The EnRiCH Community Intervention
Collaborative Asset-Mapping to Enhance Resilience for High Risk Populations

Intervention manual prepared on behalf of The EnRiCH Collaboration

by

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Executive Summary

Community resilience and adaptive capacity are recognized as essential elements promoting population health and national security (Kickbusch & Sakellarides, 2006; Kahan et al., 2009; Norris et al., 2008; Paton, 2006). The people most ‘at-risk’ during natural disasters and chemical, biological, radiological, nuclear and explosive (CBRNE) events are those who face everyday challenges linked with the social determinants of health, which influence their functional capabilities related to communication, housing, awareness, mobility/transportation, psychosocial health, self-care/ daily tasks, and safety/security (O’Sullivan et al., 2013b; CSDH, 2008).

The literature on disaster preparedness and community resilience highlights the need for prioritization of contingency planning for high risk populations (Enarson & Walsh, 2007; Kailes & Enders, 2007; Lemyre et al., 2009; Lemyre & O’Sullivan, 2013; WHO, 2009). However, little emphasis has been placed on intervention studies designed to evaluate the effectiveness, feasibility and appropriateness of collaborative asset-mapping interventions to enhance community resilience for disasters. Moreover, there is a need for information about how to include high risk populations in community resilience-oriented interventions (Kapucu et al., 2013).

The EnRiCH Project was designed to address these shortcomings and to implement and evaluate an inclusive collaborative asset-mapping intervention, using a salutogenic approach. This approach recognizes assets which promote resilience, in conjunction with the needs of the community (Antonovsky, 1996; Kretzmann & McKnight, 1996; Morgan & Ziglio, 2007). Recognition of assets shifts the lens toward potential contribution and functional needs for support, rather than vulnerability (Kapucu et al., 2013).

This collaborative asset-mapping intervention was designed, implemented and evaluated in partnership with 5 communities in Canada. The EnRiCH intervention protocol has two distinct components. The first is the Asset/Need Assessment, which is a full day session oriented toward building relationships and generating awareness about the assets and needs of individuals and organizations in the community. The asset/need assessment session is facilitated using the Structured Interview Matrix (SIM) technique (Corneil et al, 2011).

The second component of the intervention protocol is the Collaborative Asset-Mapping, which has 3 phases: 1) Orientation session; 2) 10-week online collaborative asset-mapping task; and 3) a table-top exercise. The orientation session focuses on building relationships, introducing the CHAMPSS Functional Capabilities Framework (O’Sullivan et al., 2013b), and providing hands-on instruction for using the online collaborative tool and Google Docs. The online collaborative asset-mapping component is an asynchronous process where the participants populate the asset-spreadsheet using an online collaborative tool (Google Docs) over a 10-week period (Kuziemsky et al., 2012). The final phase is a table-top exercise, where the participants attend another half-day session, in person, to work through a disaster scenario using the database of assets they have compiled during the previous phase. This exercise provides an opportunity for the community to assess their adaptive capacity for events which could involve evacuation and care for people who are considered to be at high-risk for negative impacts of the disaster.

This manual was created to provide a resource tool for communities to enhance resilience and disaster preparedness. It provides a summary of the project, a description of the framework that informed the design of the intervention, and a step-by-step explanation of how to implement the EnRiCH collaborative asset-mapping protocol. Additional resources, such as the detailed description of the CHAMPSS Functional Capabilities Framework, and the SIM instructional video and manual, are available at http://enrichproject.ca/publications-and-resources.html.
Project Summary

The EnRiCH Project began in January 2010 as a community-based participatory research project with 13 governmental, non-governmental and academic partners. Over the course of the project, it evolved to include partners in the target communities of Truro, Nova Scotia; The Region of Waterloo, Ontario; Gatineau and Québec City in Québec; and Calgary, Alberta; as well as across Canada and internationally.

The overarching purpose of The EnRiCH Project was to develop new knowledge on essential elements of resilience-oriented intervention programs to enhance preparedness, response and recovery for Chemical, Biological, Radiological, Nuclear and Explosive (CBRNE) events or natural disasters. The project developed empirical evidence on the effectiveness, appropriateness, and feasibility of a community mobilization intervention designed to mitigate social risk among high risk population groups, through the implementation of a collaborative asset-mapping intervention designed to enhance connectedness, collaboration, awareness, and community adaptive capacity. The project logic model for EnRiCH is shown in Figure 1 below.

