# THE CONCEPT OF COMMUNITY IN COMMUNITY CAPABILITY AND DISASTER MANAGEMENT

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#### Abstract

In this paper we start with the assumptions that disaster management agencies need to take more account of what exactly is meant by community and of local community assessment of risks and local priorities if agency programmes are to effectively engage with the community. Second, that prevention, preparedness and training programmes may all benefit from assessing and incorporating local assessment of risks and their appropriate remediation strategies. In our research for Emergency Management Australia we moved from these assumptions to the belief that broadly based community capacity building programmes often have derivative benefits for effective disaster management at the local community level. This in turn suggests that disaster management agencies need to adopt a more strategic approach to engaging and working with communities.

### INTRODUCTION

This paper reports on research we have conducted over a period of 4 years examining community-based responses to disaster and in particular examining community assessment of risk and vulnerability (Buckle et al (1). The latest research conducted from June 2002 to June 2003 focussed on rural, urban and rural/urban interface areas in Victoria, Australia and two small towns and one London Borough in England, though account has been taken of other parts of both countries (Buckle et al (2003 c).

Over the four years we examined first local assessment of risk and vulnerability, second the drivers of vulnerability assessment at local and municipal level and latterly how community capacity building can support, and in turn be supported by, effective disaster management planning.

Our initial investigations sought to explore the linkages between agency and local community appreciation of risk and vulnerability. What we found initially surprised us, though in retrospect the conclusion seems almost obvious. Agencies focussed on threats from hazards for which they had a mandate to deal with, in mitigation, response or recovery. In particular, agencies placed emphasis (often inappropriate emphasis given an objective assessment of the risk) on natural hazards such as wildfires, floods and storms.

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Local people, however, had a much broader appreciation of risk and vulnerability. As part of our research method we used a series of personal interviews, group interviews and focus groups and it was noticeable that whereas we (and this acknowledges our own initial preconceptions) started with a defined though covert definition of hazard agent (again, the traditionally accepted major natural hazards) local people always and very quickly drew us back to a broader range of hazards. These hazards included broader social, environmental and economic processes such as population decline, a diminishing and contracting economic base to the community, loss of young people, unemployment, and illiteracy as issues that posed what was perceived to be a significant threat. The traditional natural hazards were not ignored or devalued but were put into a hierarchy of risks confronting the community.

This indicated a different awareness of the totality of risks facing the community and therefore of the overall, collective vulnerability. It also indicated a lack of correspondence between official or agency assessment of risk and vulnerability and local community assessment.

This is significant because it indicates that risk awareness and risk reduction programmes implemented by agencies may not be accurately targeted at local priorities and may therefore fail in their efforts to engage local people whose "risk attention" was elsewhere. With this knowledge in mind we then moved towards the developing of a greater understanding of the community dynamics present prior to, during and following a disaster. We were anxious to know if community development policies and programs were actually building up more resilient and therefore less vulnerable 'communities', for want of a better term. As will be covered more fully later in this paper, we recognised from the outset that an authority's concept of 'community' was limited and that many residents were never consulted and nor did they want to be in some cases. It was in the 'interests' of the authorities to consult with a narrow band of interest groups.

What should be said from the outset then is that there are many residents currently or often excluded from the community development, or to use the latest terminology, Community Capacity Building (CCB) and the consultation processes, which are generally in place. We want to state in this paper that this does not mean that blame should be placed on individuals or any particular authority. Though officers did warn that too often it's those who speak the loudest or represent powerful vested interests who are more likely to receive the most attention while the less dominant people miss out. While groups and individuals may be excluded, this does not mean that they are lacking in Social Capital as trust was often to be seen to exist at quite high levels within various networks though the trust may not extend outwards to authorities or even to others in their localities. Some of these people were missed in the process others excluded themselves and apathy reigns supreme amongst many residents. What is obvious from the feedback from our respondents is that it is rarely useful to have a single vision or rigid plan when it comes to developing the capacity of residents to cope in any circumstance or in this research with a crisis/emergency.

It is also too easy to blame the non-participant for not becoming involved. However, there was a positive trend evident that authorities were endeavouring to build up a two-way communication process and to empower residents more through incorporating them in to the decision making processes.

What became obvious to us during this research was that capacity building was occurring across all of the regions and local authorities whether or not a formal CCB program was in place. Our aim was not to critically analyse Social Capital (SC) or CCB as such but to see how these concepts were being applied in the chosen localities and how effective was the implementation of CCB. What was obvious was that while these terms were understood they were often being practiced under other names such as community development; neighbourhood renewal; community or public health planning and the statement was often made that such things were already happening and there was no need for anything formal or "we know what informal and formal networks exist and we can tap in to them when needed." While this latter comment came from a council officer, one regional worker contradicted her and stated that they wanted "to build up capacity at a local level. It's been seen as a need for some time. Councils haven't given it much attention. It varies with the councils...Priority is to build up emergency response capabilities - to be pro-active." It follows then that it is essential if we are to have an understanding of capacity building/community development to first understand the actual concept of 'community'.

