

## Helpdesk Research Report: Effectiveness of interventions in the humanitarian field to support community resilience

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**Query:** What is the existing literature on the effectiveness of various interventions in the humanitarian field that are meant to support community resilience? Provide an overview of findings and an annotated bibliography of selected references on the issue. Please pay particular attention to capacity building and collaborations. Selected references can focus on academic literature.

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#### 1. Overview

Resilience is increasingly a central focus for international humanitarian actors and there is a growing need for evidence about the effects of interventions – development, humanitarian, environmental and otherwise – on community resilience. Nevertheless, the literature on the impact of humanitarian interventions on community resilience is scarce and fragmented. This report provides a rapid review of available evidence and links to key texts in this emerging area.

To date, there is very little evidence available of the effects of humanitarian interventions on resilience. There are a number of reasons why it is difficult to draw conclusions about impacts and outcomes related to resilience, including the following.

- The **concept of resilience**, as applied to disasters and human societies, remains in its infancy. Defining, measuring and operationalising the concept of disaster resilience, including community resilience, is an emerging area of study: evidence from the North is limited and

contested<sup>1</sup>, and evidence from the South is even scarcer. There are few studies on community resilience in relation to disasters, let alone comparative studies across space or time.

- While the concept of resilience is increasingly common in humanitarian literature, **in practice** the term is not yet widely adopted as a core component in programmes. Practical application of the term is somewhat more developed in climate change adaptation, food and agriculture, and non-humanitarian areas of disaster management like urban planning or health. As many humanitarian programmes on disaster resilience date back less than a decade, there is a limited evidence base and a short retrospective timeframe in which to gauge the effectiveness of interventions. Much of the available programme material presents preliminary findings and calls for further research on effectiveness or implementation.
- The **quality of available** evidence is an issue. Monitoring and evaluation tends to be geared toward assessing inputs and processes more than outcomes and impact, leaving limited scope for learning about effects on communities. A number of other inconsistencies make the evidence base problematic, including:
  - Authors define effectiveness in a variety of ways, making comparisons and generalisations difficult. Studies examine effectiveness at different stages of interventions. Some look at effectiveness when setting up interventions (for example to ensure local acceptance and ownership), while others look at eventual impact.
  - Some findings on effectiveness are not independent (though this does not mean the evidence presented is not valuable). A number of reports use self-assessments.
  - The evidence base is fragmented and often case- or sector-specific, rather than comparative or systematic. Very few meta-reviews on community resilience and disasters are available, and they tend to focus on one sector of disaster resilience, such as health.
  - Some of the literature is speculative, prescriptive, or based on untested assumptions<sup>2</sup>. Some build models to test the effectiveness of specific measures. Others assume programmes proven to work in other contexts – sometimes in non-humanitarian contexts – can be applied in very different socioeconomic conditions.
- Causal links between specific interventions and disaster resilience are difficult to establish for complex humanitarian interventions.

In spite of the above limitations, the following common themes emerge from the literature.

- Improvements in community resilience are not primarily a product of intentional interventions. Resilience at local, community and national levels is in good part shaped by larger factors, not created by social engineering. Community resilience is first and **foremost an endogenous process** that does not necessarily need or benefit from outside intervention (e.g. Nuwayhid et al., 2011; McSweeney & Coomes, 2011; Manyena et al., 2008; Brodsky et al., 2011; Rabaia et al., 2010).
- Resilience is in part about self-reliance and some findings suggest that in some cases donor interventions to support resilience were not central to communities' resilience. Precisely

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<sup>1</sup> For example, Lee et al., writing about the UK, observe that the evidence base on developing community resilience to disasters is 'lacking', as is information about how knowledge is produced in the first place. Lee, A. C. K., Phillips, W., Challen, K., & Goodacre, S. (2012). Emergency management in health: Key issues and challenges in the UK. <http://www.biomedcentral.com/content/pdf/1471-2458-12-884.pdf>

<sup>2</sup> This point is for example made in relation to 'citizen preparedness promotion' by: Uscher-Pines, L., Chandra, A., Acosta, J., & Kellermann, A. (2012). Citizen preparedness for disasters: Are current assumptions valid? *Disaster Medicine and Public Health Preparedness*, 6(2), 170–173. doi:10.1001/dmp.2012.23. <http://dmp.org/cgi/reprint/6/2/170>

because communities drew from their own resilience, outside interventions were either peripheral or ineffective because they are not adequately **in tune with local context**. Overall, the most effective efforts to support community resilience are context-specific and tailor their goals and activities to local meanings, priorities and strengths.

