Healthy, Resilient, and Sustainable Communities After Disasters
Strategies, Opportunities, and Planning for Recovery

In the devastation that follows a major disaster, there is a need for multiple sectors to unite and devote new resources to support the rebuilding of infrastructure, the provision of health and social services, the restoration of care delivery systems, and other critical recovery needs. In some cases, billions of dollars from public, private and charitable sources are invested to help communities recover. National rhetoric often characterizes these efforts as a “return to normal.” But for many American communities, pre-disaster conditions are far from optimal. Large segments of the U.S. population suffer from preventable health problems, experience inequitable access to services, and rely on overburdened health systems. A return to pre-event conditions in such cases may be short-sighted given the high costs—both economic and social—of poor health. Instead, it is important to understand that the disaster recovery process offers a series of unique and valuable opportunities to improve on the status quo. Capitalizing on these opportunities can advance the long-term health, resilience, and sustainability of communities—thereby better preparing them for future challenges.

With support from the Office of the Assistant Secretary for Preparedness and Response (U.S. Department of Health and Human Services), the Office of Lead Hazard Control and Healthy Homes (U.S. Department of Housing and Urban Development), the Veterans Health Administration (U.S. Department of Veterans Affairs), and the Robert Wood Johnson Foundation, the Institute of Medicine (IOM) convened an expert committee to develop an approach to disaster recovery that mitigates disaster impacts on health and promotes healthy communities. The committee’s report, Healthy, Resilient, and Sustainable Communities After Disasters: Strategies, Opportunities, and Planning for Recovery, provides a conceptual framework for the integration of health considerations into recovery planning, as well as operational guidance for multiple sectors involved in community planning and disaster recovery.
The Need for Multisectoral Collaboration

The committee’s recommendations are directed at two broad groups of organizations and individuals—those that plan for and carry out disaster recovery and those that plan for and build healthy communities. Within these groups are the following key constituents:

- State, local, tribal, and territorial elected and public officials (e.g., governors, mayors, city managers and council members, emergency managers, and disaster recovery coordinators)
- State, local, tribal, and territorial public health professionals
- Urban planning, housing, transportation, and public works professionals
- Federal agencies
- Health care delivery professionals and organizations
- Social services professionals
- Community and nongovernmental organizations, including faith-based organizations
- Schools and educational administrators
- Private-sector stakeholders
- Empowered community members

According to the committee, these groups too often work in isolation. It is essential to increase communication and collaboration so that recovery efforts support long-term community health and resources can be leveraged across sectors.

A Framework for Integrating Health Into Disaster Recovery

Disaster recovery is a process of strategic planning similar to that which occurs in communities every day—except that after a disaster, planning processes that might otherwise have taken decades are compressed into a very short period of time. Therefore, it is important to begin the process of recovery planning before a disaster, not only to facilitate a more efficient recovery process, but also to ensure that advancing community health is a fully integrated strategic priority.

The committee offers a four-step framework for integrating health into recovery planning.

1. **Visioning:** Recognize recovery as an opportunity to advance a shared vision of a healthier, more resilient, and sustainable community.
2. **Assessment:** Conduct community health and hazard vulnerability assessments to identify gaps between the current status and the desired state, and use the data gathered to inform goals, priorities, and strategies.
3. **Planning:** Incorporate health considerations into recovery planning across all sectors by integrating planning activities and ensuring that decision makers understand potential health impacts of decisions.
4. **Implementation:** Use recovery resources in creative and synergistic ways so that actions of all sectors maximize community health outcomes. Establish a learning process so that health impacts of recovery activities are continuously evaluated and used to inform iterative decision making.

A Shared Healthy Community Vision

Developing a shared healthy, resilient, and sustainable community vision, reflected in the first step in the committee’s framework, is an important foundation for cross-sector collaboration and the strategic prioritization of health. The committee defines a “healthy community” as one in which a diverse group of stakeholders collaborate to create a community that is safe, economically secure, and environmentally sound, and where all residents have equitable access to high-quality education and employment opportunities, transportation and housing, prevention and health care services, and physical activity opportunities. This definition acknowledges that the circumstances in which people are born, grow up, live, work, and age, as well as the systems that respond to injury and illness, have a significant influence on human health. Health, equity, resilience, and sustainability are the key values underpinning a shared healthy community vision. Although not synonymous, these values
are interdependent and mutually reinforcing. For example, a community initiative to reduce inequities among residents will have a corresponding positive effect on population health. A healthier population, in turn, increases a community’s resilience. The development of a shared healthy community vision is essential to both community planning and disaster recovery planning. Ideally, this shared vision should be developed before a disaster, so that clear goals are in place to guide post-disaster decision making.

A Health in All Policies (HiAP) Approach

A HiAP approach to recovery planning complements a shared healthy community vision by systematically taking into account the health implications of policy decisions with the goal of improving population health and health equity. According to the committee, there is an urgent need for a HiAP approach in the aftermath of a disaster. Historically, the health and medical sectors—like many others involved in disaster recovery—have tended to operate in isolation, rather than as a coordinated, multidisciplinary group. But the health sector acting alone cannot adequately address the complex array of social and environmental factors that influence health, especially after a disaster. A HiAP approach can enable coordination of efforts, create synergies, and ensure that short- and long-term health threats and opportunities are better incorporated into recovery decision making.

HiAP is compatible with the “whole community” approach to integrated disaster recovery adopted by the Federal Emergency Management Agency, in which government and nonprofit and private sectors work together as partners. The success of either approach will depend on (1) the development of organizational and governance structures that create efficient and informed networks for decision making and (2) a robust engagement process that urges the participation of all community stakeholders, including residents. Effective implementation also will require investment in information-sharing policies and infrastructure. Finally, the committee identifies a need for funding guidelines that allow and encourage strategies that address multiple priorities by maximizing the health benefits of resources applied by non-health sectors in the course of achieving sector-specific goals.

Sector-Specific Strategies

The committee offers operational guidance for specific sectors in the context of an integrated multisectoral recovery strategy. In particular, the committee focuses on

- Health and human services strategies to support human recovery, or the process by which the physical and psychological health and social functioning of a community are restored (including the health care, public health, behavioral health, and social services sectors); and
- Place-based recovery strategies that promote and protect health through alteration of interconnected physical and social environments (including the urban planning, transportation, environmental management, community development, and housing sectors).

Health and human services activities can improve post-disaster health outcomes by supporting the
public health, medical, behavioral, and social needs of disaster survivors, and by collecting, assessing, and disseminating health information to inform decision making during recovery. Place-based recovery strategies, which focus on restoring the physical infrastructure of a community, can mitigate against future hazards by rebuilding in a way that supports health, equity, resilience, and sustainability (for example, through healthier housing and community features that enhance active lifestyles and ensure equitable access to goods, services, and amenities). Place-based strategies can also enhance the economic vitality of a community by creating opportunities for commercial revitalization and industrial and business development.

Conclusion

*Healthy, Resilient, and Sustainable Communities After Disasters* calls for actions at multiple levels to facilitate recovery strategies that optimize community health. With a shared healthy community vision, strategic planning that prioritizes health, and coordinated implementation, disaster recovery can result in communities that are healthier, more livable places for current and future generations to grow and thrive—communities that are better prepared for future adversities.