A Study How Do Community Care Providers Collaborate With Local Authorities and Emergency Response Teams During A Disaster Situation: A Literature Review

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ABSTRACT

Introduction: The Unitary State of the Republic of Indonesia is a country located in a disaster-prone area due to geographical, geological, hydrological and demographic conditions that allow natural, non-natural and social disasters to occur. Therefore, the government passed Law Number 24 of 2007 concerning Disaster Management to disseminate information to the public regarding disaster management, provide protection to the community from every threat of disaster and ensure the implementation of disaster management. Methods: A systematic search was conducted against the Cochrane Database of Reviews, Google Scholar, PubMed, Scopus, Embase, and Web of Science. The keywords in this research are "natural disaster", "collaboration", and "community care". Results: After a thorough examination, only about seven were related to natural disasters, collaboration, and community awareness. Then, after a comprehensive examination, only about seven were related to natural disasters, collaboration and community care, as well as the importance of collaboration or partnerships between various health sectors. Conclusion: Disaster prevention and management is carried out in collaboration between the Government and health workers, NGOs, and community involvement. The role of the community is very important in efforts to increase awareness of disasters, requiring individuals who have a high level of resilience and can work under any risk, and the public health energy sector has a big role in disaster mitigation.

KEYWORDS

Natural Disasters, Collaboration, and Community Care

INTRODUCTION

The Unitary State of the Republic of Indonesia is located in a disaster-prone area. This is because this country has geographical, geological, hydrological and demographic conditions that allow disasters to occur, be they natural, non-natural and social disasters. Under these conditions, the Indonesian Government passed Law Number 24 of 2007 concerning Disaster Management. Based on this law, disseminating information to the public regarding disaster management is very important. This is done in order to provide protection to the community from every threat of disaster and ensure the implementation of planned, integrated, coordinated and comprehensive disaster management. (BNPB, 2013)

Collaboration between various parties, especially in the Health sector, namely public health institutions, hospitals and clinics, related health organizations, emergency management, and other emergency medical service institutions. as the sole function of health service facilities and other health service assets to organize and implement mitigation, preparedness, response and recovery actions. Historically, federal funds have played an influential role in facilitating collaboration among the various sectors involved in preparing for and responding to public health emergencies. The sources of federal funding streams reflect the multidisciplinary nature of health care preparedness. This stream comes from several agencies in the Department of Health and Human Services (HHS) and the Department of Homeland Security (DHS). Prominent HHS funding programs include the Health Services Preparedness Program (HPP) in the Office of the Assistant Secretary for Preparedness and Response (ASPR) and the Public Health Emergency Preparedness (PHEP) and Municipal Readiness Initiative (CRI) cooperative agreements, which are administered by the CDC. Key DHS programs, administered through the Federal Emergency Management Agency (FEMA), include the Urban Area Security Initiative (UASI) and the Metropolitan Medical Response System (MMRS) program, which are no longer funded.

Collaboration between public health agencies, hospitals and clinics, allied health organizations, emergency management offices, and emergency medical services agencies takes many forms. Healthcare coalitions represent one model of collaboration between these entities and are defined by the US government as "the sole function of healthcare facilities and other healthcare assets to organize and implement mitigation, preparedness, response, and recovery actions for medical and healthcare providers in a jurisdiction's health care system." However, collaboration for health care preparedness is not always structured. Indeed, many jurisdictions in the US rely on less formal relationships between sectors to carry out preparedness and response activities. However, collaboration for healthcare preparedness is not always structured. Indeed, many jurisdictions rely on less formal relationships between sectors to carry out preparedness and response activities.

Based on the Regulation of the Head of the National Disaster Management Agency Number 10 of 2008 concerning Guidelines for Disaster Emergency Response Commands and Number 14 of 2010 concerning Guidelines for Establishing Disaster Emergency Response Command Posts, disseminating information and documenting command post activities is the task of Public Relations, hereinafter referred to as Public Relations. It is very important for information regarding disasters that occur in an area to be disseminated to the public and the mass media so that panic situations and confusion of information after a disaster can be controlled. Practice in the field when the Disaster Emergency Response Command Post was established, the Disaster Emergency Response Media Center was a vital facility in supporting the duties and role of Public Relations in emergency response situations.