- There is a risk that external interventions may do more harm than good. Interventions can sometimes degrade community resilience. **'Do no Harm' principles** include the need to make interventions context-specific, follow local leadership instead of leading, and commit enough time and resources to let communities develop disaster resilience (community resilience is a process anchored in the long-term, not the short-term).
- Many authors emphasise the importance of viewing community resilience as a **process rather than an outcome** and of programming all interventions accordingly to achieve effectiveness.
- Support for community resilience in the humanitarian field needs to be **inclusive**. Specific social groups such as women and children should not be left aside. Issues concerning who is included and who is excluded (i.e. discriminated or dominating groups) can be difficult to resolve. Including excluded groups can prove ineffective or even counter-productive, and programmes must, therefore, be carefully designed and implemented in relation to the local context.
- Given the numerous actors involved in disaster resilience and the high stakes (for example in communicating life-saving information for disaster preparedness), it is essential that effective coordination between actors' is in place, under local or national leadership. Support for community resilience must also be coherent overall and cover all aspects of disaster resilience holistically – only addressing one aspect runs the risk of providing incomplete support, and in some cases weakening resilience and disaster management.

## 2. Factors shaping community resilience

**McSweeney, K., & Coomes, O. T. (2011). Climate-related disaster opens a window of opportunity for rural poor in north-eastern Honduras. Proceedings of the National Academy of Sciences of the United States of America, 108(13), 5203–5208**

<http://www.pnas.org/content/108/13/5203>

According to research on rural communities and extreme weather events brought by climate change, 'the resource-reliant poor are acutely vulnerable and need external assistance to prepare for such events' (5203). However, this longitudinal study in an indigenous Tawahka community in Honduras before and after Hurricane Mitch (1994-2002) finds that: 'climate-related shocks can offer windows of opportunity in which latent local adaptive capacities are triggered', leading to systemic social-ecological improvement (5203).

Residents proved to be highly vulnerable to the hurricane – due in part to previous development assistance – with the poorest households hit hardest. However, the disaster enabled the poor to initiate gradual institutional innovation in local land tenure. This led to more equitable land distribution, re-established agricultural production, re-diversified incomes and slowed primary forest conversion. This change was considered 'entirely consistent with the Tawahka's diffuse forms of governance, in which new norms are built through individual action that is subsequently sanctioned' (5206). The process 'allowed land-poor families to establish claims in the new system, minimizing potential distortion by community founders or other elites' (5206). The changes also enabled the community to better cope with later comparable flooding, whose agricultural, infrastructural and health impacts were

'negligible' by comparison with 1998 (5205). The experience of Hurricane Mitch 'appears to have enhanced the community's long-term resilience to similar extreme events' through three social changes. Cultivators continued to avoid the immediate floodplain so no agroforests were lost. Emigration of wage-seeking youth ensured many households had external sources of cash to cope with crop losses. Health impacts were minimised by new clean water delivery in place thanks to land reorganization and 'enhanced community cohesion (5205-5206).

Lessons learnt include the following.

- Latent adaptive capacity 'can lie in sources of apparent vulnerability'. For example, the Tawahka's traditionally diffuse governance structure was deemed problematic due to its lack of decision-making hierarchy, but it turned out to be a great source of long-term resilience. In fact, 'what appears to have been working well and for a long time' should be investigated, as it may reveal 'attributes that deserve both short-term and long-term support' (5206).
- 'Conventional development assistance before and after shocks can exacerbate vulnerabilities' (5203).
- Many prescriptions for the rural poor's adaptation to climate change focus on household-level adjustments in investments and productive activities with external support and/or facilitation, typically delivered top-down via traditional governance structures. But in this case, change did not rely on governance typically promoted (e.g. explicit consensus building and participation) (5206).
- Programmes must also 'reach beyond conventional income generation, capacity building and governance reform to include support for local peoples' struggles for land and resource access, as well as, in the case of indigenous people, territorial autonomy and self-determination' (5206).
- Future interventions should foster local capacities for endogenous institutional change in order to enhance community resilience to, and the poor's ability to cope with, climate shocks. This requires 'none of the external subsidization important for institutional change in other indigenous communities'. Priority should be given to ensuring 'a favorable context for the emergence of the informal networks and endogenous solutions most likely to turn a crisis into an opportunity' (5206).
- Bottom-up assistance allows 'adaptive capacities and flexible governance structures to emerge' (5203). In the case examined, the institutional change in land tenure arose and spread 'in a bottom-up, almost "viral" way', with no leader championing the new system and no meetings held to discuss it (5205). This 'quiet process of cumulative decision-making by individual households' was an 'emergent property of the system', tapping into social memory and ecological memory (5206).
- Change after shocks can take time to become visible. Greater attention must be paid to longer-term trajectories of recovery. For instance, 'long-term cultural commitment to place' fostered the trust, shared values and mutual understanding essential for institutional flexibility (5206). Community members also had the time and institutional space 'to sort out and slowly enact a new, locally meaningful post-disaster order' in the absence of external intervention.