Following an environmental scan and extensive review of the available literature, interviews with key-informants across Canada and asset/need assessments were conducted in each of the target communities. This information was used to develop a Framework for Critical Social Infrastructure to Promote Population Health and Resilience (O’Sullivan et al., 2012), which highlights the complexity of community resilience, and provides recommendations for upstream strategies to promote resilience, by building on assets which make up the critical social infrastructure in a community. The key aspects of the framework are connectedness, collaboration, and situational awareness as assets that support adaptive responses to changing context in a community. This framework formed the theoretical basis for the intervention described below, which focuses on relationship-building and identifying key assets in the community to enhance resilience and preparedness among high risk populations across all phases of a disaster (prevention / mitigation, preparedness, response, recovery).

The third and fourth phases of the project included the design, implementation and evaluation of the intervention. The evaluation was divided into process and summative components. The summative evaluation focused on the outcomes of the intervention, whereas the process evaluation examined aspects of implementation, including how the intervention was structured and delivered in each community, as well as barriers and facilitators that influenced implementation.

Community partners from across Canada and the EnRiCH international networks provided guidance throughout the duration of the project. The project advisory panel, established in 2010, has evolved into what we now refer to as ‘The EnRiCH Collaboration’, with approximately 60 Canadian and international representatives of governmental and non-governmental agencies, community associations, and representatives of the public. This expanded initiative was launched at the first EnRiCH International Conference on Whole-of-Society Engagement, which was held in Ottawa, Canada in November 2012. The webinar of the full conference is available at http://enrichproject.ca/publications-and-resources.html.

The dissemination phase of the project is ongoing, and involves sharing the knowledge co-created with the EnRiCH communities. The EnRiCH Collaboration is a central component of the dissemination phase and ensuring the tools and other resources from the project contribute to enhancing assets in other communities.
Community Intervention Framework

The EnRiCH Community Intervention Framework focuses on strengthening assets related to critical social infrastructure that contribute to population health and resilience at all phases of a disaster (see Figure 2). The specific assets focused on for this intervention are connectedness, collaboration, and situational awareness, to promote adaptive responses to changing contexts in a disaster. To enhance these assets within each community, the intervention focuses on providing opportunities for community groups to engage in collaborative asset-mapping and discussions about how these assets can be incorporated into contingency plans. The collaborative asset-mapping not only builds a database of available assets among individuals and organizations in the community, but the process facilitates relationship-building, increased common ground, and awareness about assets (resources) which could potentially contribute to prevention/mitigation, preparedness, response or recovery activities.
Figure 2. The EnRiCH Project Community Intervention Framework
Common ground is a critical element of interpersonal communication and refers to the shared understanding, beliefs and goals between people in collaborative relationships (Clarke & Brennan, 1991; Kuziemsky & Varpio, 2010). Previous studies have shown it is a key factor in fostering awareness (Carroll et al., 2009), a finding supported by the asset/need assessment phase of The EnRiCH Project (O’Sullivan et al., 2012).

An important feature of this intervention framework is the emphasis on inclusive engagement of high risk populations in contingency planning and asset-mapping, to foster trust and connectedness, and to draw on their expertise regarding how to support people with functional limitations (O’Sullivan et al., 2012). Thus, to align with the overall project goal of enhancing resilience among high risk populations, the intervention framework focuses on contingency planning and enhancing critical elements of interpersonal and inter-organizational communication, by presenting opportunities for community stakeholders to collaborate through purposeful tasks related to mapping assets, enhancing awareness, and developing or enhancing relationships. In the section below we outline the protocol used to operationalize the framework in Figure 2. The intervention protocol is divided into 1) an asset/need assessment which is the preliminary step; and 2) a 3-phase collaborative asset-mapping task.