Finally, previous qualitative research was conducted on a sample of peer and peer nurses from the study who were indirectly exposed to nurses who survived the same avalanche. All directly exposed survivors in previous studies noted a lack of assistance from government agencies immediately after the tragedy and over the following three decades (anonymous). Therefore, we want to conduct a literature study about nurses who are recovering from natural disasters post-deployment.

MATERIALS AND METHODS

This research is a literature review conducted in 2024 to understand current recovery rates from natural disaster care interventions. We conducted a systematic search of the Cochrane Database of Reviews, Google Scholar, PubMed, Scopus, Embase, and Web of Science. The keywords in the literature research are "natural disasters", "collaboration", "and community care.". Original peer-reviewed articles, abstracts, reports, and letters to the editor published between 2024 and March 2024 and written in English were eligible. Non-English language articles, ongoing projects, review articles, and non-human research publications. Due to lack of data and subject requirements, no systematic enrollment review was conducted. The title and abstract of each article were examined and the most relevant articles were selected using the inclusion and exclusion criteria described above. To ensure the quality of the selected articles, a checklist was created with 7 categories based on relevant research results. The full text of the selected articles was then reviewed thoroughly to obtain meaningful results.

RESULTS AND DISCUSION

Research that talks about How community care providers work in tandem with emergency response teams and local governments in times of crisis. Following a thorough examination of the complete texts of the chosen publications, only roughly seven were found to be pertinent to natural disasters, collaboration, and community care.

How community care providers work with local government agencies and emergency response teams in a crisis situation is the topic of discussion in this study. After a comprehensive examination of all the selected papers, it was determined that just about seven had anything to do with natural disasters, collaboration, and community care. Despite the fact that none of the presentations specifically discuss the ways in which emergency response teams and local authorities work together with community care providers in times of disaster. This article discusses the following:
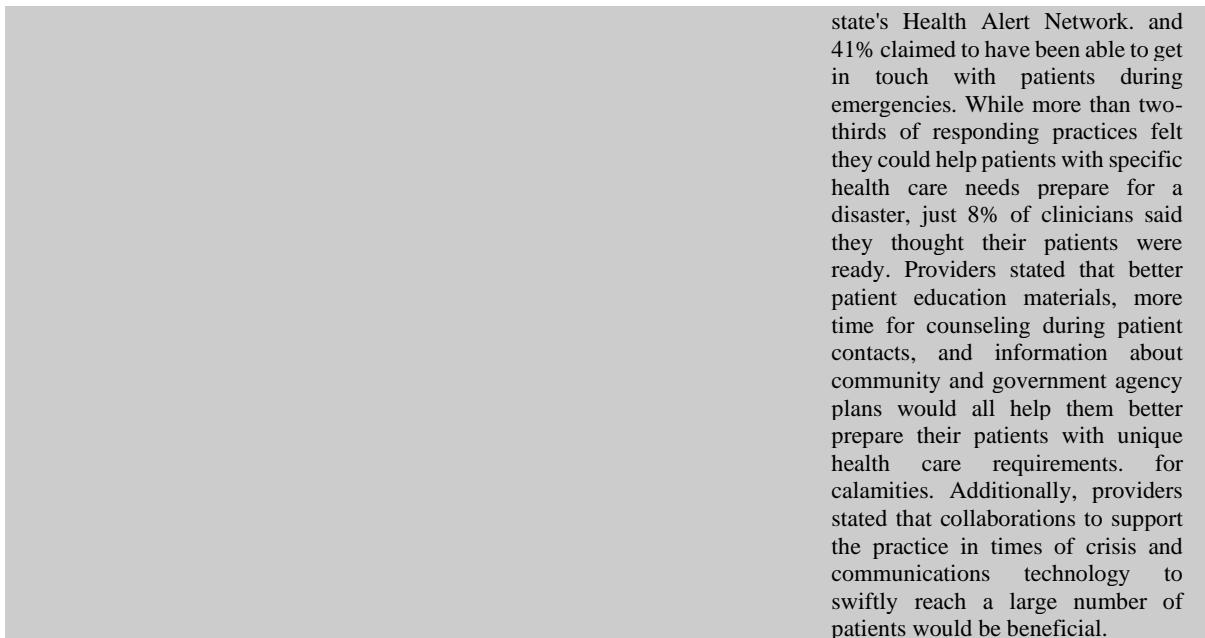
Author (year), country	Design	Purpose	Result
Davies and Somasundaram. (2014). Australia	Case study	to provide case studies of two organizations working in evacuation centers that successfully overcame the challenges of building constructive relationships and achieving better outcomes for affected communities. Emergency shelters provide a variety of services to communities affected by disasters.	The growing relationship between the Australian Red Cross and EHA is an example of how a crisis can create opportunity. The widespread damage caused by the Queensland floods in 2011, and the challenges of providing shelter for communities in these difficult situations, resulted in a mutually beneficial and productive relationship between EHA and the Australian Red Cross. This relationship is characterized by cooperation, learning, goodwill, and

