What can emergency planners learn from research on human resilience?

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Resilience is a concept that is widely used in emergency planning and preparedness activities (e.g. www.ukresilience.gov.uk). Working definitions of resilience in infrastructure, systems and communities exist for the purposes establishing benchmarks for effective emergency response, however it is not clear to what extent these initiatives are informed by the broad and well-established research literature on human resilience. Efforts to define, measure and promote physical and psychological resilience can be identified in a number of diverse fields, including developmental and clinical psychology, anthropology, disaster management and the study of social-ecological systems. Resilience is often defined in studies of positive responses and coping in the face of challenging or traumatic events, or in the ability of communities to survive and thrive following disasters or emergencies. Recent research points to the importance of considering resilience in these terms, rather than simply as the absence of trauma in the face of tragedy. 1,2

Research on human resilience has the potential to inform emergency planning in a number of important ways. By identifying those most prepared to withstand the impact of future events and by contrast those most vulnerable, provision of limited resources or capacity can be optimally designed for an effective and flexible response. Additionally, community-based interventions can be appropriately tailored to support restoration and promote recovery activities. A parallel literature on the provision for psychological support after traumatic events supports the importance of appropriate designing population-based interventions³, advocating measured responses that include access to timely, practical support and the promotion of existing social networks as strategies to promote psychological resilience. ^{4,5} Public

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resilience, both for emergency planners and responders themselves, and in the communities engaged in preparing for emergencies. ^{6, 7}

Resilience research provides important insights into the personal, social and environmental conditions that can predict the presence or absence of resilience. It

engagement in emergency preparedness activities

provides another avenue for identifying and promoting

into the personal, social and environmental conditions that can predict the presence or absence of resilience. It is increasingly acknowledged that planning assumptions concerning public responses to extreme events need to be challenged, and that evidence-based approaches are needed to inform preparedness activities. Whilst emergency planners will continue to have to prepare for the worst, efforts designed to identify the correlates of resilience in the systems and communities they serve can only inform and improve emergency response initiatives.

References:

- 1. Bonanno GA, Bucciarelli A and Vlahov D. Psychological Resilience After Disaster: New York City in the Aftermath of the September 11th Terrorist Attack. *Psychological Science*. 2006; 17: 181-186.
- 2. Almedom AM and Glandon D. Resilience is not the absence of PTSD any more than health is the absence of disease. *Journal of Loss and Trauma*. 2007; 12: 127-143.
- 3. Rose S, Bisson J, Churchill R and Wessely S. Psychological debriefing for preventing post traumatic stress disorder (PTSD) (Review). *The Cochrane Library*, Issue 4. John Wiley & Sons, Ltd, 2006.
- Rubin GJ, Brewin CR, Greenberg N, Hacker Hughes J, Simpson J and Wessely S. Enduring consequences of terrorism: 7-month follow-up survey of reactions to the bombings in London on 7 July 2005. *British Journal of Psychiatry*. 2007; 190: 350-356.
- Amlôt R and Page L. Helping individuals, families and communities cope in the aftermath of flooding. *Chemical Hazards and Poisons Report*. 2007; 34-36.
- Turner L and Amlôt R. Exercise Young Neptune: a child's eye view of decontamination. Emergency Services Times. 2007; 121
- 7. Page LA, Rubin GJ, Amlôt R, Simpson J and Wessely S. How prepared are Londoners for an emergency? A longitudinal study following the London bombings. Biosecurity and Bioterrorism: Biodefense Strategy, Practice, and Science. (In Press).

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