Panel: Our resource experts

Dr. Melissa Finucane
GoMRI Consortium for Resilient Gulf Communities

Dr. Ayanna Buckner
Gulf Region Health Outreach Program

Dan Hahn,
Community Organizations Active in Disasters

Janel Lowman
Coastal Resource and Resiliency Center

Elizabeth Tatum,
US Coast Guard

gulfseagrant.org/oilspilloutreach
Coastal Resource and Resiliency Center
Program Overview

Janel A. Lowman, MHA
Training and Outreach Coordinator
Coastal Resource and Resiliency Center (CRRC)

• CRRC’s primary goal is to create more resilient communities by improving overall health outcomes, especially among disadvantage and underserved populations.

• To accomplish this goal, CRRC conducts lay health worker trainings in the coastal parishes and counties of Louisiana, Mississippi, Alabama, and the Florida Panhandle.
Community Health Worker (CHW) Training

CHW training is a 72-hour residential training that prepares the CHW to serve as a link between the community members and the health care system:

- Overview of Public Health and the U.S. health care delivery system
- Health resource identification and referral
- Case management and client records
- Broad determinants of health and emphasis on barriers to healthy living and access to health care
- Mental and behavioral health issues
- Peer Listening, as a practical approach to informal counseling
- Cultural competency and communication skills
- Community advocacy
- Environmental and occupational health issues
- Emergency Management with emphasis on preparedness, recovery and resiliency
- CPR and First Aid certification
Peer Health Advocate (PHA) Training

PHA training is a 20-hour residential training that targets active community volunteers:

- Promoting health literacy and encouraging healthy lifestyles
- Identifying and publicizing health-related resources
- Brief overview of Public Health
- Disaster preparedness
- Introduction to Peer Listening
- Caring for the caregiver (avoiding burnout)
- Bystander CPR
Advance Training in Chronic Disease Management (CDM)

CDM is a 36-hour residential training which includes an in-depth coverage of the following chronic diseases and conditions:

- Arthritis
- Asthma
- Cancer
- COPD
- Diabetes
- HIV/AIDS
- Heart Disease
- Hypertension
- Mental and Behavioral Health
- Oral Health and Chronic Disease
- Women’s Health and Chronic Disease
CRRC Trainees

• Number of Lay Health Workers trained since 2012:
  o Community Health Workers 90
  o Volunteer Peer Health Advocates 231

• Training sessions held since 2012:
  o Community Health Worker 4
  o Volunteer Peer Health Advocate 9
  o Advanced Training in Chronic Disease Management 5
Funding Sources for CRRC

• The Community Health Worker Training Project, funded by a grant from the Gulf Region Health Outreach Program (GRHOP).

• Volunteer Peer Health Advocate Training, funded by a grant from the Baton Rouge Area Foundation.

• Chronic Disease Management Training, funded by a grant from the Baton Rouge Area Foundation.

• The Consortium for Resilient Gulf Communities, funded by the Gulf of Mexico Research Initiative.
thank you!
Melissa Finucane, PhD
Consortium Director
September, 2016

www.resilientgulf.org
Build Community Resilience via Successive Layers of Outcomes-Impacts

**Evidence-based strategic planning and policy guidance (3-5 years)**
- Use of robust data and findings to inform decision-making
- Development of integrated resilience strategies
- Development of equitable policies

**Improve base of awareness, knowledge, & skills (1-2 years)**
- Increase awareness of health-social-economic interactions
- Increase knowledge about risks & vulnerabilities
- Improve skills in using disaster impacts and preparedness information and tools

**Change in situation (>5 years)**
- Resilient Gulf communities prepared for and able to recover from large oil spills
CRGC Functions that Support the Outcomes

- Engage in dialogs
- Educate, train
- Connect relevant stakeholder groups
- Identify problems/goals/response mechanisms
- Identify relevant resources
- Meet stakeholder needs
- Synthesis documents
- Data, models
- Papers, briefs, presentations
- Ideas, experience re. ways to implement resilience strategies
- Provide commentary
- Illustrate trade-offs
Building Community Resilience Needs Non-traditional Approach

• Disasters like DWH pose ‘wicked’ problems
  - No precedent to lean on for answers
  - Solution depends on how the problem is framed
  - Often solutions are not right or wrong, so we need to weigh different values

• Translating resilience science to action
  - Means making information and tools useable for specific contexts
  - Takes time – there is a steep learning curve
  - Requires adaptive governance
Example Year 1 Activities Show Integration Across Domains

- **Establish Key Contacts** with community and organizational leaders
- **Informal Discussions** with CBOs and community members/leaders
- **Connect CBOs** with CHWs who connect with communities
- **Train** CHWs on community resilience
- **Formal Interviews** with decision makers
- **Presentations** to IOM, NAS, Oil Spills Conference, TAC, SAC
- **Databases**
  - Literature, DM interviews, Collaboration perceptions
  - Literature Reviews on health impacts, resilience concept, community plans, web personalization
  - Develop Survey Instruments and Algorithms
  - Build CHW experience
- **Informal Discussions** with CBOs and community members/leaders
- **Formal Interviews** with decision makers
- **Assess resilience-related decisions and information needs**
- **Develop/maintain website**
- **Link to existing info**
- **Make Course Corrections** in CRGC research-outreach
- **Identify Limitations** of previous papers, plans

Domains:
- Health
- Social well-being
- Economics
Building Resilient Communities

Learning About Available Resources:
THE GULF REGION HEALTH OUTREACH PROGRAM

Ayanna V. Buckner, MD, MPH, FACPM
Chair, Gulf Region Health Outreach Program Coordinating Committee
Principal, Community Health Cooperative
Summary and Background Facts

• The Gulf Region Health Outreach Program (GRHOP) is a series of integrated, five-year projects to strengthen healthcare in certain Gulf Coast communities in Louisiana, Mississippi, Alabama, and the Florida Panhandle.

• The implementation of the GRHOP is coordinated by the GRHOP Coordinating Committee, consisting of representatives from each of the projects, as well as three independent members.
Summary and Background Facts:
Target Beneficiaries of the GRHOP

The target beneficiaries of the GRHOP are residents, especially the uninsured and medically underserved, of 17 coastal counties and parishes.

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<th>Florida</th>
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Summary and Background Facts: How is the program funded?

The GRHOP was developed jointly by BP and the Plaintiffs' Steering Committee as part of the Deepwater Horizon Medical Benefits Class Action Settlement, which was approved by the U.S. District Court in New Orleans on January 11, 2013 and became effective on February 12, 2014. The Outreach Program is supervised by the court and is funded with $105 million from the Medical Settlement.
# The GRHOP: Five Integrated Projects

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<th>Community Involvement</th>
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<td><strong>Primary Care Capacity Project</strong></td>
<td>Louisiana Public Health Institute</td>
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| **Mental and Behavioral Health Capacity Project** | Louisiana State University  
University of South Alabama  
University of Southern Mississippi  
University of West Florida |
| **Environmental Health Capacity and Literacy Project** | Tulane University  
Association of Occupational and Environmental Clinics |
| **Community Health Workers Training Project** | University of South Alabama |
Learn more about us

Visit the program website: http://www.grhop.org

Visit the GRHOP library: http://www.gulfregionhealthoutreach.com