STRENGTHENING COMMUNITY RESILIENCE TO ELIMINATE HEALTH DISPARITIES

THRIVE: Tool for Health and Resilience In Vulnerable Environments

Under contract with the Office of Minority Health, U.S. Department of Health and Human Services, Prevention Institute is developing a community resilience assessment tool called THRIVE (Tool for Health and Resilience in Vulnerable Environments). The tool will assess community factors that promote the elimination of health disparities along the Healthy People 2010 Leading Health Indicators.

Advancing a Community Resilience Approach to Improve Health Outcomes

Poor health and safety outcomes, including chronic disease, traffic-related injuries, mental illness, substance abuse, teen pregnancy, and violence are disproportionately high among low-income people and people of color in the United States. In addition, the impact of racism and oppression increases numerous risk factors for illness and injury, including reduced access to fresh nutritious foods, fewer opportunities for physical activity, greater exposure to environmental toxins, and substandard housing and neighborhood conditions.

With an increased recognition of health disparities, there has been an emphasis on treatment and intervention. There is also a need to prevent health disparities before the onset of injury, illness, or death. Focusing on underlying risk and resilience factors can save lives and money and reduce suffering. Resilience, defined here as the ability to thrive despite the presence of risk factors, merits attention in order to achieve health and safety outcomes. Studies show that resilience factors can counteract the negative impact of risk factors and that effective approaches need to include attention to both. Given the preponderance of attention to risk factors, this project will highlight resilience factors that support health and safety outcomes.

Resilience approaches have tended to focus on individual measures; attention to community-level factors is also important. For example, the building blocks of healthy communities include marketing and availability of healthy foods as opposed to fast food and tobacco, safe parks, effective education, health and social services, community gathering places, and locally owned businesses. Research confirms the relationship between such factors and health and safety outcomes. For instance, social cohesion corresponds with significant increases in physical and mental health, academic achievement, and local economic development, as well as lower rates of homicide, suicide, and alcohol and drug abuse. Other examples of community resilience factors include environments that promote walking, bicycling, and other forms of incidental or recreational activity, jobs, a willingness to take action for the common good, positive intergroup relations, and positive behavioral norms. By strengthening such factors, communities have the opportunity to enhance health and safety.

THRIVE Methodology

THRIVE will assess community-level resilience factors that, when fostered, can aid in the reduction of health disparities. The tool, which is informed by research, a scan of existing efforts, and an expert panel, is expected to have utility for neighborhoods, coalitions, cities, and counties. In addition, to use for evaluating community-level factors, the tool can also be used to plan community actions. As diversity increases in the U.S., this tool will enable communities to be proactive in their health promotion efforts.

The research process consisted of a scan of peer-reviewed literature and relevant reports and interviews with practitioners and academics as well as an internal analysis that included brainstorming, clustering of concepts and information, and a search for supporting evidence as the analysis progressed. The literature scan began with Healthy People 2010 Leading Health Indicators and searched for subsequent information that linked the health

* Materials are currently in draft form and subject to change with input from the expert panel and informed by the pilot process.
indicators with social, behavioral, and environmental elements. The findings of this process were presented to the project's expert panel for refinement and endorsement and will be incorporated into the pilot tool.

Generally speaking, the tool will include factors that represent:

- the built environment (including man-made physical components such as buildings and streets, land use, public transportation, and the style and permitted uses of businesses and residences)
- the social environment (such as connections between people and behavior norms)
- services and institutions (including availability of and access to high quality, culturally competent, appropriately coordinated public and private services and institutions)
- macro factors (such as economic indicators)

Once THRIVE is developed, Prevention Institute will facilitate pilot tests in two urban and one rural community -- East Harlem in New York City, Del Paso Heights in Sacramento, California, and Hidalgo County, New Mexico. Based on the pilot tests, the Institute will revise the tool and develop a set of preliminary guidelines to enhance community resilience. THRIVE will be finalized by September 2004.

**Funding**

This project is made possible by funding from the Office of Minority Health, U.S. Department of Health and Human Services.

**About Prevention Institute**

Prevention Institute is a nonprofit, national center dedicated to improving community health and well-being by building momentum for effective primary prevention. Primary prevention means taking action to build resilience and to prevent problems before they occur. The Institute's work is characterized by a strong commitment to community participation and promotion of equitable health outcomes among all social and economic groups. Since its founding in 1997, the organization has focused on injury and violence prevention, traffic safety, health disparities, nutrition and physical activity, and youth development.

**For More Information**

Please contact Prevention Institute: Rachel Davis, Project Director; or Danice Cook, Project Assistant
THRIVE Expert Panel

Anna Caballero  
Mayor, City of Salinas  
Executive Director,  
Cultivating Peace  
Salinas, CA

Judy Corbett  
Executive Director  
Local Government Commission  
Sacramento, CA

Kitty Hsu Dana  
American Friends Service Committee  
Associate General Secretary for  
Advancement  
Representing: American Public Health Association  
Washington, DC

Richard L. Dana  
Executive Director  
Mutual Assistance Network of Del Paso Heights  
Sacramento, CA

Wayne Giles  
Associate Director for Science  
Division of Adult and Community Health  
National Center for Chronic Disease Prevention and Health Promotion  
Centers for Disease Control and Prevention  
Atlanta, GA

Roger Hayes, MA  
Director  
East Harlem Neighborhood Initiative  
New York City Department of Health & Mental Hygiene  
New York, NY

Bryna Helfer  
Transportation Services Advisor  
Federal Transit Administration  
Washington, DC

Donna L. Higgins, M.S., Ph.D.  
Centers for Disease Control and Prevention/  
Seattle Partners for Healthy Communities  
Public Health - Seattle & King County - EPE  
Seattle, WA

Mareasa Isaacs, Ph.D.  
Senior Associate  
The Annie E. Casey Foundation  
Baltimore, MD

David E. Jacobs, Ph.D., CIH  
Director  
Office of Healthy Homes and Lead Hazard Control  
U.S. Department of Housing and Urban Development  
Washington, DC

Katherine Kraft, Ph.D.  
Senior Program Officer  
The Robert Wood Johnson Foundation  
Princeton, NJ

Vincent Lafronza, Ed.D., M.S.  
Senior Advisor Public Health Practice  
National Association of County and City Health Officials  
Washington, DC

James Marrufo  
Grants Manager  
Hidalgo Medical Services  
Lordsburg, New Mexico

Barbara McMillen  
Disability Policy Analyst  
Federal Highway Administration  
Washington, DC

Xavier Morales, Ph.D.  
Assistant Director  
Arizona Prevention Resource Center  
Phoenix, AZ

Howard Pinderhughes, Ph.D.  
Assistant Professor  
University of California San Francisco Department of Social & Behavioral Sciences  
San Francisco, CA

Karen Pittman  
Executive Director  
The Forum for Youth Investment  
Washington, DC

Robert D. Putnam, Ph.D.  
Professor of Public Policy  
Harvard University  
Cambridge, MA

William J. Sabol, Ph.D.  
Associate Director  
Center on Urban Poverty and Social Change  
Mandel School of Applied Social Sciences  
Case Western Reserve University  
Cleveland, OH

Marion Standish  
Senior Program Associate  
The California Endowment  
San Francisco, CA


6 Buka S. Results from the project on human development in Chicago neighborhoods. Presented at: 13th Annual California Conference on Childhood Injury Control; October 25-27, 1999; San Diego, CA.