**Nuwayhid, I., Zurayk, H., Yamout, R., & Cortas, C. S. (2011). Summer 2006 war on Lebanon: A lesson in community resilience. *Global Public Health*, 6(5), 505–519.**

[http://www.tandfonline.com/doi/abs/10.1080/17441692.2011.557666?url\\_ver=Z39.88-2003&](http://www.tandfonline.com/doi/abs/10.1080/17441692.2011.557666?url_ver=Z39.88-2003&)

During the July 2006 Israeli war in Lebanon, 250,000 internally displaced persons (IDPs) lived under particularly difficult conditions in terms of shelter, crowding, food and water for over a month. Contrary

to expectations, this group did not experience infectious diseases or malnutrition, internal violence or clashes with host communities due to political animosities. From their displacement to their return and post-war adaptation, the IDPs were remarkably able to absorb the harsh circumstances, to endure wartime and to adjust, in good part through self-organisation. Their community resilience was high.

The following played an important role in ensuring community resilience.

- Long-term factors that had built up resilience in the community (and trust in its leaders), including:
  - a strong communal identity united around a common cause and ideology, i.e. socio-political, economic and historical elements crystallised around resistance to Israel and local Shiite religious culture;
  - 'hardiness' developed due to prior experience with wars in South Lebanon (511);
  - reliable and strong networks of social support, educational and health services established since the mid-1980s by Shiite political-spiritual leaders.
- Immediate factors that sustained resilience during and shortly after the war:
  - a sense of cohesive community. Shiites were particularly targeted by Israeli attacks and came together in collective response, reinforcing practical and ideological cohesiveness.
  - adequate public health interventions. An 'active and swift public health response' reassured the community and 'addressed its basic survival needs'. Hundreds of NGOs, including 'networks of social and health services run by Hezbollah', and thousands of volunteers, with support from the international emergency community, supplied shelter, food, water, clothing, medical care and other necessities (512).
  - social solidarity with the displaced from other communities. The group of IDPs had taken shelter in regions where other religious communities predominated. There, an 'overwhelming wave of solidarity' crossed religious, ethnic and political divisions, with shelter, food and care offered. This 'helped prevent the breakdown of social order' (512).
  - a connected political leadership, with ideological and practical effectiveness that sustained resilience. Leaders' communication about the war and about the IDPs appealed 'to a set of deeply held, shared beliefs' and extolled military and political victories, thereby keeping the IDPs 'responsive and engaged'. Their practical actions, 'focused on the dignity' of IDPs, were extremely timely and effective. Actions included: the provision of health and social services (including delivery of medication and cash for families); local committees jointly run by IDPs and party delegates; the centralisation of all humanitarian aid in Hezbollah; and 'activities that contributed to the physical and spiritual welfare' of IDPs, including for children and mothers. This generated 'a strong spiritual sense of self-worth' and a common identity, enhancing IDPs' ability to resist adversity. Immediately following the war, Hezbollah also pledged 'to distribute one year's worth of rent to each affected family and to help finance the reconstruction of destroyed homes' (513).
- By contrast, national and international efforts did not perform well. Lessons learnt include (515):
  - the importance of viewing community resilience as a process rather than an outcome;
  - the need for multilevel action that precedes the onset of a disaster or emergency;
  - 'the need to address communities rather than individuals in emergency relief';
  - the need 'to analyse political and social constructs of the affected populations' (this enabled Shiite leaders to integrate IDP's perceptions and priority needs, such as potential violence and sexual abuse, 'while public health groups were focused on provision of basic needs');

- the need to consider IDPs' capacities and resources, not just their needs; particularly in very politicised contexts, 'connecting to existing community resources and organisations' helps alleviate community suspicions about the motives of international emergency and relief efforts.