**Intervention Protocol**

The EnRiCH Intervention Protocol has two distinct components. The first is the asset/need assessment, which is a full day session oriented toward building relationships and generating awareness about the assets and needs of individuals and organizations in the community. The asset/need assessment session is facilitated using the Structured Interview Matrix (SIM) technique (Corneil et al, 2011) to complete a SWOT analysis (strengths, weaknesses, opportunities, and threats). The eight questions used to guide the SIM sessions in the EnRiCH communities are provided in Annex A.

Once the asset/need assessment is complete, the community is provided with a feedback session to review the results and to look at how they might move forward in the next stage. This is important for two reasons: 1) At all stages, the community needs to be moving towards ownership of the project. It is their community and their information that will be the foundation of their plans and actions; and 2) The feedback session provides an opportunity to expand the network and participation so the community can begin planning the next meeting and involve additional participants.

The methodology and instructions on how to conduct a SIM are contained in a manual and an instructional video available at [http://enrichproject.ca/publications-and-resources.html](http://enrichproject.ca/publications-and-resources.html). The results from the asset/need assessment in each community are analyzed according to strengths, weaknesses, opportunities and threats (SWOT) and presented in the following format.
The second component of the intervention protocol is the Collaborative Asset-Mapping Task, which has 3 phases: 1) Orientation session; 2) 10-week online collaborative asset-mapping task; and 3) Table-top exercise. The orientation session focuses on building relationships, introducing the CHAMPSS Functional Capabilities Framework (O’Sullivan et al., 2013b), and providing hands-on instruction for using the asset-mapping tool and Google Docs. The online collaborative asset-mapping task is completed asynchronously over a 10-week period, and involves the participants populating the spreadsheet using Google Docs, which is a free web-based office tool (Kuziemsky et al., 2012). The final phase is the table-top exercise, where the participants attend another half-day session to work through a disaster scenario using the database of assets they have compiled during the previous phase. This exercise provides an opportunity for the community to assess their adaptive capacity for potential disasters involving the need to provide support for people who are considered to be at high-risk for negative impacts of the disaster.

This intervention protocol is meant to be a template for communities to design activities appropriate to the current context of their population needs, using a salutogenic approach (Antonovsky, 1996). A salutogenic approach recognizes assets that promote resilience, however it is important to look at the asset profile in conjunction with the needs of the people in the community, to align the appropriate supports (Morgan & Ziglio, 2007). By recognizing the assets of the individuals and organizations within a community, the lens shifts toward potential contribution and functional needs for supports, rather than vulnerability (Kapucu et al., 2013).
Kickbusch and Sakellarides (2006) suggest that awareness, values, and innovation are key attributes for responding to community threats. The results from the EnRiCH intervention support these guidelines, particularly the need for opportunities to exchange knowledge, to recognize the value of individual and organizational assets, and to empower communities to be innovative (O’Sullivan et al., 2013a).

Phase 1: Orientation Session

The first phase of the Collaborative Asset-Mapping Task consists of a full day session with community stakeholders from multiple sectors. The agenda for the session includes:

1. An orientation to the CHAMPSS Functional Capabilities Framework
2. Training on the use of the online collaborative asset-mapping tool (Google Docs)
3. Facilitated focus group discussion using a process evaluation method called ‘Think Aloud’ (Kushniruk & Patel, 2004) where participants describe their experiences, concerns, and ideas as they learn how to use the framework and the online tool.

Before the collaborative asset-mapping task is introduced, it is essential to provide an overview of the CHAMPSS Functional Capabilities Framework for the participants, as this approach is new for many people (see O’Sullivan et al., 2013b). This overview part of the agenda is an important component of building awareness and provides an opportunity to educate participants from multiple sectors about the benefits of assessing individuals and communities from an assets or strengths-based perspective, rather than traditional labelling of limitations according to diagnoses. A functional capabilities approach focuses on the strengths and assets of individuals and organizations in the community, while considering the supports which may be needed to address limitations in functioning and promote autonomy and independent living. This approach builds on the function-based approach recommended by Kailes & Enders (2007).

