

This year, 2020

This year, 2020, will no doubt be remembered for a long time to come. Unfortunately, for most people this will not be for very positive reasons. The emergence and spread of SARS-CoV-2 has led to disruptions in every facet of society of a magnitude not experienced before. While this has undoubtedly resulted in much suffering, it has also made all of us adapt in ways that we might have not believed we could. Those who have not given up, and who have stood up to adversity and persevered with whatever resources they had, have perhaps been surprised by the positives it has been possible to take away from months of hardship. The many healthcare workers at the front lines, the teachers, the business owners and workers who kept things going, and many others who kept vital services operational under very difficult conditions.

This was also the first year of this journal, SAJPEC. Other than the coincidence of the first volume being dated 2020, there is no specific reason why the events of this year had any significant impact on it. Such is the ubiquity of online information – a positive for the journal, but also for the many people (students in particular) stuck at home yet still able to access all the information they needed to do their work. Much has been made of the problems associated with working and studying from home, but connecting to Zoom or Google Classroom would not have been possible 25-30 years ago and a pandemic of this nature without these tools would have been a true disaster for many. If nothing else, we surely have understood in 2020 that we can get by and survive under less than perfect conditions and that this is always preferable to throwing in the towel because not everything is ideal.

In this second issue of the journal's first volume, we have a short report about the lack of a rudimentary device for the management of a common disease. While this small study may not represent the broader situation in South Africa, it does per-

haps highlight the problems that we seem to often have with doing the basics adequately in pre-hospital emergency care. We also have research assessing the accuracy of triage as part of the call-taking and dispatch process. The authors make the very valid point that getting triage right in an under-resourced environment is critical in order to optimise resource use. Moving forward and having learned valuable lessons under the immense demands on pre-hospital emergency care of 2020, this is even more important. Lastly, we have research of a more educational flavour on the utility of FOAMed for one type of continuous professional development (CPD) activity. This is also of heightened relevance at the moment, as the authors emphasise the importance of online information rather than face-to-face CPD activities when the latter are restricted or not possible.

With the spectre of a SARS-CoV-2 variant and associated second wave across the news headlines as this issue goes live, it is clear that we have not seen the last of this pandemic. To what extent vaccines will help is unclear, and how these will be rolled out is equally uncertain. Most likely, as a number of experts have pointed out, we will have to learn to live with the virus. Does this mean that everything changes – the “Great Reset” that the World Economic Forum and others have been telling us must happen? I hope not. This pandemic has exposed fault lines in many societies, but it has also exposed opportunism. Hopefully we can hold onto the societal values that we know work well for us, but change what needs to be changed in order to get our work done. If we find that these changes improve some things then we have moved forward.

Please continue to support SAJPEC as we move to our second volume.

Christopher Stein
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