



Community Resilience
Planning Committee
(CRPC)

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CRPC Highlights

Dear Community Resilience Planning Committee (CRPC):

The [2015 Hurricane Sandy Conference](#) took place in August at the NYU Kimmel Center for University Life, hosted by the Department of Health and Human Services (HHS) Office of the Assistant Secretary for Preparedness and Response (ASPR). Thank you to CRPC members who attended. As a follow-up to the conference, two ASPR funded study teams presented findings to the CRPC steering committee in October. The RAND Corporation presented on its study of how community partnerships impact disaster recovery. The Health Department also presented on the COPEWELL study, which aims to help identify crucial factors influencing community resilience and increasing social cohesion in NYC neighborhoods. A summary of this work is included on page 3 of this newsletter. Enjoy.



October Steering Committee Host



Founded: 1977

Mission: To promote healing, better health and well-being to the fullest extent possible.

Services: Adult Day Health Care for Persons Living with HIV/AIDS, Community Case Management, an Empowerment Center inclusive of job readiness, life skills and wellness programs, Adult Protective Services in support of physically and/or mentally impaired adults and an Assisted Living Program.

Highlights: VillageCare offers a wide range of at-home and community-based services that seek to match each individual's needs, and to help him or her attain and maintain the greatest level of independent living possible.

Website:

www.villagecare.org

Resilience in Action

Immigrant Workgroup Dedicated to Community Disaster Resilience

Author: Barry Commoner Center for Health and the Environment, Queens College, CUNY

In the aftermath of Hurricane Sandy, New York/New Jersey community-based organizations (CBOs) serving immigrant workers developed the capacity and infrastructure to provide training, conduct hazard assessments and distribute personal protective equipment to immigrant workers involved in Sandy clean up and reconstruction work. This unprecedented and substantial investment in community capacity building occurred through separate but complementary projects funded by philanthropic organizations, the Centers for Disease Control and Prevention – The National Institute for Occupational Safety and Health (CDC/NIOSH) and the National Institute of Environmental Health Sciences (NIEHS), through the collaboration of Queens College (QC), the United Steelworkers Union (USW) and numerous CBOs that represent immigrant workers.

Through NIEHS funding, the USW, Make the Road New (MRNY) and 10 worker centers affiliated with the National Day Laborer Organizing Network (NDLON) trained and certified 40 Spanish language worker-trainers who have subsequently delivered the OSHA 10-hour construction training program in all five boroughs of NYC as well as in New Jersey, reaching close to 6,000 Latino day laborers. A CDC/NIOSH grant to MRNY and QC was used to evaluate safety and health training programs for Latino construction workers doing cleanup and reconstruction. Between March and August 2013, 442 workers received Spanish language hazard awareness training and a comprehensive set of personal protective equipment (PPE). A follow-up phone survey demonstrated the intervention's effectiveness; workers used the majority of the PPE at least 60% of the time and reported taking action by talking to their bosses and coworkers about health and safety and refusing dangerous work. These findings were corroborated through focus groups where workers discussed how the intervention enabled them to feel knowledgeable and confident despite dangerous and unpredictable working conditions. The project also developed a mobile application to facilitate workplace assessments that allowed individual workers to capture hazards and exposures through an electronic checklist and photo documentation.

As these Sandy research and training projects developed and shared information, a diverse coordinating group emerged – the Immigrant Worker Disaster Resiliency Workgroup – representing thousands of immigrant workers as well as QC and the USW, dedicated to building partnerships with each other and with disaster relief and preparedness structures. To our knowledge, this is the first working group of CBOs representing immigrants dedicated to community disaster resilience. Continued coordination and expansion of these initiatives provides a unique opportunity to demonstrate how this investment in community capacity building can be leveraged to establish sustainable partnerships with governmental and nongovernmental disaster preparedness agencies and thereby enhance overall community disaster resilience.



Resilience in Action

Promoting Community Resilience after Sandy: A Model-Based Approach

Authors: Marc Jean, MPH; Sarah Sisco, MPH, MSSW; Jaime Gutierrez, MPH

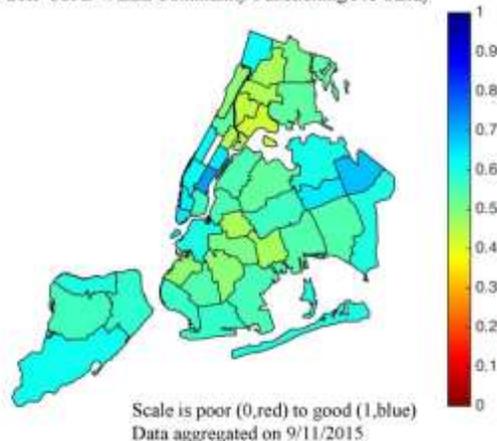
**This joint research project was supported by funding from the HHS Office of the Assistant Secretary for Preparedness and Response.*

Hurricane Sandy highlighted the importance of community resilience, defined by the U.S. Department of Health and Human Services (HHS) as a community's ability to strengthen public health and healthcare systems to improve community health to withstand, adapt to and recover from adversity. As part of the Centers for Disease Control and Prevention's Public Health Emergency Preparedness Program, the Health Department was charged with increasing community resilience across New York City.