The CHAMPSS Functional Capabilities Framework (O’Sullivan et al., 2013b) has 7 categories:

- Communication
- Housing
- Awareness
- Mobility / Transportation
- Psychosocial
- Self-Care / Daily Living Tasks
- Safety / Security

During the orientation session, participants are shown a template spreadsheet, designed for communities to use online as collaborative tool to map community assets according to the CHAMPSS categories (see Figure 4 below). The columns on the template spreadsheet include:

- Organization name
- Website link
- Information about the organization
- Contact information
- Key elements of the available programs / services
- Which CHAMPSS categories are addressed by the available programs / services
The protocol provides participants with an opportunity to use the spreadsheet while they are at the session, to practice applying the CHAMPSS Functional Capabilities Framework when identifying community assets that may assist with preparation for, response to, and recovery from a disaster. This practice session is an opportunity for participants to discuss the CHAMPSS framework aloud, identifying any challenges they encounter with the concepts, any suggestions they have for tailoring the spreadsheet to the context of their community, and the process of acquiring new awareness about functional needs and assets, and potential supports for high risk populations in their community. The asset-mapping tool, including the CHAMPSS Functional Capabilities Framework is available in both English and French.

The objectives for the orientation session are:

- To educate participants about the CHAMPSS Functional Capabilities Framework so they acquire the skills to apply the categories when populating the spreadsheet online
- To introduce the asset-mapping task and explain its potential use
- To provide an opportunity for participants to meet in person and establish or enhance connectedness between different organizations
- To enhance participant awareness about functional capabilities and the programs or organizations that exist in their community;
- To provide a formal opportunity for participants to collaborate on a specific task in a relaxed setting conducive to relationship-building and establishing connectedness

**Phase 2: Online Collaborative Asset-Mapping**

The second phase of the intervention is the online collaborative asset-mapping process, which begins as the orientation session ends. It is an 10-week process which: 1) provides an opportunity for community stakeholders to work together to create a database of community assets using the online template spreadsheet; 2) encourages stakeholders to work with their own organizations to prepare contingency plans; and 3) facilitates collaborative contingency planning using an all-hazards approach, in preparation for the table top exercise.

The participants are encouraged to tailor the spreadsheet to their collective needs and preferences as they fill it in online and develop the asset database over a 10-week period. Additional collaborative activities (eg. additional face-to-face meetings, spin-off initiatives, discussions by phone) tend to develop as part of the natural evolution of the common ground and synergy that develops within the group.

There are two main objectives for the online collaborative asset-mapping task:

- To identify and learn about assets in the community
- To enhance situational awareness, connectedness, and common ground
<table>
<thead>
<tr>
<th>Name</th>
<th>Website</th>
<th>Organization</th>
<th>About the Organization</th>
<th>Relevant EHRIT Support Categories</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community Living Program</td>
<td><a href="http://www.cmha.ns.ca/programs.html">http://www.cmha.ns.ca/programs.html</a></td>
<td>Canadian Mental Health Association Colchester East Hants Branch, P.O. Box 1314, Truro, NS, B2N 5V2 In person: 25 Revere Street, Truro Phone: (902) 895-4211 Fax: (902) 896-4027 Email: CMHA Colchester East Hants Branch</td>
<td>This organization supports people who have emotional disabilities, such as mental illness. The services include supports for independent living, assistance with finding safe and affordable housing, monitoring and knowledge/skill development</td>
<td>Psychosocial, Self-care, Safety &amp; Security</td>
</tr>
<tr>
<td>Colchester Transportation Cooperative Limited—Dial a Ride Service</td>
<td><a href="http://www.ctcl.ca/ctcl.html">http://www.ctcl.ca/ctcl.html</a></td>
<td>Colchester Transportation Cooperative Limited Telephone: 1-800-895-7433 Email: <a href="mailto:info@ctcl.ca">info@ctcl.ca</a></td>
<td>This organization provides accessible transportation for people who have disabilities or other functional needs which limit their access to transportation.</td>
<td>Mobility / Transportation</td>
</tr>
<tr>
<td>Colchester Community Workshops Foundation</td>
<td><a href="http://www.msmnt.org/ccwfinishes.html">http://www.msmnt.org/ccwfinishes.html</a></td>
<td>Colchester Community Workshops Foundation 16B Arthur Street, PO Box 314 Truro, N.S., B2N 5C5 Email: <a href="mailto:adminfoundation@ns.sympatico.ca">adminfoundation@ns.sympatico.ca</a> Telephone: (902) 895-4799 Fax: (902) 896-6533</td>
<td>This organization is a vocational and life skills training center for people with intellectual disabilities. Some of the specific programs include workshops on life skills, health and wellness and employment skills</td>
<td>Self-care; Safety &amp; Security</td>
</tr>
<tr>
<td>Colchester Residential Services Society</td>
<td><a href="http://www.colchester.com/disability.html">http://www.colchester.com/disability.html</a></td>
<td>Colchester Residential Services Society Phone: 902-893-4273</td>
<td>This organization provides residential services to people with intellectual disabilities over age 5 (e.g., group homes, supervised apartment housing, training programs for independent living)</td>
<td>Self-care; Safety &amp; Security</td>
</tr>
<tr>
<td>Continuing Care Nova Scotia</td>
<td><a href="http://gov.ca/health">http://gov.ca/health</a></td>
<td>Continuing Care Nova Scotia 201 Willow St, Truro NS, B2N 429 Phone: 895-6334</td>
<td>This organization focuses on home support services such as visits, home nursing, housekeeping, laundry, meal preparation and other types of personal care and transportation. It also includes respite care for families.</td>
<td>Self-care; Mobility / Transportation</td>
</tr>
<tr>
<td>Disabled Consumers Society of Colchester (DCSC)</td>
<td><a href="http://ns.nib.ca/search/view?target=category%2C4%2C55">http://ns.nib.ca/search/view?target=category%2C4%2C55</a></td>
<td>Disabled Consumers Society of Colchester (DCSC) Phone: 902-896-6282 Email: <a href="mailto:alan.fisher@ns.sympatico.ca">alan.fisher@ns.sympatico.ca</a> P.O. Box 1794 Truro, Nova Scotia B2N 5C5</td>
<td>This organization focuses on advocacy, providing accessible transportation through the Able Transit program, and providing equipment, information, and other types of supports for people with disabilities</td>
<td>Communication; Awareness; Self-care; Safety / Security</td>
</tr>
<tr>
<td>Fundy Help Hearing</td>
<td><a href="http://ns.nib.ca/search/view?target=category%2C4%2C49">http://ns.nib.ca/search/view?target=category%2C4%2C49</a></td>
<td>Fundy Help Hearing Telephone: 902-662-3322 E-mail: <a href="mailto:settle@ns.sympatico.ca">settle@ns.sympatico.ca</a> 3281 Highway 4 Debert, Nova Scotia B0M 5G0</td>
<td>This is a volunteer organization that supports people who are hard of hearing and their families through the provision of equipment, financial assistance, information, recreation/social programs and other supports</td>
<td>Communication; Awareness; Psychosocial</td>
</tr>
<tr>
<td>Earth Angels Home Care Companions</td>
<td><a href="http://www.earthangels/homecare.ca">http://www.earthangels/homecare.ca</a></td>
<td>Earth Angels Home Care Companions E-MAIL: <a href="mailto:earthangels@ns.sympatico.ca">earthangels@ns.sympatico.ca</a> Local 888-4777 Toll Free 1-888-851-4777</td>
<td>This organization focuses on home support services such as visits, medication monitoring, housekeeping, laundry, meal preparation and other types of personal care and transportation. It also includes respite care for families.</td>
<td>Self-care; Mobility / Transportation; Safety / Security</td>
</tr>
</tbody>
</table>

Figure 4. Template Spreadsheet for Collaborative Asset-Mapping

(Note: This information was obtained from the internet to provide an example of the type of information which could be added to the spreadsheet, however through the discussion, inconsistencies in the information were noted by the EnRICH group in Truro – emphasizing why it is important to engage a variety of people and organizations in this collaborative task)
Phase 3: Table Top Exercise

The third phase in the Collaborative Asset-Mapping part of the protocol is a facilitated focus group (4-5 hours) in the form of a table top exercise to explore how existing contingency plans can be implemented to respond to changing context in a disaster scenario using the asset database created in the previous phase. Some communities may choose to test their contingency plans and the utility of the spreadsheet in a mock disaster drill, although this requires considerably more resources and may not be available in each community. The format of the intervention is designed to facilitate addition and withdrawal of participants, which is realistic, given the dynamic context of organizations in any community.