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			shared motivation to provide better quality housing for communities affected by disasters.
Adelaine et al. (2016). USA	Survey with the standard Dilman method	Make appropriate plans before a disaster occurs, provide the right response when a disaster occurs, and make corrections and adjustments after a disaster occurs.	Hospitals already have a basic level of preparedness and no longer need internal disaster preparedness guidelines. When asked about the Joint Commission's standards regarding the basic elements of an emergency response plan, most hospitals (more than 90%) said they have all the basics in place, including communications, surge plans, and power outage plans. The hospital actively participates in the collaboration and has a high participation rate. Up to 85% of hospitals are members of the Health Care Coalition. These two areas have been the focus of previous efforts to strengthen hospital resilience and form the basis of preparedness.
Redshaw et al. (2017). Australia	Post-survey follow-up	People getting involved at the community level is critical to expand engagement and preparedness. The goal is to evaluate and present the effectiveness of fire preparedness initiatives.	BSAFE results show that partnerships between emergency services and community organizations result in greater community engagement and success. In 2014 and 2015, more households attended forest fire preparedness meetings and more households were contacted about forest fire preparedness issues.
Atkinson. (2023). Australia	In-depth interviews and online survey	respondents) to explore community experiences of the 2022 floods	While emergency services organizations work hard to provide pertinent and crucial information during crises and natural disasters, studies indicate that people may not always look to them as their main information source. Many people get the information they require from friends, family, and local community organizations. This affects the integration and communication within the emergency management sector as well as how communities prepare and react.
Peter et al. (2018). England	A self-administered online questionnaire	to obtain knowledge of primary care providers' resource requirements and to comprehend their level of readiness and obstacles.	179 primary care physicians in all took part in the poll. Overall, 26% of respondents said they had a plan for an increase in patients in an outpatient setting, and 38% said they had a practice continuity of operations strategy in place. 30% said they have registered with the

			state's Health Alert Network. and 41% claimed to have been able to get in touch with patients during emergencies. While more than two-thirds of responding practices felt they could help patients with specific health care needs prepare for a disaster, just 8% of clinicians said they thought their patients were ready. Providers stated that better patient education materials, more time for counseling during patient contacts, and information about community and government agency plans would all help them better prepare their patients with unique health care requirements. for calamities. Additionally, providers stated that collaborations to support the practice in times of crisis and communications technology to swiftly reach a large number of patients would be beneficial.
Hamilton et al. (2021). England	A search of the literature,	through an overview of current reports and case studies, to offer a more comprehensive understanding of the role of EMTs. Specifically, this brief seeks to pinpoint areas that require development as well as possibilities and roadblocks.	Interactions between many actors, including national governments, international organizations, non-governmental organizations, local government agencies, community stakeholders, and the private sector, are necessary for the effective operation of EMTs. Five main areas for improvement were determined: (1) EMT and other actor coordination and integration; (2) EMTs are systematically classified and registered; (3) national stewardship; (4) community involvement; (5) research and data gathering. In the upcoming decades, effective disaster response will play a bigger role in global health as the frequency of natural disasters rises. expanded cooperation among EMTs under the direction of international rosters, greater awareness of the various actors involved, and expanded research efforts to assess obstacles to and prospects for improved disaster response are all necessary for optimizing EMT efficiency.
Toner et al. (2015). Australia	qualitative study with carried out a multiphase inquiry	to determine the scope and caliber of current partnerships, pinpoint the obstacles to or facilitators of the preparedness	Everywhere there is collaboration, there are differences in the scope and caliber of these collaborations. It varies depending on the specific activity and the partners