### 3. Evidence of effectiveness

#### **Effectiveness of humanitarian systems**

**López-Marrero, T., & Tschakert, P. (2011). From theory to practice: Building more resilient communities in flood-prone areas. *Environment and Urbanization*, 23(1), 229–249.**

<http://eau.sagepub.com/content/23/1/229>

The study examines community resilience to floods, based on the cases of two disadvantaged communities in a flood-prone municipality of Puerto Rico. Flood management in Puerto Rico consists of: engineering controls, response and recovery; warning systems and response plans; and more recently disaster preparedness and prevention (disaster mitigation including a component on community resilience). It has historically focused on technical responses, which is a challenge when trying to re-orient activities toward resilience, especially community resilience.

Local residents and emergency managers had long developed local adaptation mechanisms to floods. This pre-existing knowledge contributed to their resilience. However, some elements of community resilience were not addressed. Enhancing existing resilience would require the following (244, 246).

- 'Promoting social learning by building on existing knowledge about floods'. This would combine different types of knowledge and should explicitly integrate local knowledge, particularly about the multiple types of floods and the potential influences of human activity on floods.
- 'Stressing the importance of developing a diverse set of flood management options', with an acknowledgement of the complementarity of technical and non-technical strategies. This fits resilience thinking, which calls for nurturing diversity and providing flexible management options. Such an approach would need to increase awareness of the potential risks associated with technical measures in the area and emphasise 'the importance of developing and implementing non-technical strategies for flood management to complement technical ones'.
- 'Promoting effective linkages and collaborations between community members and emergency managers to encourage collective flood management'. In particular, there is a need for social networks that allow for rapid reorganisation after a flood and creative preparation.
- However, effectively building such partnerships would require overcoming current barriers between both groups: 'avoidance of responsibility, mutual distrust, lack of confidence, distrust in government institutions, disenchantment and conflicting opinions about options to reduce flood damage'. One strategy could be to set up community committees and co-management to develop collaborative flood management, as such local mechanisms have 'proven to be effective in diminishing the loss of life and property elsewhere in the Caribbean' (247).

**Pérez-Sales, P, Cervellón, P, Vázquez, C, Vidales, D, Gaborit, M. (2005). Post-traumatic factors and resilience: the role of shelter management and survivors' attitudes after the earthquakes in El Salvador (2001). Journal of Community & Applied Social Psychology, 15, 368-382**  
[http://www.worldwideopen.org/uploads/resources/files/784/RES040\\_Post\\_Traumatic\\_Factors\\_and\\_Resilience\\_El\\_Salvador.pdf](http://www.worldwideopen.org/uploads/resources/files/784/RES040_Post_Traumatic_Factors_and_Resilience_El_Salvador.pdf)

The study involved participatory research action in the two largest shelters established after the 2001 earthquakes in El Salvador. The two shelters 'differed primarily in whether the grouping of tents was made to reflect the community of origin of the survivors (shelter Santa Gertrudis) or not (shelter El Cafetalón)'. A comparison showed refugees in the shelter whose clustering did reflect their communities of origin participated twice more in community activities and 'had more positive emotional memories, fewer feelings of having been humiliated and less emotional discomfort' (368). In addition, there were major differences in power dynamics: in El Cafetalón, 'formally elected representatives frequently resigned, did not attend meetings or did not transmit information', whereas in Santa Gertrudis 'the system of leadership and representation functioned smoothly'. In the latter shelter, representatives were selected by people who already had bonds of confidence with them (377).

Based on this research and a review of the broader literature, authors make the following points.