At the table top session, a disaster scenario (see example below) tailored specifically for the community (by the community) is presented and participants are asked to work through each phase of the response and recovery with new information and context for the scenario being added as the exercise progresses. This approach is consistent with community crises where the situation evolves and there is a high level of uncertainty (Convertino et al., 2007). A debriefing session is held at the end of the session, to record participant experiences with the exercise, to present observations from the facilitator, and to identify gaps in planning and potential assets the community can build on for future disasters.

Sample Scenario:

A train carrying chemicals has just de-railed on a bridge going through a residential area of the town. Two of the cars have fallen into the river and there is leakage, however the rate of spill is unknown, therefore the area within 2 km radius of the accident scene must be evacuated. Within the evacuation area there is a seniors residence and 2 group homes for people with developmental disabilities (Adapted from the Woolwich Exercise, Region of Waterloo, 2011).

The objectives for the table top exercise are:

- To provide an opportunity to pilot-test organizational and community disaster plans using a tailored scenario which requires consideration of high risk populations
- To evaluate the collaborative process of participating in a table top exercise using the asset database
- To assess participant awareness about emergency planning protocols, risks, hazards, and community assets
- To identify gaps in community or organizational contingency plans and potential assets which can be used to enhance resilience for future disasters
Lessons Learned from EnRiCH

Leaders emerged within each group

- Each community intervention was initiated through the development of partnerships with key stakeholders who were identified as 'champions' to support the objectives of the project. While these leaders were visible throughout the early phases of the project, other leaders also emerged within each group to champion the initiative and disseminate the information to the broader community.

EnRiCH was merged with other existing community initiatives

- Over the course of the implementation phase, EnRiCH was eventually merged with existing initiatives (or groups) in the community. The merging provided an opportunity to enhance and build upon the current context within each community, while expanding networks associated with each initiative.

Each community group developed a vision for how to use the asset-mapping tool

- While the community intervention was implemented using the same protocol in each community, the asset-mapping database evolved differently as each community group developed their vision of how the tool could be used to support their efforts to build capacity and enhance resilience.

Engagement of organizations not typically involved in emergency planning activities

- One of the most prominent outcomes within each of the communities was the presence and participation of organizations typically not invited to the planning table for emergency management activities. In two of the communities, the Stroke Survivor’s Club was an important addition to the collaborative group, specifically because of their expertise and linkages with families coping with stroke (ie. new disability) and the fact that many people were not aware this type of organization existed.

Expanded networks when EnRiCH was blended with existing community initiatives

- When the intervention protocol was complete in each community, it was important to ensure sustainability and integration of the group within the broader community context. The communities developed action plans to maintain the momentum of the group’s activities, and in three cases they chose to merge the EnRiCH activities with existing initiatives in the community. The relationships and linkages established within EnRiCH expanded the connections for the pre-existing groups, to enhance the diversity of expertise in planning exercises, which contributes to community adaptive capacity and population resilience.

Information exchange provided a source of knowledge to enhance awareness and empower participants

- EnRiCH not only provided participants with new tools to carry out their work, but also gave opportunities for them to reflect on their organizational and personal emergency preparedness plans.
The asset-mapping tool was tailored to meet the needs of each community and coordinate across sectors and other types of jurisdictional boundaries

- An essential part of communication is coordinating it across different sectors. The asset-mapping not only provided a task for the group to collaborate on, but it supported skill development, so people would be able to access necessary resources. Those participants who were not comfortable with the online tool benefitted from the relationship-building which occurred during face-to-face meetings with the group. These linkages can support information exchange regardless of the participant's skill or comfort level with the online tool. The sessions were over 4 hours in duration, therefore the time spent networking and collaborating on a specific task was important in building social capital and enabling groups to form a vision of how the tool could be tailored to fit their local context.

Electronic tools were perceived by some participants to be a barrier to information exchange

- Although electronic tools are often assumed to provide benefits for information access, some participants wondered if it may be a barrier to information exchange because of an inability to search through the information. This outcome underscores the need for communication tools to be suitable for all participants. Information is only as good as its quality, therefore people (champions) need to be identified to ensure information is kept up to date.

