

Testing Community Resilience Strategies in Los Angeles County

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Introduction

Developing partnerships with local community and faith-based organizations has been a strategy for many health departments seeking to build community relationships and bridge the gaps created by staff reductions. This paper evaluates the strength and variability of coalitions in Los Angeles County that were brought together by the LA County Department of Public Health (LACDPH) and multiple community partners as part of the Los Angeles County Community Disaster Resilience (LACCDR) project. LACDPH randomly assigned 16 communities to one of two conditions: community resilience or enhanced preparedness. Community resilience, a sustained ability of a community to utilize available resources to respond to, withstand, and recover from adverse situations, is an increasingly important tool for community partnerships to have in addressing disasters.

Research Objective

The specific aims are to:

Examine how partnerships are formed between LACDPH and community partners for the purpose of building community resilience and strengthening the public health workforce;

Determine the quality of partnerships, how those change over the course of the study, and whether and how this varies by neighborhood characteristics;

Explore strategies for how LACDPH leverages community partnerships to achieve specific disaster resilience outcomes, and determine the predictive properties of a social network analysis tool (PARTNER) metrics.

Methods

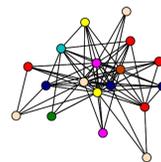
•The LACCDR project developed principles of collaborations, and a set of interventions (resilience tool kit).

Map of Los Angeles County



•Social network analysis tool developed by members of the study team called PARTNER (Program to Analyze, Record, and Track Networks to Enhance Relationships).

•PARTNER fielded as an online and in-person survey; translated into Spanish.



Example of one site

Partnership Metrics (Independent Variables)

- Type of relationship (e.g., information sharing, joint program development, resource exchange)
- Frequency of interaction
- Trust among partners (measured as an index of reliability, mission agreement, and ability to have open discussion around issues)
- Value of partners to the mission (measured as power/influence, commitment, and resources available)

Community Resilience Outcome Metrics

- Intermediate capacities* (e.g structural plans, infrastructure supports, and the process of collaboration to implement these plans) and
- Final outcome capabilities* (e.g. exercises to assess levels of preparedness using performance indicators).

Results

Community resilience communities on average had greater diversity in background of partners during the first year of the project. There were more partners on average in the resilience communities, but the difference was not statistically significant. The partners in community resilience communities completed more preparedness related activities. Trust was slightly lower in the resilience communities. Year 2 will compare changes between the two types of coalitions between the two waves.

Table 1:

	Preparedness	Resilience	P-value
Average # of Organizations per Coalition	7.12	9.87	0.117
# of Sectors per coalition	3.63	6	0.028
Hours Per Month Spent on Preparedness Activities	19.08	17.28	0.893
Average Trust	3.43	2.91	0.004
Average Value	2.97	3.2	0.362

Table 2: activities coalitions completed in the first year

Activities Completed in the First year	% of Preparedness Coalitions	% of Resilience Coalitions
Made or Translated Disaster Materials (e.g. brochures, posters, etc.)	38%	50%
Put disaster brochures or other materials into the community	88%	88%
Worked with the media to communicate about our coalition's activities	13%	63%
Developed plan to communicate with residents during a disaster	50%	25%
Developed integrated emergency plans for coalition partners	38%	38%
Participated in a community mapping (e.g. Sahana)	38%	63%
Identified priority hazards in the community	63%	88%
Organized Community Events (e.g. health fairs, convening neighborhood watch)	63%	100%
Exercised or implemented community disaster plan during an emergency	38%	25%
Exercised or implemented disaster communication plan during a disaster	25%	25%
Held community leadership training	50%	75%
Held psychological first aid training	13%	50%
Held Community Emergency Response Team Training (CERT)	50%	63%
Held Community Health Worker Training	0%	13%

Implications for Policy, Delivery, or Practice

Information from this research will be useful to LHDs interested in improving community resilience through the development of community partnerships. It helps identify the characteristics of the partnerships that can lead to greater involvement in activities to achieve partnership goals. This information is also of interest to funders and policymakers interesting in expanding community resilience activities in local communities.

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