- Standard post-disaster strategies tend to focus on needs and solely aim at re-establishing previous conditions (a goal rarely achieved). They may result in maintaining or increasing pre-existing vulnerability, as opposed to strategies that focus on fragility/vulnerabilities and resilience/capacities (371).
- Although pre-traumatic factors are very important in predicting the intensity of the traumatic response, post-disaster factors are increasingly recognised as important buffers or accelerators of traumatic response intensity.
- The early solidarity that existed among people in the shelters diminished as the situation became more stabilised. Most respondents attributed this change to the manner in which donations were distributed, with 'confusing rules of distribution which occasionally favoured those who most complained over those most in need' (375).
- Participation requires a process of bottom-up construction, not only the creation of formal structures. Genuine participation requires procedures that are compatible with the local culture and which respect the networks and leadership that existed before the disaster.
- Personal dignity is key to avoiding psychological vulnerability. Half the people interviewed in the study made references to having been humiliated, especially in relation to the distribution of food and donations and the absence of spaces of intimacy. This deserves attention by aid organisations.
- 'The need to maintain routines and the great importance given to the ability to work or to attend to the necessities of the family (cooking, laundry) may be viewed as something related to dignity as well'. For example, kitchens for groups of families instead of central kitchens, or the hiring of refugees for reconstruction may not be the most cost efficient decisions, but could be instrumental in enhancing people's empowerment, as well as being more cost efficient in the long term.
- 'Forms of organisation and management which consider elements of dignity, participation and respect for the capacity of the victims to control their own lives are relevant factors for effective individual and community coping after a catastrophe' (368).

## **Effectiveness of collaboration**

**Bava, S., Coffey, E. P., Weingarten, K., & Becker, C. (2010). Lessons in Collaboration, Four Years Post-Katrina. *Family Process*, 49(4), 543–558.**

[http://onlinelibrary.wiley.com/doi/10.1111/j.1545-](http://onlinelibrary.wiley.com/doi/10.1111/j.1545-5300.2010.01339.x/abstract;jsessionid=3E9CCF1209D0EA111813953D817F11C8.d01t01)

[5300.2010.01339.x/abstract;jsessionid=3E9CCF1209D0EA111813953D817F11C8.d01t01](http://onlinelibrary.wiley.com/doi/10.1111/j.1545-5300.2010.01339.x/abstract;jsessionid=3E9CCF1209D0EA111813953D817F11C8.d01t01)

This case study entailed action research about a project conducted by members of a national family therapy organisation and members of a local family therapy institute. Their project was to collaborate with local disaster recovery workers two years after Hurricane Katrina, in order to create a local action research team to study best practices in strengthening community resilience to disaster.

The case addresses the best ways for outsiders 'to enter and join in working with mental health and social-service providers facing the long-term effects of a disaster' (545). It sets out key dilemmas and tensions in forming collaboration in a stressed and changing environment. In particular, there are complex dilemmas related to invitation, to authorization, and to securing funding for data collection and for 'defining and developing relevant community services' (555).

Lessons learned include the following (pp. 555-556).

- 'An insider contact person will be pulled in different ways and must be provided with adequate time and material resources if she is to advance an outsider project.'
- 'An effective bridge between outsider and insider groups will require more than one person.'
- A 'shifting landscape in the responder community' is to be expected two years after disaster. 'This chaotic situation may make it difficult to find insider partners.'
- 'Outsiders should initially offer concrete help for concrete needs as requested by local groups.'
- 'Development of collaboration requires taking the time to make an initial offering or a response to a specific requested need, which then leads to face-to-face contact that can build trust and offer opportunities for dialogue.'
- 'The impact of collaborations may result in unanticipated outcomes', positive or negative.

**Djalante, R. (2012). Adaptive governance and resilience: the role of multi-stakeholder platforms in disaster risk reduction. *Nat. Hazards Earth Syst. Sci*, 12, 2923-2942.**

<http://nat-hazards-earth-syst-sci.net/12/2923/2012/nhess-12-2923-2012.pdf>

This paper looks at multi-stakeholder platforms (MSPs), 'interpreted as multiplicity of organisations at different scales of governance working towards more coordinated and integrated actions' in Disaster Risk Reduction (DRR) (2923). She examines MSPs as operational mechanisms for adaptive governance. Ten MSPs are studied at the global, regional, national and local level, with a focus on Indonesian MSPs.

This provides a picture of the respective roles and relative strengths and weaknesses of different MSPs.

- MSPs play an increasingly important role in disaster risk reduction. In particular, international MSPs have improved coordination 'between multiple stakeholders working at different levels', implemented key activities and built up their technical and financial capacities.