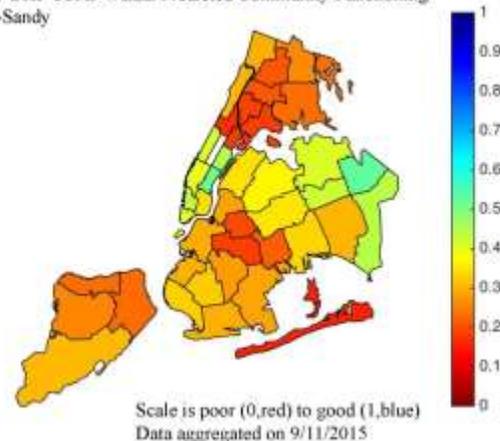
"Promoting Community Resilience in New York City after Sandy: A Model-based Approach" is a collaborative research project with the University of Delaware Disaster Research Center (UD-DRC), Johns Hopkins University Center for Public Health Preparedness (JHU-CPHP), the New York City Health Department and community partners. Together, we worked to identify what makes a community resilient and incorporated these factors into a NYC-specific computer model, called the Composite of Post-Event Well-being (COPE-WELL). We hope to use this model to predict areas of functioning after an emergency, as well as to inform where pre-event programs and interventions should be built before the next emergency happens.

The COPE-WELL model uses theory and various community factors to predict a community's loss of functioning and the time it takes to recover after an event. Since 2013, we have gathered and analyzed a wide array of data sources like geography/ecosystems, education level, poverty, evacuation zones and social connectedness. More than 65 data sources were selected to provide us a snapshot of actual community functioning pre-Sandy and predicted functioning post-Sandy (*see maps below*).

NYC UHF CoPE-WELL Community Functioning Pre-Sandy



NYC UHF CoPE-WELL Predicted Community Functioning Post-Sandy



COPE-WELL NYC will help policymakers decide how to allocate resources to make communities more resilient and will inform community engagement in public health and emergency preparedness.

A community dissemination plan was developed to engage community members on the COPE-WELL project and to discuss how communities can partner with the Health Department to use this system. The plan targets all NYC boroughs with special focus on areas with existing Health Department partnerships, Sandy-impacted areas and Health Department District Public Health Office (DPHO) neighborhoods. In this phase of the project, the Health Department will design candidate interventions to promote social cohesion, one of which includes a neighbors-helping-neighbors model in the Bronx and a mental health public education program for immigrant communities on Staten Island.

To learn more, please contact Marc Jean at mjean7@health.nyc.gov.

TRAININGS AND EVENTS

Please share this information with your staff and community as appropriate.

January–February 2016 (times vary)

[Take Care New York 2020 \(TCNY 2020\) Community Consultations](#)

Take Care New York 2020 (TCNY 2020) is the City's blueprint for giving everyone the chance to live a healthier life. TCNY 2020 marks the start of a conversation with everyday New Yorkers about their community health goals and the health improvements they would like to see by year 2020. Encourage your clients/community members to join us this fall and winter in dozens of neighborhoods across the five boroughs, as Health Department leaders meet with communities to talk about TCNY 2020 and to hear from residents directly on their neighborhood's top health priorities. These sessions are vital to the next phase of TCNY 2020, which includes a community action planning process. [Click here to learn more.](#)

January–March 2016 (times vary)

[Emergency Management for Primary Care Centers](#)

This training will teach primary care centers how to define key terms used in emergency management and the phases of the Emergency Management Cycle, describe the primary care center's role and responsibilities in emergencies and disasters, describe staff and leadership roles in the primary care center's emergency management program, and discuss the components of an Emergency Management Program and an Emergency Management Plan. [Register here](#)

January 12–February 23 (times vary)

[ICS Webinar Series](#)

The NYS Regional Training Centers are hosting an ICS Webinar series for healthcare staff that could use a refresher in ICS and/or need to complete FEMA ICS courses. [Click here for more information.](#)

February 9 and 10, 2016 (8:30 a.m.–5:30 p.m.)