## THE CONCEPT OF COMMUNITY IN RELATION TO COMMUNITY BUILDING AND ENGAGEMENT AND SOCIAL CAPITAL.

During our initial discussions about the aims of the research we heard questions as to whether or not one should be using the term 'community' and also questions relating to the community building processes now underway in Victoria in particular but also in other States of Australia and overseas. The same questioning arose when we addressed the issues at conferences. "We need to find a better term" we were informed. We tended to agree as we preferred to use the term "communities of interest' rather than 'community' for reasons which we'll discuss here. The concept of Social Capital was also questioned and we have taken note of these criticisms but still see the areas of social capital related to trust between individuals and networks and with these and authorities as being worth studying. We realise that government emphasis on social capital may be a way of doing things on the cheap and avoiding their responsibilities, which is just one of the criticisms. We also realise that trust as one example of Social Capital is difficult to quantify. However, it is our belief that if resilience to disaster is to be present and at its optimum; if recovery is to occur successfully, then networks and trust need to be in place. It is also argued the Capacity Building is simply Community Development under another title and there is no doubt truth in this and many CCB programs are run by community development officers. In the end, whether 'capacity building' or 'development', the aims of such programs are to build up a more aware, supported, responsible, connected and trusting 'community'.

It is perhaps worthwhile at this stage to indicate a paradox. While much disaster management has a strongly hierarchical nature and many risk management options are based on technical approaches, the rural fires services, the Red Cross and state emergency services in Australia have a strong volunteer component. Similar agencies exist in the U.K. These volunteers are drawn from local communities and derive their professional ethos from values, which emphasise mutual support, local responsibility and self-reliance. Trust must also be present if these volunteers are to operate affectively.

Community then as a local geographic community in particular is said to only exist as a myth. However, myth or not, community exists in the rhetoric and 'mind' of the citizens, the governors and the NGOs. Whether precisely defined, these terms and concepts are behind local and regional programmes on which, much money, time and effort is being spent to achieve sustainable and more vibrant 'communities'. It is therefore in the interests of those of us involved in risk management and the study of vulnerability and resilience to work with those governments, agencies and other bodies who are developing community-building programs. This extends also to include the consultation and implementation processes of 'Best Value' as implemented for example within municipal and local boundaries in the United Kingdom (U.K.) and Victoria. Our hypothesis is that if one can build a trusting relationship with communities and develop the capacities of communities with the development of 'social capital' there could be the consequential building of trust between residents. From this, the result will be that residents would be more resilient and thus less vulnerable to a disaster. These issues are critical because trust, mutual relationships, networks, available resources, skills and knowledge are each vital elements of prepared and safe communities. The evidence and experience clearly show that communities with shared values and a shared vision, with appropriate skills and adequate knowledge and access to necessary resources including leadership, which exist along with a willingness to commit their resources to programs, are better able to manage preparedness activities, to reduce risks, to contribute to support activities and to manage recovery than communities who do not have these resources or a willingness to commit them if/when they do.

Linking this to our previous research for Emergency Management Australia, we can see that the existence and availability of skills, knowledge and expertise may allow local people to transcend day-to-day issues and to look across a wider risk landscape.

For this research it is important to understand the categories of engagement that frequently occur across localities and who the 'players' are at this level. (See Figure 1).

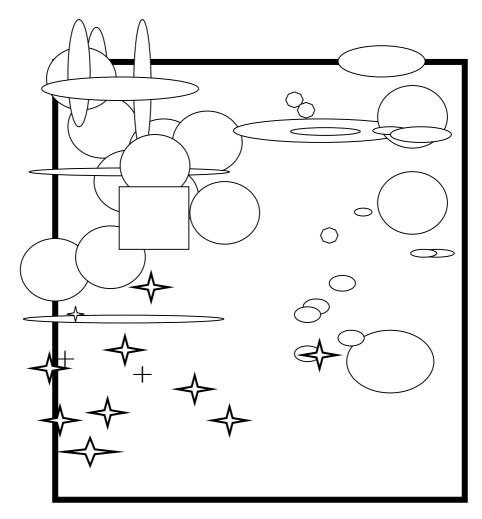


Figure 1

Community: This figure depicts in a simplified form some of the relationships that may exist within a community represented as a geographic area (such as a municipality). The rectangle is the geographic boundary. Circles represent groups of people, and overlaps indicate interests and often membership shared with other groups. These members of networks are the ones most likely to be involved in ongoing discussions with the authorities. Where circles (groups) extend beyond the rectangle this indicates that these groups share characteristics with groups from out side the geographic area. Narrow ovals indicate sectional and specific interests in the community. Stars are individuals or families who may have little or no contact with other groups in the community. Where the stars and circles or crosses overlap, for example with the very young and the frail aged who both require specialist health services contact is made. Crosses represent caring groups and professionals and pentagons represent newly arrived groups developing linkages in the community.

