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# Are we heading for disaster? The problem with resilience in disaster management and recovery

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Resilience is often construed as armour that protects individuals from stressors and harm, or a trait that allows people to ‘bounce back’ despite adversities and stressors. Although not fundamentally incorrect, these notions do not capture the true purpose, scope or power of resilience, particularly in the disaster context.

Despite its appeal, resilience is not without its criticisms and limitations and current applications of the concept of resilience in the emergency management sphere fail to adequately address these criticisms. Criticisms arise from the politicisation of resilience, ambiguity in definitions of resilience, its potential negative effects and the fundamental construct of resilience itself. Addressing limitations and criticisms of resilience requires reframing of the concept and its application, re-assessing the roles and accountability of resilience stakeholders and embedding an obligation to address exposed vulnerabilities.

## Problems with resilience

Resilience attracts significant criticism in disaster discourse, including ambiguity surrounding definitions across various paradigms.<sup>1</sup> One pertinent criticism emerges from the consequences of ‘inexhaustible’ resilience and the evolutionary importance of stress.<sup>2</sup> Stress and discomfort are fundamental drivers of human behaviour and evolution across social, physical, technological and emotional domains.<sup>2,3</sup> By eliminating stress, inexhaustible resilience leads to complacency and halts progress and recovery. Additionally, the development of resilience ‘domains’ can also be harmful with prioritisation of certain resilience domains over others.<sup>1</sup> This indicates that current resilience constructs can result in individuals being judged as not resilient enough, too resilient or not resilient in the right way.

Discussing resilience at the community level tends to result in ‘responsibilisation’ of individuals. ‘Responsibilisation’ is the process by which individuals are held disproportionately accountable for outcomes or conditions that they have limited or no power to control.<sup>4</sup> Shifting responsibility from the community to the individual significantly dilutes the accountability of community leaders. Restated, ‘responsibilisation’ demands that individuals ‘bounce back’ rather than charging community leaders with minimising or eliminating the risks and adversities experienced by individuals. The burden of ‘responsibilisation’ can also contribute to the emergence or worsening of mental illnesses<sup>5,4,6</sup> that exacerbate vulnerability rather than promoting community resilience.

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The concept of resilience raises expectations of ‘rebounding’ to the pre-disaster status.<sup>7</sup> This notion of ‘bouncing back’, by promoting only a return to the pre-disaster status quo, excuses communities and community leaders from addressing injustice and inequality, thus perpetuating social inequality.<sup>8</sup> Resilience can thereby be politicised and manipulated in the interest of stakeholders

benefitting from the pre-disaster status quo.<sup>9</sup> Consequences are compounded when ‘responsibilisation’ of vulnerable individuals and groups occurs as, in addition to absolving communities of their duty to address inequality, resilience discourse can then hold individuals accountable for individual and community recovery.

## Potential way forward

Addressing these criticisms requires clear delineation between resilience, the process of adaptation, and resilience, the trait. It also requires acceptance and advocacy that momentary exhaustion of coping mechanisms does not equate to a lack of resilience. Adopting a longitudinal perception of resilience reinforces it as a dynamic process of adaptation over time rather than an instantaneous measure of coping. The importance of stress and discomfort as drivers for positive change, innovation and evolution must be emphasised so disasters are framed as opportunities for improvement and growth rather than challenges of resilience. Additionally, ‘inexhaustible resilience’ must be accepted as unfeasible and harmful and this should become embedded in discussions of resilience.

***The relationship between individual and community resilience should be one of empowerment, participation and inclusion.***

Resilience must be protected from becoming a tool that holds individuals accountable for post-disaster recovery. The relationship between individual and community resilience should be one of empowerment, participation and inclusion. It is important to acknowledge the capacity for systemic resilience, as an external factor to determine the collective capacity for individual resilience. Individual resilience should be considered as contributing to systemic or community resilience, not the determining factor behind it. Community resilience should demand that individual resilience is fostered and protected, not depended on. Disaster managers must adopt a ‘resilient communities foster resilient people’ mentality, shifting focus back to leaders and community structures that, as external factors, modulate individual resilience.

While the ‘bounce forward’ paradigm<sup>7</sup> is suggested instead of the ‘bounce back’ notion of resilience, the concept of ‘bouncing’ implies resilience is reflexive or passive. Reframing resilience as an active process promotes discussions surrounding the specific actions and activities required to facilitate resilience and recovery and who is responsible for undertaking them. The concept of community resilience should demand a state of readiness and willingness to address vulnerabilities exposed by disasters to drive active positive adaptation and progress. A resilient community is not one that does not suffer the effects of stresses, but rather one that has multi-dimensional

preparedness to respond to a disaster and manage the recovery phase to rebuild a community that is an improvement from the pre-disaster state.

### About the author

**Zachary Horn** is a registered health professional and a graduate of the Master of Disaster and Emergency Response program, Edith Cowan University, Perth, Western Australia.

## Endnotes

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