An Herbalist’s View-Herbal First Aid Setting up a First Aid Station 7Song-Northeast School of Botanical Medicine 7Song.com

Introduction
This handout is to provide ideas for people wanting to set up a first aid station. The focus here is on setting up at an outdoor site (i.e., away from public conveniences and utilities, such as electricity) but much of the information is also pertinent for setting up a first aid clinic at a city event, such as a protest. There is not much here that is specific for the herbalist, rather it is on setting up a clinic space for any practitioner to work.

Much of my experience setting up first aid stations has been at a yearly event called the Rainbow Gathering. This free event happens in a different National Forest every year and is attended by about 10,000 people. This gathering is usually a short hike in from any road and so our field station(s) are generally the initial place where people seek health care. One reason that I am writing about it now is that as you look through this handout it may seem overwhelming; all of the health conditions, building the station, finding water, etc. But most of these are unique to the Rainbow Gathering and a few similar events. In general your set-up will be much easier. But I want to give a full run-down for people who are interested in putting together this type of first aid station.

While herbalism is a useful first aid skill, it is to your advantage to work with and learn from practitioners of other health care modalities, such as acupuncturists, counselors, nurses, medical doctors, etc. First aid predicaments run the gamut of problems from traumatic injuries to emotional crises, making it useful to have a range of treatment options to offer your patients. It is helpful to have an understanding of each modality, to help you guide your patient towards the best possible treatments available.

It is important as a first aid worker to take care of yourself, and when possible, fellow health-care givers. You may find yourself in some dodgy situations such as being exposed to contagious diseases, unbalanced individuals, unpleasant authorities and inclement weather. At the same time you may be hungry and sorely lacking sleep. You can minimize a few of these dilemmas by taking appropriate medicines, eating well, and getting enough rest whenever possible. This will also help you to make better decisions about the predicaments that come your way. Basically, it is no fun, nor helpful, to work with cranky individuals. So rest, and do those things that help you return to a positive mental and physical homeostasis. Be
aware that there is a tendency to become too involved in first aid and feel the need to be available all the time. Resist this. The stronger you are, the better the quality of care that you can give.

Many of the fundamentals of running a first aid station are the same no matter whether they are conventional or holistic-oriented. They include; sanitation, preventive techniques (i.e., disposable gloves), evaluation, counseling skills and treatment. Improvisation is a big part in setting up and running a clinic. Generally choices are limited, whether it is where you will set up, how to treat a particular malady or all the other details that will emerge and test your ingenuity. There are number of skills such as acquiring materials and building the structures that may be required for getting a first aid station going. Since you will not likely be the person taking care of all these details, it is important to learn to delegate and support others involved in these tasks.

**Conditions**

These are some first aid situations that may arise. Learn about the ones that seem most pertinent to circumstances you will be involved in.

- Allergy
- Altitude sickness
- Anaphylaxis
- Animal bites/scratches
- Asthma
- Bleeding
- Broken bones
- Burns
- Constipation
- Contagious disease
- Cough
- Dental problems
- Diarrhea
- Drug difficulties
- Earache
- Emotional crises
- Exacerbation of preexisting condition
- Eye problems
- Food/Water sickness
- Headache
- Heat exhaustion
- Hypothermia
- Infection
- Injury
- Insect bites/stings
- Menstrual problems
- Nausea
- Pain
- Parasites-external
- Parasites-internal
- Plant dermatitis
- Prescriptions forgotten
- Rashes
- Respiratory disorders
- Seizures
- Shock
- Staph infections
- Sunburn
- Toothaches
- Trauma
- Viruses
- Vomiting
- Wounds

**Ideas for Setting up a First Aid Clinic**

Below are a number of suggestions to consider before setting up a clinic. Some of these are covered in more detail in other sections, (noted below). They are divided into planning, setting up and breaking down the clinic. It can be helpful to initially look through all of the lists.

Along with health care practitioners there are a number of other skills helpful in setting up. Look to recruit people for these tasks which include; building structures, kitchen help, and setting up different area’s such latrine and hand-washing.
stations. I find that sometimes there are people who would like to help, but don’t feel comfortable with their health-related skills, but want to be involved anyway. These are good places for them to start off, and perhaps learn more of the medical side as they spend time there.