- MSPs are a useful form of adaptive governance, in Djalante's view. They allow for involvement of multiple actors at different level with different agendas, and they create spaces for participation and collaboration and for learning and sharing.
- International and regional MSPs 'tend to have more human, technical and financial capacity than national and local MSPs' (2923). As a result, most MSPs focus on coordinating a multitude of organisations, and only those MSPs that are able to obtain additional funding have the capacity to implement direct risk reduction activities. In Indonesia, the local MSPs tend to be project-based and their sustainability beyond such projects is unclear. They seem to be limited to administrative roles, their influence on decision-making in DRR planning and implementation remaining 'unclear' (2930).
- Inclusiveness is limited. What Djalante calls 'non-traditional' stakeholders (sectoral organisations, parliamentarians, scientific and academic communities, and the private sector) have not been much involved (2937). Participation by communities and groups at the grassroots level and, in particular, capacity building for local governments and local NGOs are lacking so far.
- Public data on MSPs' budgets is very limited, making it difficult to determine allocations in capacity or resources. This hinders accountability and coordination in planning and implementation.

### **Effectiveness of capacity building**

**Tadele, F., & Manyena, S. B. (2009). Building disaster resilience through capacity building in Ethiopia. *Disaster Prevention and Management*, 18(3), 317-326.**

<http://search.proquest.com/docview/89247389>

The Institutional Support Project (ISP), funded by The Canadian International Development Agency (CIDA) from 1997 to 2006 and implemented by Save the Children (Canada) assisted the government in 'building institutional support to enable it prepare for, prevent and respond to disasters'. The four-pronged project consisted in human resources development, action research, physical capacity building and enhancement of systems and structures (318).

The authors emphasise that 'building disaster resilient communities through capacity building should be viewed as a process of change where there are no easy ways or answers in terms of design and implementation' (324). Lessons include the following.

- Programmes should 'adopt a non-intervention approach', i.e. using existing structures rather than creating parallel or new structures (325).
- Programmes should be 'demand-driven and beneficiary-based rather than supply-driven' (317).
- Programmes are more likely to be successful if they are holistic and integrated than those adopting a fragmented approach. The reason for this is that disasters are 'multifaceted': if only some elements are targeted for change while the 'big picture' and other areas remain unchanged, the intervention is likely to have little to no effect, or even to reduce communities' resilience.
- Coordination by donors, as well as government agencies, is therefore fundamental, in order to ensure that all areas where capacity building was needed are covered (such as policy, resource mobilisation and human resources development).

- Likewise, project designs should coordinate all the activities with each other and 'build synergies between "hard" or tangible aspects and "soft" or intangible aspects such as local knowledge systems of target institutions and communities' (324-325).
- As capacity building is a slow process, all partners must be willing to commit to the above. Otherwise, programmes will not have a lasting influence or long-term impact.

### **Effectiveness for women and children**

**Scharffscher, K. S. (2011). Disempowerment through disconnection: Local women's disaster response and international relief in post-tsunami Batticaloa. *Disaster Prevention and Management*, 20(1), 63–81.**

<http://www.emeraldinsight.com/journals.htm?articleid=1907284&show=abstract>

In Batticaloa, eastern Sri Lanka, during the post-tsunami emergency, international relief workers 'failed to connect and cooperate with local women's organizations'. They marginalised local women's resilience and did not take local women's capacities, resources and knowledge into account. When major international relief actors arrived in Sri Lanka after the tsunami, there were already strong 'up-and-running community-based relief activities', which could have been acknowledged, involved and supported by international relief workers (77).

Scharffscher states this is due to 'us and them' undercurrents of international relief – 'the lingering remnants of a colonial heritage'. The disconnection may have led to a disempowerment of local capacities, flaws in the international relief activities (with effectiveness and sustainability compromised) and reduced resilience among Batticaloan women in relation to the civil war (63). Moreover, international relief work 'may have contributed to an escalation of the violent conflict' (77).

International humanitarian practices counteracted local dynamics in several ways, including the following (77).

- A lack of cultural sensitivity, which was possibly rooted in a male-dominated tradition of 'rigid agendas' in humanitarian work. This 'introduced 'new ways of being' that created a dissonance' with the local communities and with international personnel already based in Batticaloa.
- The use of English as the only working language.
- There was 'an atmosphere of haste'.
- There was 'inadequate intra-agency coordination in relation to local capacities'.
- 'A lack of knowledge on how to safeguard the social status of women working for international organizations'.