First, there is the involvement of the social, political and economic interest groups. These generally consist of members of, for example, government and community agencies, voluntary associations, NGOs, churches, political parties. They have leaders who are empowered and co-opted and consulted by the broader community. As members of these groups and the other networks they are kept informed and are often members of the decision-making bodies. They are often volunteers and as such are frequently members of more than one of the local organisations. In small communities few citizens are involved and in larger communities the proportion of people who constitute these elites is small. It is usually from these networks that local 'community safety' committees and other such bodies are drawn.

**Second**, and this would appear to be increasing, many citizens are less willing to commit themselves on a long term basis so they commit themselves to 'one off' events or to the 'short term'. These people are usually more passive participants and are only occasionally consulted. They vote and sign petitions and indicate some awareness of local and more widespread affairs. They will come out on NIMBY (not in my back yard) issues.

The **third** category contains the bulk of the population. They rarely participate, rarely are consulted and are apparently content with this inactive role. Disinterest reigns and there is little or no search for information or the reading of same when it is delivered to their door. With contact with their political representatives, the governors, there is little engagement though there is more contact with the service providers. However, this does not mean that in the event of an emergency these people will be inactive or that they will not have local networks on which to build. But, nor does it mean that they have the desire to band together with others who they may or may not 'get along' with or that they will have adequate knowledge along with the necessary skills which would bring empowerment to their situation.

At the **fourth** level there exist those who are probably the most vulnerable due to their circumstances. These people may be newly arrived non-English speaking immigrants. Others may have physical or psychological 'problems'; have limited decision making capacity; or be at a stage in their life cycle when any participation or in depth community engagement is impossible. For this latter category, there is no participation and 'carers' and others often speak on their behalf.

With community building then, there is a need for better and more informed data concerning the nature and culture of the communities of interest and of the individuals that reside within the geographical boundaries of the municipality if the governors are to reach beyond category one for more inclusiveness in the approaches adopted. The residents also need access to such information so that they are able to make informed decisions whilst having a greater understanding of their locality.

In Putnam's (Bowling Alone 2000) terms, bonding social capital should be encouraged in the field of community engagement but not to the exclusion of the 'non-bonded' citizens. Good governance should involve not only a top down approach but encompass bottom up and bottom across as well. Empowerment hopefully is the result and with that a more resilient 'community' able to deal with their risks and able to draw on their local resources, their social capital, in times of stress.

The research then followed through on these concepts and questions and covered community capacity building (CCB) processes that are being implemented by various governments. We were anxious to see if these processes made a local community more resilient and less vulnerable to a crisis/emergency. We compared a number of localities who had received funding for neighbourhood renewal and CCB programs and compared them with other localities where normal community development (CD) CCB programs were in place. The findings indicate what elements should be in place if such programs are to be successful. The findings also indicate that many residents are not included in the normal CD/CCB

### CAPACITY BUILDING CONCLUSIONS

Certain terms, policy directions and needs kept re-occurring throughout our interviews and observations if a community's capacity to cope generally and with a crisis in particular was to be developed and maintained. These have been elaborated on more in another paper and in our 2003 Report but the terms, policy directions and needs were in summary:

- the place of empowerment where it was not simply a 'Top down' nor even a 'bottom up' process but a partnership;
- Leadership and the need for building it up, particularly in the localities where there has been a decline in leadership and where this decline can be expected to continue with so many current and potential leaders moving out, ageing or dying;
- The need for a centre where residents, networks, leaders could meet and isolation or distrust and misunderstanding for example could be broken down. There was associated with this the need for inclusiveness along with a feeling of ownership by the particular interest groups and individuals, potentially or presently involved there:
- Trust, in the local and government authorities, particularly the local council; the need for high levels of trust within networks and across networks with a desire to restrict conflict where possible; and the need for trust between individual residents;
- Development and maintenance of networks with the realisation that many are isolated from other networks. There exists the need to understand who is

- presently excluded from existing networks and programs, why this is so and how can they be included in the future? It was mentioned on a number of occasions that CCB was not in place where it was most needed.
- The need to have in place effective communication processes that are two way along with the need to listen;

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