Planning stages
1. Developing a crew.
   • Who will you be working with?
   • Will you be joining up with others or will you be starting your own clinic?
   • See ‘Crew’
2. Donations
   • There are two major types of helpful donations; medicines and money.
   • Money can be used to buy additional medicines as well as tools to build the structures and transport gear and people
   • Find creative ways to find resources and donations to help finance your first aid station.
   • Who do you know that this type of venture would interest?
3. Group dynamics
   • How will decisions be made?
   • Will decisions be made by involved individuals, majority, consensus or other methods?
   • How will you communicate to make these decisions; by phone, in meetings, by email or other ways?
4. Preparing and organizing medicines and supplies
   • This can take a long time, start early.
   • If you are preparing your own medicines then it will take even longer to make the tinctures and other medicines you may want to have on hand.
   • Label your medicines well, so you know what they are and who’s they are.
5. Checklists
   • Have a well-organized checklist of all the medicines you are bringing.
   • Make copies for all involved.
   • See ‘First Aid Checklist’.
6. Personal preparation
   • First aid can be physically and emotionally tiring. Do what you can to prepare yourself for this.
   • Be sure to bring your own personal medicines and comforts.
7. Transportation
   • How will you get people and supplies to the site?
   • How will move them after the station is closed down?
   • Will you need to set up carpools?
8. Are there local materials that can be used to build the clinic?
9. If you are planning to wildcraft or make medicines, bring the necessary tools.
Setting up

1. **Location-finding a suitable site**
   - See ‘Location’.

2. **Water**
   - Water is an important consideration when setting up. You will need it for drinking by both patients and crew, as well as using it to wash wounds and equipment.
   - Where is your water source? Is it close by or will you need to have people carry it to the station? You will need containers for this.

3. **Transportation of patients**
   - How will you move a patient who needs to be evacuated?
   - Are you on a road or trail that a vehicle can travel on?
   - Can one of your personal vehicles be used as a makeshift ambulance to transport patients to an ambulance or treatment facility?

4. **Building the first aid station**
   - Have people who are skillful in building structures.
   - Rope it off to keep it separate from the surrounding area.
   - Tarping-well set-up overhead tarps can make a big difference to protect people and medicines, especially in rain.
   - Latrines, foot wash stations and disposal areas may need to be dug.

5. **Wildcrafting**
   - Are there plants in the area to use as medicine?
   - If there are, are they gatherable from ecological and other perspectives?
   - If gatherable, note locations so others can be sent to gather plants.
   - Ask knowledgeable people (such as local rangers) which plants are endangered.

6. **Set up first aid zones within the first aid station**
   - See ‘First Aid Zones’.

7. **Shifts**
   - You may need to set up shifts and duties for people helping out.
   - Who will take charge of money, supplies, communications, etc?
   - See ‘Crews’.

8. **Organized and clean**
   - Try to make it everyone’s duty to pick up trash and keep it organized and as clean as possible.

9. **Sick area**
   - Set up an area for sick patients to lie down and be attended to.
   - If they are contagious, a ‘quarantine area’ is helpful.
   - It is helpful to have an area for people who are mentally unbalanced, if they are disruptive.

10. **Staff set-up**
    - Where will you all be sleeping?
• It is helpful to have a staff relaxing area where you can still watch the station.
• If you are going to have on-site meeting, have a place to just far enough away so that there are not a lot of interruptions during meetings.

11. **Communications**
• If using radios or other communication devices, have a place where a radio is kept at all times. Teach all staff how to use and maintain them.

12. **Waste**
• First aid stations create a lot of waste, since a lot of equipment is disposed of after one use.
• This equipment may also be contaminated by infectious disease.
• Will you be separating garbage for recycling?
• What will you do with infectious wastes?
• See ‘Sanitation’.

**Breaking down and cleaning up**

1. **Cleaning up**
• Leave the area as clean, or cleaner, than you found it.
• This usually takes longer than anticipated, make sure you are not left alone to do it.

2. **Breaking down tasks**
• General cleaning up and getting rid of any waste, especially medical waste.
• Breaking down structures
• Wood to be put back into the woods, carried out, or burned
• Tarps taken down (often involves climbing trees).
• Holes to be filled in, such as the foot wash, and latrines.
• All traces that you were once there cleaned up.
• Carting all of the materials and garbage out.

3. **People**
• Check in with the staff and see how they are doing, they may be exhausted or emotionally unsettled, especially if they have not previously worked in a first aid area.
• Collect contact information from people you liked working with.

**Location**

Location is an important decision for your first aid clinic, though in many scenarios you are given little choice. Below are some questions and suggestions geared towards a wilderness first aid station, though some of the ideas are more universal.