EnRiCH provided an opportunity to build a database of assets in the community

- For community members to become more active participants in disaster management, they need to be aware of what assets are available and how they can access them. Media tools such as Facebook and Twitter could be available to help people become aware of what resources are available. However a key discussion point was that assets need to be mapped and this process develops awareness, which becomes an asset in and of itself.

Google Docs provided an accessible interface to share documents for collaboration

- Asset management needs to ensure that people can access the necessary resources. Resources may exist, but it does not mean they are accessible. Access is an issue with how assets are managed. However finances are not the only issue preventing access to resources. In a high-risk population it cannot be assumed that the structure of resources will be the same for all members of the population. Visual limitations were cited as one reason people could not access resources.

Accessibility is a key consideration when hosting the sessions, to facilitate inclusive community engagement

- The selection of a facility is an important decision. Sessions need to be accessible for people with a wide range of functional limitations (not only physical limitations). This includes selecting a location which permits ease of access by public transit. In some areas it may be car-pooling arranged by a support group.

- There must be appropriate equipment and technology to enable everyone to see and hear during the session. For those with mobility issues, care needs to be taken to ensure they can manoeuver in the space. To support people who have service animals, it is important to ensure there is water and other amenities for the animals. Interpreters should be made
available for people with hearing limitations, and if people with cognitive limitations are participating, it may require that a volunteer be available to assist them in note taking or presentations.

- These basic elements need to be in place to ensure everyone can contribute, and to demonstrate that their involvement is valued. This element is essential to align with an inclusive, whole-of-society approach.

Concluding Remarks

The EnRiCH Community Intervention demonstrated how collaborative asset-mapping and investment in relationship-building activities can contribute to resilience in a community. The overarching goals were met by demonstrating the effectiveness, feasibility and appropriateness of this intervention to promote resilience and adaptive capacity.

The inclusive approach was shown to engage people with varying functional capabilities in asset-mapping activities to promote resilience and emergency planning. Trusted community organizations, advocacy groups, and other agencies were supported with highly-interactive planning processes to encourage organizations to engage the people they serve in practical ways to prepare for emergency response and recovery.

The project included participants with functional limitations, ensuring they have a voice in determining that the information and services they receive are appropriate. Their involvement became an important source for information about services for the groups, and was helpful in connecting emergency managers with resources to help meet the needs of individuals affected by disaster.

Serving the whole community in a disaster is a Disability Rights issue being enshrined in legislation such as the Accessibility for Ontarians with Disabilities Act (AODA). This legislation requires organizations to have emergency plans for people with functional limitations. Future policy development should focus on opportunities for diverse sectors within communities to invest time in exchanging knowledge about community organizations and the activities being planned, to enhance awareness, common ground, and preparedness at the community level.
References


Annex A

The EnRiCH Project Community Asset/Need Assessment
SIM Interview Guide

In the context of community resilience, please answer the following questions:

Round One

1. What are the strengths / assets / resources within your community that contribute to preparedness for, response to, and recovery from a disaster?
2. What are the weaknesses / vulnerabilities within your community that hinder preparedness for, response to, and recovery from a disaster?
3. What external opportunities could your community take advantage of to enhance preparedness for, response to, and recovery from a disaster?
4. What external threats (challenges or barriers) could impact your community’s preparedness for, response to, and recovery from a disaster?

Round Two

5. Based on the results of the discussions in the first round, in a disaster in your community, what supports and challenges would appear for people who have limited ability to communicate (due to disabilities affecting communication, being socially isolated, or communication technology being down)?
6. Based on the results of the discussions in the first round, in a disaster in your community, what supports and challenges would appear for people who have complex medical needs (due to chronic conditions or injuries from the event)?
7. Based on the results of the discussions in the first round, in a disaster in your community, what supports and challenges would appear for people who cannot live independently without assistance (due to age, cognitive disabilities, physical disabilities, lack of financial resources)?
8. Based on the results of the discussions in the first round, in a disaster in your community, what supports and challenges would appear for people who need assistance with transportation (due disabilities, lack of transportation, inability to drive, lack of financial resources)?