

Promoting Community Resilience in Vermont

Assessment of Public Health Knowledge, Tools and Resources

Executive Summary

June 30, 2019

Background

There continues to be a need to advance Vermont public health promotion, and provide primary and secondary prevention strategies to improve the health of Vermont's individuals and communities. These strategies enable people to increase control over their own health, prevent the onset of mental health problems, and lead to early identification of problems and solutions.

Community and public health stakeholders in Vermont are interested in promoting resilience as an attribute in defining and measuring the health of individuals and communities. Vermont has made progress in advancing knowledge about Adverse Childhood Experiences (ACE) and trauma-informed approaches in human services. ACE describes a set of outcomes associated with adversity. Trauma-informed approaches aim to decrease the impact of trauma on child development and learn how to minimize its effects without causing additional trauma. It is timely to place emphasis and resources into public health workforce development, promoting the use of strengths-based frameworks for the workplace, including the four (4) resiliency frameworks Vermont has introduced, and strategies that build protective factors for dealing with adversity across community and individual lifespans.

The following terms and definitions served as common language:

Resilience: the ability to recover from setbacks, adapt well to change, and keep going in the face of adversity (SHIP 2018)

Resilience Frameworks: a set of ideas and practices that promote resiliency

Community Resilience: the ability of a community to use its assets to strengthen public health and healthcare systems and to improve the community's physical, behavioral, and social health to withstand, adapt to, and recover from adversity (PFE - US Department of Health & Human Services)

Assessment Overview

The Vermont Public Health Institute and the Vermont Department of Health identified the need for more information about the knowledge and experiences of the public health workforce related to primary and secondary prevention strategies that foster resiliency. With funding from New England Public Health Training Center, the VT Public Health Institute contracted with the Center for Health and Learning (CHL), a 501c3 providing support to state initiatives that address priority health issues. This project was under advisement from Vermont Department of Health.

CHL identified the resiliency frameworks used in Vermont, developed and conducted a statewide assessment of the public health workforce. The four (4) major resiliency frameworks used in Vermont: Building Flourishing Communities, Search Institute Developmental Assets, Strengthening Families, and Youth Thrive. More information on these frameworks is in the full report.

The target population for the assessment was public health workers in Vermont. The purpose of the assessment was to gather information about the current knowledge and skills of the public health workforce, and the resources they identify to build individual and community resilience, fulfilling the objectives of the VT State Health Improvement Plan (VT-SHIP). Survey respondents were representatives from the Central and District Offices at the Vermont Department of Health. The assessment included:

- The knowledge, attitudes, and skills needed to promote resiliency
- Identification of Vermont initiatives, and community and state resources, that support the work of community prevention and resilience-building
- Resiliency Frameworks

Results

A total of 71 responses were received. The majority (79%) of respondents indicated they believed it was important/very important to apply resiliency frameworks to their work. Of the 79% of respondents that stated they believed it was important/very important, almost 50% stated they were only slightly or not at all knowledgeable about how to connect resiliency strategies to their work. In addition, 62% stated they never/rarely/or only sometimes apply resiliency frameworks to their work. In other words, they understand the importance of the concepts and frameworks, but are not sure how to apply them to the work they do.

Conclusion and Recommendations

A bridge can be built between the recent efforts in Vermont to increase knowledge about Adverse Childhood Experiences (ACE) and trauma-informed approaches, with the promotion of resiliency based approaches in primary and secondary prevention.

The majority of respondents indicate they do not currently have the support to successfully apply resiliency frameworks to their work. An important next step is to prioritize the supports that can be offered to the workforce to engage in action planning both internally and externally with partners. The aim is to apply resiliency frameworks and concepts to their roles and responsibilities in public health planning, and in collaborations with other organizations who do direct client service.

Generally, the public health workforce surveyed is knowledgeable and anxious to connect resiliency frameworks and strategies, individualized to the role and settings in which they work. Recommendations include three (3) main areas of support: 1) Communication, Collaboration and Planning, 2) Workforce Training, 3) Technical Assistance.

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