1. Accessibility for patients is important. Can people who are injured, weak or sick get to you easily?
2. Can supplies be easily brought to the site by car, wagon or by carrying them in?
3. Will it be centrally located, and if so, will it be very noisy?
4. Are there a lot of roots or undergrowth that people might trip on?
5. Is it on a hill making it more difficult to walk there?
6. Are you near any ground transportation, such as an ambulance? Could you get a vehicle in and out for an emergency evacuation?
7. Is there a place nearby for a helicopter to land?
8. Is there shade and protection from the sun and other weather elements?
9. Are the trees spaced apart in a way that you can put up overhanging tarps?
10. Are the trees close enough together to build shelving in between them?
11. How are the insects there? Are you near a swamp or standing water where there might be a proliferation of biting insects? Are there any wasp or hornet nests nearby?
12. Are there a lot of allergy-causing plants around?
13. Are there clear well-marked paths with signs guiding people there?
14. Is the area large enough to meet your needs, and to have a number of different areas for diagnosis, treatment, recovery, and the other areas listed?
15. Does the area feel good to a majority of the people who will be working there?
16. Is there a water supply nearby?
17. Will you be having satellite clinics? How will you communicate?

**Sanitation**

One of the most important aspects of practicing first aid is employing proper sanitation, that is, methods of halting the transmission of trouble-causing pathogens. This includes conscientious cleanliness protocols for both patient and practitioner, to stop them from infecting themselves and others. In places with running water, this job is more easily achieved, but difficulties arise in backwoods and other places where water is less accessible. This can be partly countered by hand-sanitizers.

When setting up a first aid station remote from a water source, consider how this issue will be dealt with. Options include setting up a pipe system, or transporting and carrying the water in. You may need a filter system along with other materials such as buckets, which can be brought in with you.

There are a number of ways of setting up a wash station. Keep in mind that it is easy to reinfect yourself each time you handle something handled by someone else such as a bottle of soap. One way to help with some of this is to set up a foot operated station. An inexpensive option is to use a simple foot-pump and bucket operation (see diagram below). We have been using the same one for years and it works very well. The bucket just needs to be continually filled with water.

Good sanitary practices greatly reduce infections from spreading. As you treat one person to the next, consider whether there is some way you could be transmitting pathogens. And be mindful to not become infected yourself as it is easy enough for first aid workers to get sick.

A common way for infection to spread is from the aptly named fecal-oral route. This happens when people do not wash their hands properly after a bowel movement. It is
important to make sure sanitation facilities (soap and water and perhaps bleach) are adequate at the first aid station, latrines and anywhere where people are preparing and serving food. An important but not-much-fun job is to walk around and inspect areas where food is prepared. One could easily feel ‘cop-ish’ when inspecting kitchens, but it is important work, as it is possible for a major contamination to spread quickly if food preparers are lax about sanitation. Think about this inspection work as a community service.

The self-treatment first aid area is a place where unsanitary practices may occur. One common problem is people putting their finger into salve jars (salves are oil-based and can grow bacteria), and then putting the salve on a wound and re-dipping their fingers in the jar. Provide tongue depressors, Q-tips or other tools to put in the container rather than fingers. Hang an obvious sign to help teach people safe protocols.

One of the difficulties of setting up a first aid station is what to do with the waste. They range from ‘household garbage’, to potentially infectious gloves and tongue depressors, to frankly infected blood from infections. For the final category I recommend having a hazardous waste bag, which are usually red and well labeled. Or you can make your own, but if you know that you are dealing with communicable infections, these bags should be dropped off at a proper facility. See ‘Working with hospitals’. The household garbage can be dropped off with all other garbage, but the disposable gloves and other tainted gear should be clearly labeled as ‘medical waste’ and then dropped off with regular garbage. This is just a precaution to anyone handling the garbage.