[Virtual Tabletop Series—Cyber Risk](#)

This VTTX is designed for organizations interested in raising awareness of cyber risk management, cyber related planning, and other issues related to cyber incident prevention, protection, and response. The scenario will focus on increasingly complex and severe cyber threats, beginning with general information on a potential security risk and culminating with the containment, eradication, and recovery from a cyber incident. The complexity of this exercise will largely depend on your organization's choice of recommended discussion questions (beginner, intermediate, advanced), based on your audience and general level of cybersecurity preparedness experience. [Click here to learn more.](#)

February 4, 2016 (12:30 p.m.–4:30 p.m.)

[The ABCs of Environmental Home Health Hazards Training](#)

The Health Department, the Poison Control Center and the FDNY are conducting this free four-hour interactive training to professionals working with children and families in the Bronx. The training will cover Lead Poisoning Prevention, Consumer Product Safety, Facts about Mold, How to Control Pests Safely, Poison Prevention/Medicine Safety, Fire Safety and the Health Department's Environmental Data Portal. To register please email healthyhomes@health.nyc.gov

February 4, 2016 (3:00p.m.–4:00 p.m.)

[Preparing Youth: A Community Discussion on Individuals Disproportionately Impacted by Disasters](#)

Join the FEMA Individual and Community Preparedness Division for a webinar focused on engaging the public on disaster preparedness and resilience efforts serving youth. [Register here](#)

February 24, 2016 (9:00a.m.–4:00p.m.)

[Operation Volunteer Placement](#)

Operation Volunteer Placement allows agencies and organization tasked with coordination of spontaneous volunteers during a disaster to exercise their plan in a web-based simulation. [Click here for more information.](#)

February 24, 2016 (2 p.m.–5 p.m.)

[Elder Abuse Training Institute](#)

JASA's Elder Abuse Training Institute is an interdisciplinary program for professionals and community gatekeepers that improves understanding of and response to the various forms of elder abuse. The Institute educates social service, health, legal and financial professionals, as well as concerned citizens. [Register here](#)

IN THE NEWS

[Health Department Releases Community Health Profiles](#)

On November 20, the Health Department completed the most comprehensive set of Community Health Profiles ever produced. The health profiles detail the health of all NYC neighborhoods by community district. Every profile begins with a "Who We Are" section, which outlines the population in that district with a breakdown by ethnicity and age. Further, it includes the percentage of those who reported their own health according to categories ranging from poor to excellent. It also includes the life expectancy of residents in that district. Each profile is then broken down into five data sections: neighborhood conditions, social and economic conditions, healthy living, health care, and health outcomes. For reference, each data point is compared to the best performing community district, the borough and New York City. These Community Health Profiles, updated and expanded versions of profiles first released in 2003 and then updated in 2006, provide comparative information on major health issues including HIV, smoking and health insurance, and serve as a critical resource for improving health community by community. To create a broader picture of neighborhood wellbeing, the Health Department added non-traditional health indicators to the profiles, such as housing quality and retail environment. Poorly maintained housing is associated with negative health outcomes, including asthma and other respiratory illnesses, injuries and poor mental health; fewer supermarkets reduces access to healthy food choice options. Overall, while the profiles reveal that many neighborhoods are in very good health, there are significant health inequities that persist among many New York City neighborhoods.

[Health Department Launches Take Care New York 2020](#)

On October 29, the Health Department launched Take Care New York 2020, the City's comprehensive blueprint to give all New Yorkers a chance to live a healthier life. Take Care New York (TCNY) 2020 identifies key areas for health improvement and advancing health equity across the City. The Health Department's aim is twofold: to improve the health of all New York City communities, and to promote even greater strides in groups that today have the worst health outcomes. Many of the indicators included in the document have both a citywide target and an equity focus. The latter pays special attention to narrowing the gap between the groups with the best health outcomes in comparison to the citywide averages. Additionally, the effort will involve unprecedented community engagement: neighborhood residents will be able to vote on which indicators they think should receive the greatest focus. Unlike previous iterations, TCNY 2020 includes indicators on social and environmental factors that affect health, such as education, housing and violence. This broader focus recognizes that such factors often are more important drivers of health outcomes than individual behaviors. The goal is to create a broader picture of neighborhood wellbeing.

[New York City is the First U.S. City to Require Chain Restaurants to Post Sodium Warnings](#)

On December 1, the Health Department started requiring food service establishments in New York City that are part of a chains with 15 or more locations nationwide to post icons next to menu items with 2,300 milligrams or more of sodium—the total recommended daily limit. This requirement includes combo items, such as an order-by-number meal that might include a soup and a sandwich or a burger and french fries. The rule also requires chain food service establishments to post a warning statement where customers place their orders. The statement explains that items with the icon have more than the recommended daily limit of sodium and that high sodium intake can increase blood pressure and risk of heart disease and stroke.



