

# Resilience-building is transferable in communities after a disaster

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Emily Szklarski [newwave@tulane.edu](mailto:newwave@tulane.edu)

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*Flooded and gutted homes were a common sight in Baton Rouge in late 2016. Team members from Tulane University were part of a group that built the Resilient Baton Rouge toolkit for residents of that city. The team recently published a study about the Resilient Baton Rouge effort. (Photo by Carolyn Scofield)*

A team of community health researchers including individuals from Tulane University recently examined ways to address behavioral health needs after disasters. The resulting study, “Case Study of Resilient Baton Rouge: Applying Depression Collaborative Care and Community Planning to Disaster Recovery,” published in the June issue of [International Journal of Environmental and Public Health](#), illustrates how in the context of a disaster, community-involved planning can be combined with resiliency-oriented, mental health interventions that fit local culture.

Catherine Haywood, [Prevention Research Center](#) community engagement program manager and chair of the Louisiana Community Health Outreach Network, and [Ashley Wennerstrom](#), assistant professor of clinical medicine at the Tulane School of Medicine, were part of the team. Their work resulted in the development of the [Resilient Baton Rouge](#) (RBR) effort to support recovery in Baton Rouge after its 2016 flooding. RBR offers a [toolkit of manuals](#), forms and other resources to support community leaders, volunteers and others.

Both Haywood and Wennerstrom have worked to train community health workers in New Orleans — a continuation of their collaboration with many community partners examining healthcare delivery efforts after Hurricane Katrina.

“The goal here was to replicate some of the lessons over the last decade-plus for building mental health services.”

*Ashley Wennerstrom*

“The goal here was to replicate some of the lessons our team has learned ... over the last decade-plus for building mental health services delivery capacity in under-resourced communities,” said Wennerstrom. “Building trust [in recovering communities] is essential. That's why we wanted to prepare community members—trusted people that know folks and already understand outreach— with skills to address stigma around mental health and improve access to services.”

Training sessions with community members “were an opportunity to foster collaboration within and between agencies, which represents an important step in improving coordination between mental health care service providers,” Wennerstrom added.