**Sanitation-Basic Rules**

1. Use disposable gloves whenever touching an open wound and make sure to use new ones for each new person. Keep a few pair on you at all times.
2. Use disposable gloves when touching any person’s fluids including, blood pus, and saliva.
3. Wash hands regularly, between each patient if any touching was involved. And especially after touching open wounds, handling anything (i.e., foot basins) that may be contaminated or having used the latrine. But really, just wash your hands very regularly.
4. Use soap each time.
5. Use Povidone-iodine (Betadine) if you have clearly touched something frankly or seemingly infectious.
6. Learn the signs and symptoms of infections such as pus, slow healing wounds and the look of a staph (Staphylococcus aureus) wound.
7. Learn about common infectious agents such as water and food-borne pathogens including Giardia, Shigella, E. coli, and Salmonella.
8. Learn the early symptoms of the above, this can do a lot to help prevent the spread of infection
9. Develop and maintain a serviceable hand-washing station
10. Have a washing area for bowls, cups and utensils
11. Educate about not sharing things that have touched mouths such as water bottles, bowls and utensils.
12. Teach others how to take care of themselves and their community.
13. Dispose of all infectious medical waste properly.

*Simple foot operated hand-wash station with bucket, tubing and siphon bulb which is the part pumped with the foot to move water through the tube.*

**The Crew-Peopling the First Aid Station**

The people who make up the crew at a first aid station have a strong impact on how well it functions. The way people are treated individually and the quality of the care given keenly affects patients, which in turn will influence whether they come back for follow-ups and recommend you to others. It is also very helpful for people to work well together. This becomes even more important during an emergency.

It is useful for regular first aid workers to have all-around competency skills. Besides knowing their own field of health care, having some skills in triage, how to work with communication equipment and what to do in case of emergencies. When first forming the first aid station, have meetings for everyone to get to know each other and find where each person feels most competent and confident.

There are some basic social skills involved in doing first aid work that are appreciated and useful. Just working to get along and putting small grievances aside is very helpful. Humor can sometimes be useful as it can help distract from pain for the patient. And for the staff it can help to shrug off the constant trauma seen in this line of work. It is easy to get psychically exhausted from being around a lot of physical and emotional pain, and it is helpful to take breaks. There will be times where you will not be able help a person, at least to their satisfaction, and it important to not take it too personally. When people are in pain and trauma they can lash out. It can be helpful at times to just remind yourself why you are there, to help people. Pain exists and no one is going to stop all of it, at times we can only try to make situations more tolerable. If you come in with an ‘I’m going to help everyone’s problems’ attitude, you will likely get crushed by your expectations.
It is important to learn how to use good questions to discern the amount of pain or damage a patient may be in. In general, consider the tone of your voice, body language, and the words you use. In working with patients it is also helpful to be able to let people know the seriousness of their injury without increasing their anxiety level too dramatically. This is important as stress makes everything feel worse. And it is easier to work with and help them make decisions if they are a little more relaxed. Learning to share information in a tone and style that allays some anxiety is a valuable tool.

Introduce yourself to your patients, both for the courtesy and learning their name, as well if they come back they can ask for you by name if they have any questions or need a refill.

First aid workers may need to rush to an emergency, or to check on someone who can’t get to the station. It is helpful to identify who feels comfortable in these situations and make sure they have the appropriate gear ready such as a radios and basic first aid supplies, including medicines they have experience using. Also, they should travel in pairs, so one can always get help while the other attends the patients. In a larger event, it is also helpful to have pairs of people to go on regular ‘house calls’ and roam around and see if anyone might need some assistance (and perhaps goad people into avoiding too much sun or other preventative actions).

**First Aid Jobs**

Different situations require differing first aid stations. Below are some of the jobs that may be necessary to function well. Generally each person is doing a few of these at any one time.

1. **Apothecary**- dispensing and organizing the medicines.
2. **Banking**- help collect and distribute funds and supplies.
3. **Carpenters/handy person**- build shelves and ‘furniture’, put up tarps and basically set up and maintain the physical space.
4. **Communications**- setting up and maintaining radios and other communication equipment.
5. **Entertainers**- anyone wishing to bring levity to the house of pain.
6. **General helpers**- to help with assorted odd tasks.
7. **House calls**- people willing to leave the clinic and help where necessary.
8. **Kitchen crew**- feed the hungry staff.
9. **Night shift**- workers willing to work from night till morning.
10. **Self-help area**- this area needs continual organizing, restocking and cleaning.
11. **Practitioners**- various health-related and medical workers.
12. **Runners**- willing to relay information and fetch and deliver supplies.
13. **Tarpers**- setting up tarps to prevent excessive sun or rain. Some people are much better at it and usually need to be able to climb trees and work around obstacles. Good tarping can make a big difference, so that people and medicine are kept safe in inclement weather.
14. **Triage**- prioritizing incoming patients and also to match up clients with practitioner's skills and expertise. Help incoming patients be comfortable. They may send them to the self-treatment area.

