

Issues Encountered by First Responders in Amish Populations

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Emergency Medical Services exist to provide immediate pre-hospital care to people who require medical assistance. EMS personnel are trained to handle a variety of situations. Understandably, no amount of training can prepare an individual for the unexpected. A brief part of EMS training involves techniques to handling certain religious or cultural practices that a healthcare provider may encounter. One population that is not explicitly covered through training is the Amish. The Amish population is unique in that they collectively chose to not use electricity amongst other traditions. When EMS encounter an Amish patient, they must be vigilant to respect all cultural and religious wishes while performing their duties as an EMT. This process can prove difficult to many that are uneducated on Amish traditions and unprepared for an Amish patient. While unique traditions affect EMS providers, they will also affect every other human involved in the process of healthcare. Correctly balancing the duties of an EMT with the religious requests and wishes of an Amish patient can certainly prove difficult, but is the ethical responsibility of a healthcare provider.

One aspect of handling an Amish patient that is quite different than a not Amish patient is the communication difficulty. The string of miscommunication between the Amish and EMS begins as soon as an Amish person is in need of EMS and identifies the need for outside resources for assistance. Due to the Amish policy of not using electricity, many Amish communities will have one phone centrally located in the community often times miles away from any house. The Amish are extremely self-sufficient and are reluctant to reach out to outsiders and outside resources for assistance so therefore it is not uncommon for an Amish community to wait until the last minute when it is absolutely necessary to contact EMS. At the point of recognition, an Amish person will travel by horse and buggy to the phone booth and many times call for a trusted community member such as a nurse or EMT. It is then the responsibility of that trusted non-Amish community member to reach out to 911 dispatchers in an attempt to get the correct personnel and assistance to the emergency. Due to the different spoken language and isolation within their communities the Amish have accents and use different words than those found in typical conversation and it can be difficult for a dispatcher to understand through

the chain of communication used what the emergency consists of and what assistance is needed. Once emergency responders, such as EMTs, are on scene it is then difficult to understand what kind of event is occurring, and obtaining information on the events that led up to the medical dilemma can be a challenge to clearly understand so providing the best possible healthcare is not always immediately possible. The next step of confusion and difficulty is explaining to family members where the patient will be transported and then figuring out how to contact family members to update them on the patient's condition and treatments.

As mentioned earlier, the Amish are extremely self-sufficient; therefore, they are typically unexperienced in many lifesaving healthcare interventions, and because of their inexperience many Amish people are hesitant to greenlight EMS providers to give treatment. A concern that many Amish have when making a decision for outside medical treatment is if it falls within the allowance of their religion. The communication efforts in explaining an intervention or treatment to a patient become tedious as community members and family members of a patient find themselves deciding whether or not a treatment is generally accepted. In one interview done with a Mennonite female she stated that "the Amish do not typically approve of any treatment of any kind unless absolutely necessary in a life or death situation" (Eicher). Communicating the severity of an emergency is necessary to provide the best possible healthcare. Some treatments that are highly discouraged include the use of any medications or sedatives, intravenous fluid, and helicopter transport for optimal transport time to a healthcare facility that can provide the necessary level of care. The Amish see God as the only true healer and believe that medications can change perceptions and so they are discouraged (Health). An extremely helpful intervention that could save a life is giving a patient fluid via IV to increase a falling blood pressure. The longer it takes to explain this procedure and the benefits of it the lower a blood pressure can drop resulting in irreversible health issues. Lastly, Amish patient's will only be transported by helicopter if EMS providers think that it is absolutely necessary for life as expressed by many in the Amish community of Charlotte County, Virginia. While there are many reasons why the Amish prefer not to be transported by air to the proper facility, one reason is the extreme cost.

A helicopter ride to the hospital costs on average \$12,000-\$25,000 (NAIM). The typical cost of a medical flight from the Prince Edward County, Virginia region is nearly an alarming \$50,000. Part of the Amish religion (which is an Anabaptist) includes not purchasing healthcare insurance. The Amish church acts as an insurer by providing money to cover the cost of medical needs. In many instances in the case of extremely high medical bill costs, Amish will reach out to many other churches seeking funds and will oftentimes receive them. The Amish pay for everything in cash and do not use banks which makes paying for costly medical bills very difficult. Although many people may think that it seems obvious to take care of a patient first and worry about costs second, when the costs are this high, family members have a right to know and make their own choices.

Another reason why Amish community members are hesitant to transport their people via helicopter is because they have no way of contacting their loved one. An Amish person in the area of Prince Edward County and Charlotte County can be flown to a handful of different hospitals i.e. Centra Southside Community Hospital, MCV, Lynchburg Medical, UVA, and Duke. Typically, the hospital that the patient is being flown to is predetermined by the helicopter that accepts the call to come, but each different hospital requires different logistical planning by the family. Members of the Amish community have to find a ride from someone to the whatever hospital their loved one has gone to which is a whole other problem in itself. The Amish community also has no way to receive updates on the status of their loved one until someone from the community can reach the hospital leaving most of the others in the dark.

The Nickel Mines Schoolhouse massacre that occurred in 2006 is one of the most recent demonstrations of the Amish communities response to medical needs that made national news. The massacre was carried out by a community member who wrote suicide notes to his wife and three children stating he had molested female children when he was a young age and recently had similar thoughts. The man walked into an Amish schoolhouse and made all of the boys and elders go outside leaving just the young females ages 6-13 inside. He lined them up and started shooting and eventually killed himself. The reaction from this Amish community was unexpected and heartwarming. The Amish within hours were consoling the wife and father of the shooter stating that he is now in front of a Just God (Corbella 2017). The strong sense of community held the small town together and efforts to raise money for the expensive medical costs of the 6 surviving children began immediately. Amish do not accept charity as part of their culture but due to the extreme circumstances, the

community was accepting donations for the children's medical costs due to lack of insurance money (Bledsoe 2012). The number of Amish EMTs in the region of Pennsylvania where this occurred has increased since 2006 and there are now many Amish EMTs in the area.

An interesting reason that has not been covered so far that may explain why the Amish do not require EMS as frequently as the general population is their daily habits. The Amish are remarkably fit with men logging an average of 18,000+ steps each day and women logging 14,000+ (Worldlifeexpectancy.com). The Amish have had a reported lifespan of 72 years old or longer for the past three hundred years according to the world life expectancy data. While 72 years old today is tracking on average with the rest of Americans, the Amish were expected to live nearly twice as long as the general population in the 1700's. The extreme physical activity that they perform on a daily basis along with their all natural diets allow the Amish to be exceptionally health in this day and age. While 31% of the United States is considered obese by the BMI scale, only 4% of the Amish population is ranked obese by BMI. Their healthy lifestyle could be one reason why they are not typically found in hospitals and health centers throughout the United States.

To bridge the gap between EMS and Amish communities EMS providers need to start being proactive with their Amish residents to establish barriers and create Incident Preplans or Standard Operating Procedures. Meeting with leaders in the Amish community to describe types of medical treatments and determine what is approved and what is not approved regarding religion can drastically reduce the conflicts that EMS providers face when treating the Amish. Plus the education of the Amish on EMS would also reduce the awkwardness between patient and healthcare provider, ultimately leading to more comprehensive and quality care. The fix to our problem in Prince Edward County with this issue would be having meetings with the Amish and ensuring them that they can reach out at any time for medical assistance and encourage seeking medical attention early on in an emergency situation.

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