ANNOUNCEMENTS



The Health Department released a report that highlights its role in protecting people and supporting communities during emergencies.

The report is a collection of stories about events where the Health Department's planning and response prevented illness, ensured well-being and saved lives. Events include Hurricane Sandy and the diagnosis and care of an Ebola case.

The report also details how federal preparedness funds provide critical protection of New Yorkers.

[Click here to learn more.](#)



City Health Information

Volume 34 (2015)

The New York City Department of Health and Mental Hygiene

No. 6: 46-53

PREVENTING FALLS IN OLDER ADULTS

The Health Department released updated [guidance for health care providers](#) on how to prevent falls among older adults. Adults 65 years and older are the fastest growing population group in New York City, and each year approximately one in three experiences a fall.

The consequences of a fall in this age group can erode quality of life, limit independence and even hasten death. Fortunately, many falls are preventable. The new guidance describes how to assess older adults for risk of falling and what providers can do to prevent falls. For example, providers should perform a falls risk assessment every year and recommend, among other things:

- Regular physical activity to improve strength, balance and flexibility
- Correction of home hazards
- Medication adjustments to reduce fall risk

For more information, visit nyc.gov/health/preventfalls.

If you would like a presentation on falls prevention for staff in your organization, please contact fallsprevention@health.nyc.gov.

Journal Articles

[Youth Resilience Corps: An Innovative Model to Engage Youth in Building Disaster Resilience](#)

Authors: Joie Acosta, PhD; Vivian Towe, PhD; Anita Chandra, DrPH; Ramya Chari, PhD

Despite the growing awareness that youth are not passive victims of disaster but can contribute to a community's disaster resilience, there have been limited efforts to formally engage youth in strengthening community resilience. The purpose of this brief report was to describe the development of a Youth Resilience Corps, or YRC (i.e. a set of tools to engage young people in youth-led community resilience activities) and the findings from a small-scale pilot test. The YRC was developed with input from a range of government and nongovernmental stakeholders. We conducted a pilot test with youth in Washington, DC, during summer 2014. Semi structured focus groups with staff and youth surveys were used to obtain feedback on the YRC tools and to assess what participants learned. Focus groups and youth surveys suggested that the youth understood resilience concepts and that most youth enjoyed and learned from the components.

Source: Acosta, Joie, et al. "Youth Resilience Corps: an innovative model to engage youth in building disaster resilience." *Disaster medicine and public health preparedness* (2015): 1-4.

[Social Capital and Community Resilience](#)

Authors: Daniel P. Aldrich and Michelle A. Meyer

Despite the ubiquity of disaster and the increasing toll in human lives and financial costs, much research and policy remain focused on physical infrastructure-centered approaches to such events. Governmental organizations such as the Department of Homeland Security, the Federal Emergency Management Agency, the U.S. Agency for International Development and United Kingdom's Department for International Development continue to spend heavily on hardening levees, raising existing homes and repairing damaged facilities despite evidence that social, not physical, infrastructure drives resilience. This article highlights the critical role of social capital and networks in disaster survival and recovery and lays out recent literature and evidence on the topic. We look at definitions of social capital, measurement and proxies, types of social capital and mechanisms and application. The article concludes with concrete policy recommendations for disaster managers, government decision makers and nongovernmental organizations for increasing resilience to catastrophe through strengthening social infrastructure at the community level.

Source: Aldrich, Daniel P., et al. "Social Capital and Community Resilience." *American Behavioral Scientist* (2014): 254-269.



[Zika Virus](#)

The CDC has issued a Health Advisory on Zika Virus infections for returning travelers from Central America, South America, the Caribbean, and Mexico.

Zika is a virus spread to people through bites of infected mosquitoes. The most common symptoms are fever, rash, joint pain, and conjunctivitis (red eyes). The illness may be mistaken for dengue virus or chikungunya virus, two other mosquito-borne diseases.

Outbreaks of Zika have occurred in areas of Africa, Southeast Asia, the Pacific Islands, and several countries in Latin America and the Caribbean. New Yorkers who travel to affected areas are potentially at risk. Protect yourself and others from this disease by taking steps to prevent mosquito bites: 1) use insect repellent containing DEET, 2) wear protective clothing 3) stay in places with air conditioning or that use window and door screens, 4) use bed nets, 5) eliminate standing water.

[Stay Connected](#)

- Please disseminate this newsletter widely with stakeholders
- Send your events/activities to: communityresilience@health.nyc.gov