15. **Water carriers**- hauling water when necessary.

**Crew Considerations**
1. Each individual should know basics, such as useful common plants, important medicines, how to use communication equipment, safety and emergency protocols, and teamwork strategies.
2. Each person should keep a lookout at the first aid station to make sure items are not taken, to make sure you know who all the staff are, and to basically keep it a reasonably calm and safe place.
3. People should try and work together to share skills.
4. First aid stations are often teaching places for people to learn these skills. If you are knowledgeable, help tutor others. If you are learning, be respectful and watch and learn.
5. Have all staff occasionally check their pockets for medicines they may have put in there and forgot. This is a common way for medicines to disappear.
6. Have regular meetings where everyone is required to show up (except a skeleton staff) to find out if there are any medical situations we should all know about, sharing treatment strategies, and to check in to see if anyone needs any help.

**First Aid Zones**
Each first aid clinic will have different needs. These are some of the common 'zones'. Often they are not distinct from each other and will overlap. This can work well for areas such as triage and treatment, but areas such as the kitchen are good to be distinct, as it is often where first aid workers take a break and relax.

1. **Apothecary**- where the medicines are situated. These medicines are for the practitioners use only. There may be a separate area for people visiting to help themselves to medicines
2. **Compost pit**- kitchen and food wastes.
3. **Fire pit**- to keep warm and hang around at night.
4. **Foot-wash area**- to treat foot cuts and sores. A place to use washbasins with an open pit to work over so wastewater doesn’t lie on the ground where people walk.
5. **Gray-water pit**- to dump out non-infectious wastewater away from treatment.
6. **Hand-washing station**- placed nearby for accessibility.
7. **Kitchen**- a place for cooking and eating food.
8. **Latrine**- nearby for people who are sick.
9. **Latrine**- further away for those who can walk there.
10. **Quarantine**- for patients with highly contagious diseases,
11. **Recovery area**- an area for patients to lie around as they recover from their various ailments. Useful to have this area covered and have cots and blankets.
12. **Recycling**- for recyclable goods.
13. **Staff area** - a dedicated area for the staff to take a break. This could also be a place for staff meetings.

14. **Self-treatment area** - where people can treat themselves for minor problems such as sunburns, and cuts. Keep this area stocked with basics.

15. **Supply area** - a place for stored medicines. It usually needs to be continually organized. This area is for staff only.

16. **Tea-making area** - separate from the kitchen to cook up medicinal teas

17. **Treatment** - general - where most medical work is performed

18. **Treatment** - specialized. Some treatments need privacy or cover from the elements such as acupuncture and massage.

19. **Triage area** - to prioritize patients, usually near the entrance.

20. **Waiting area** - a place to wait for a practitioner. Chairs, stumps or homemade benches are helpful.

**Equipment**

There is a ton of gear one could purchase and bring to a first aid station. Before you do, here are a few ideas to consider. Consider what type of physical set-up you will have and the health conditions you expect to encounter. Some of this gear is expensive so start searching for equipment a while before you will need it. This will give you time to see if you can find inexpensive and/or used equipment. A good place to search is Craigslist. There are also places to post ‘wish lists’ to see if others have what you want. And consider holding fund-raisers and think about who you can ask for donations.

The more equipment you have the more you have to lose. It is important for all workers to make sure equipment doesn’t get lost or borrowed and not returned. This happens easy enough for items such as stretchers (which are pricey) as people will be carrying them far from the first aid station. Equipment can also get mangled and there is the consideration of where to store it between first aid events. The bulk and weight of the equipment can also be an impediment if you are hauling it somewhere distant from a road.

That said, much of this equipment is very useful and hard to improvise on the spot, such as a stretcher. The gear will reflect your medical skills. If you are not trained in using an oxygen tank, then they are just a liability.

Below is a basic equipment list and does not cover herbal or other medicines. For a more extensive list please see my First Aid Checklist (a handout on my website).

**Equipment List**

- **Buckets** - 5-gallon. For hauling water and for foot and hand soaks.
- **Cell phone** - for communication within and outside the event.
- **Communication equipment** - radios and similar.
- **Cots** - for sick folks and tired personnel.
- **Duct tape**—everybody’s favorite.
- **Kitchen gear**—for hungry staff. Also, tea making equipment.
- **Knives**—various uses.
- **Money**—to purchase needed items.
- **Paper and pen**—to take notes, and write instructions for patients and labels.
- **Plywood**—to build shelves and latrines.
- **Recorder**—to record observations.
- **Shovel**—dig latrines, foot-wash ditch, compost, gray-water and fire pit.
- **Sign-making materials**—for around the clinic and to help people find the station.
- **Stretcher**—There are a number of types, research which one would work best for you within budget constraints
- **Tarps**—for shade and protection.
- **Tools**—Hammer, screwdrivers, cordless power drills, rope, string, saw, etc.
- **Wheelbarrow**—to haul gear around.

