References**

Blue S, Shove E, Carmona C, and Kelly, M. (2016) Theories of practice and public health: Understanding (un)healthy practices. *Critical public health* 26: 36-50.

Cho GC, Sohn YD, Kang KH et al. (2010) The effect of basic life support education on laypersons' willingness in performing bystander hands only cardiopulmonary resuscitation. *Resuscitation* 81: 691-694.

Darley JM and Latane B. (1968) Bystander intervention in emergencies: Diffusion of responsibility. *Journal of personality and social psychology* 8: 377.

Hussain L and Redmond A. (1994) Are pre-hospital deaths from accidental injury preventable? *BMJ* 308: 1077-1080.

Oliver G, Walter D, and Redmond A. (2017) Are prehospital deaths from trauma and accidental injury preventable? A direct historical comparison to assess what has changed in two decades. *Injury* 48: 978-984.

Shove E, Pantzar M, and Watson M. (2012) *The dynamics of social practice: Everyday life and how it changes*, London: Sage.