All these factors disenfranchised the resources of the people who international relief workers were there to help. Local organisations consequently withdrew from possibilities of contact, exacerbating cooperation problems further.

- Information was no longer shared with ease and two separate worlds emerged: the local networks and the international relief bubble.
- There seemed to be a lack of systematic consultations, a missed opportunity for relief organisations to 'be alerted about the grievances' of local organisations and networks.

- Instead, international relief workers presumed to know about Sri Lankan women's vulnerabilities and how to deal with gender-based violence, marginalising ongoing local efforts.
- International relief workers 'may have missed out on local initiatives to deal with men's gendered vulnerabilities in the wake of the tsunami'.
- There was a sense among local populations 'that money and resources had been misspent or wasted', which may have undermined international credibility and legitimacy.
- Local reaction ended up being 'quiet alienation from the international relief apparatus' (77).

**Manyena, SB, Fordham, M, Collins, A. Disaster Resilience and Children: Managing Food Security in Zimbabwe's Binga District. Children, Youth and Environments. Vol. 18, No. 1, Children and Disasters (2008) (pp. 303-331)**

<http://www.jstor.org/stable/info/10.7721/chilyoutenvi.18.1.0303>

The authors investigated the involvement of children in disaster risk reduction (DRR) programmes in Binga District, Zimbabwe, which focused on food security. Children could be an invaluable part of human agency in disaster contexts, especially in view of increasing numbers of children orphaned by HIV/AIDS and heading households.

Despite children's clear knowledge on disasters, 'children were not invited to community meetings, which are open ostensibly to all residents in the ward'. Children's participation 'was not seen as beneficial for children, even among some of the children themselves' (318). Children also said adults would 'not give them space to be heard' and not understand them (319).

Children's involvement in DRR is thus still contested. 'Unless family and cultural pressures imposed on children are recognized and managed in disaster risk programming, the potential of children's involvement is likely to be missed in building disaster-resilient communities' (303).

- Some difficulties with effective involvement of children in DRR activities are well established in the literature, such as 'getting locked into justifying children and youth's involvement without practical action' (313). Past and current approaches 'have suffered from tokenistic approaches, where children are given a voice, but have little choice about the subject, the style of communicating it or any say in organizing the occasion' (323).
- Children's participation in DRR programmes could be crucially dependent on how family and cultural aspects are negotiated. The authors state this might be particularly true in a district like Binga where 'historic cultural aspects could be considered still in part intact'.
- Failure to consider 'cultural aspects specific to individual locations could affect children's participation', sometimes even harming family relations (305). This can become counterproductive for children, sometimes with risks of emotional or physical harm (319).
- Parents must be recognised as the 'gatekeepers' in children's disaster reduction as guardian of traditional values in the community. Children's role in disaster reduction 'requires examination of the cultures of parenthood' (319).
- Deciding on the best mechanism for feeding children's ideas into decision-making structures is not simple: be it setting up a separate structure for children to meet as a group or trying to have children participate in meetings with adults, each option has advantages and drawbacks.
- Children's dependence on adults reduces their capacity for self-organisation.
- Effective involvement of children in DRR needs 'a sound and properly grounded socio-cultural and political consciousness to enable programs to be assimilated within local traditions'.

Calling on children's rights 'to address power relations between adults and children is likely to be rejected, unless it is embedded in local child and adult traditions' (320).

- One way forward is 'to demonstrate "children's resilience actions", [i.e.] what children are capable of doing at the individual and community level as part of human agency' (323).

The local cultural context can thus 'be either a major barrier or major opportunity depending on how the community characterizes the role of children' (324).

#### **4. Additional references**

##### **Academic reviews**

Castleden, M., McKee, M., Murray, V., & Leonardi, G. (2011). Resilience thinking in health protection. *Journal of Public Health*, 33(3), 369–377.

<http://pubhealth.oxfordjournals.org/content/33/3/369>

Norris, F. H., Stevens, S. P., Pfefferbaum, B., Wyche, K. F., & Pfefferbaum, R. L. (2008). Community resilience as a metaphor, theory, set of capacities, and strategy for disaster readiness. *American Journal of Community Psychology*, 41(1-2), 127–150.

<http://link.springer.com/article/10.1007/s10464-007-9156-6>

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