Low resources and traditional medicine: Addressing global practice challenges

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At first glance, the theme for this edition - low resource and tradition medicine - may have you thinking, "well, this one's not for me". But I suggest you may want to take another look. Low resource settings and communities typically have inadequate funds for health care, and are characterised by limited resources and fewer trained, skilled, health workers. I’m sure you would agree that one does not need to be practising in a developing country to come across 'disadvantaged communities', a term used to describe the complex factors that make it difficult for individuals living in a particular community to achieve positive life outcomes.1

Within these pages you may well identify similarities in the everyday challenges faced in some health care settings and patient/client populations in your own 'backyard'.

With that said, some of the stories, situations and conditions you will read in this edition may be unlike any clinical situation you have seen or managed before. The authors in this edition, being part of an 'international wound village', identify that there is still much to learn and to do. Providing practical and, where available, evidence-based interventions that optimise experiences and outcomes for the wounded in low resource communities is a common theme throughout.

This edition has a real international flavour, specific to the authors and the countries/settings described, which highlights where everyday and, in some cases, extraordinary challenges are faced by the local and supporting teams. Strategies are proposed that are specific to low resource settings and communities from around the globe. These include evidence-based wound care and resources for low resource settings, volunteering, empowering local communities, global initiatives, principals of practice and traditional dressings/topical agents.

Emerging theories and consolidation of existing knowledge relating to skin care and oedema prevention and management, morbidity planning for lymphatic filariasis, a practical solutions guide for antiseptic agents and minimising wound related pain strategies are presented. International research findings and first hand experiences from India, Haiti, and the South Pacific are highlighted.

The invited authors for this edition, representing a variety of disciplines and perspectives, are both experienced and qualified to report their literature reviews, discussion papers and personal commentaries which add to our understanding of low resource and traditional approaches to wound management today.

They share their knowledge with passion, 'real life' commitment and practical insight.

REFERENCE

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