**Logistics**

These are some ideas to consider about unforeseen concerns before setting up your first aid station.

1. **Egos**—When different practitioners have different ideas on how to treat someone, how do you use to decide on which method of treatment to use? This could be about differences amongst the same discipline (i.e., herbalist’s) or differing disciplines (herbal or modern medicine).

2. **Working with local authorities**—There is often an opportunity to interact with various health care workers and officials who may be monitoring or inspecting your station. This can be a very mixed experience as they may have little knowledge or feel disapproving about holistic medicine practices. But also, they may know a lot about local health care facilities and other pertinent information. A lot hinges on the relationship you build. Be open about your capabilities and also firm in your desire to be there and help. While sometimes they come with a bureaucratic mindset, often they are just there to help and learn. They can help support the clinic in a number of ways including contributing medical supplies or helping get lab tests on possible contagious vectors. Remember they have a stake in this too, as any possible sicknesses can impact local hospitals and clinics, as well as people in the area. When possible, foster a cooperative spirit as this helps out all parties involved. There may also be an obvious police presence. This can be difficult as you might be seen as ‘abetting the enemy’ (supporting protestors), and hence finding yourselves under scrutiny. This is not universally true and many law enforcement officers will see that you are there to help. If it gets divisive, just try to remember why you are there, to help others.
3. **Working with local hospitals.** When people are sick or hurt badly to where they cannot be adequately treated at the first aid station, then they may need to be transported to a local health care facility. In rural areas, these may be small, lightly staffed places. It is helpful to develop a rapport with local hospitals and clinics and apprise them of the conditions they may see. If one of the first aid staff works in a hospital, they may make a good contact person. If a patient wants to go to a hospital it is of course up to them, but some people are unaware of how much it may cost. Ask if they have insurance and give them a realistic break down of costs. There may also be a free clinic in the area. It is important to not overtax the resources of communities we are visiting and do as much as we can at the first aid station.

One other consideration is safe disposal of the infectious wastes the first aid station generates. Hospitals routinely do this but they may charge money for outside medical wastes, ask and try to work with them about this.

**The Medicines**

While this paper is not meant to cover specific medicines to bring, below are some general considerations when supplying medicines to a first aid station.

1. Where will these medicines come from, and who pays for them?
2. How to organize the medicines, so they can be efficiently found and dispensed when needed.
3. Who handles the medicines? The more people involved, the more likely that they will disappear or be misplaced (often in someone’s pocket).
4. How to transport the medicines from where they are kept to the first aid station clinic? It could weigh a lot.
5. Do you have a ‘house-call’ (a ‘run’) bag? This is a way to take some of the medicines from the clinic to those in need elsewhere. It is helpful to have a separately supplied run bag, so the medicines won’t be missed at the station.
6. If you use toxic herbs such as Aconite or Belladonna, do you have a way to keep people from poisoning themselves or others?
7. When thinking about which medicines to bring, think about the circumstances you will be in. Will there be a lot of pollens, make sure to carry extra antihistamine-type herbs. Or if it is hot and dry, consider mucilaginous herbs.

**End Note**

One of my concerns with writing all of the above details for setting up a first aid station is that it might intimidate people from ever starting on this venture. But you should know that for most people working first aid just means showing up with your skills and getting to work, not all of the building and other logistics. But after 20 years of helping set-up and work at a wilderness first aid station, I wanted to share some of the hands-on experience I have gained.

For many herbalists, the first step is gaining first aid skills and clinical experience. There are many books and online resources to study from as well as taking first
responder courses. Just learning basic first aid skills is an excellent way to begin, as many of the necessary skills are *not* about the medicine (i.e., herbal medicine), they deal with how to approach these situations and do the least amount of harm to yourself and your patients.
Consider volunteering at first aid stations such as the Rainbow Gathering or encampments. Quietly observe what others are doing and at the same time help out with the various chores. Start your training by helping with the things you feel most confident in doing and gaining skills and knowledge along the way. See you there.