community's integration, and suggest actions to bolster cooperation. | participating, as well as between different locales and within a certain locality. It is challenging for coalitions to evaluate how they are performing in this area since each coalition is an island with a narrow perspective of peer coalitions and since there are few indicators by which to compare preparedness community integration across coalitions. The research findings' consistency suggests that there is a general understanding of the factors that promote and hinder community integration for local preparation. This implies that it could be feasible to develop collaboration-enhancing tools that might be used in a variety of coalition settings.

Community Involvement

In some of the literature, the results show that most authors state that community involvement in disaster prevention and management efforts is an important factor. By involving the community in disaster prevention efforts, information regarding disaster preparedness can be provided by the community itself, which in real life allows it to be accepted more easily by other communities. Apart from that, by involving the community, receiving information or assistance in a disaster will also be easier.

Partnership and Collaboration

Based on a literature study of several journals/articles, the results showed that on average they stated the importance of collaboration or partnership from various sectors in disaster management efforts. This is because collaboration between various health sectors, such as institutions and hospitals, is very important to increase preparedness and rapid response in disaster management. With good collaboration, communities will be better protected and can experience faster recovery after a disaster occurs.

Challenges and Obstacle

In carrying out a particular activity or program, there will always be challenges or obstacles in its implementation, whether they are minor or major obstacles. Challenges and obstacles that often occur in disaster situations, as stated in these journals and articles, include the lack of detailed guidance regarding activity management, lack of communication between collaborating institutions, and a sense of competition in terms of business between hospitals and health service providers. The internal obstacles are due to differences in region, ethnicity and culture. Apart from that, the rate of temperature increase and uncertain climate change also become obstacles in the disaster management process. Apart from that, there are also obstacles such as a lack of human resources to help patients, a lack of information about disasters, and a lack of ability to access supplies by patients/victims.

Role of Community Service Providers

Based on analysis of journals/articles, the results showed that the role of the health service system in community preparedness involves coordination with emergency management, public health,

mental/behavioral, community and faith-based health service providers, partners, state, local, and territorial governments. Meanwhile, the role of the private and non-government sectors plays a role in preventing, preparing, responding and recovering from terrorist attacks, major disasters and other emergencies.

Community Involvement

According to the study conducted by Trisnawati, (2023) states that the role of the community is very needed and has a special and important place in efforts to raise awareness of disasters, both before, at the time of disaster, and after disaster. (Prihananto & Muta'ali, (2023) in his research argues that basically, disasters discuss five fundamental things: the causes and vulnerabilities (human and natural factors), the impact of the disaster, the role of the government, the roles of the community, and the last is the influence and actions of stakeholders in responding to such a disaster. In the same study it was found that community-based disaster risk reduction activities with the CBDP (Community Based Disaster Preparedness) method were assessed as a suitable method to enhance the capacity of communities.

Public involvement in disaster prevention programs is a means of increasing disaster literacy and influences a comprehensive understanding of the concept of hatred so that they are better prepared to face disasters. (Koem & Akase, 2022). The same study found that as many as 36% of the population tend to feel sad when a disaster occurs, which shows that people's understanding of disaster conditions is still underestimated. Apart from that, the community is still not ready to face disaster emergencies. Considering these findings, it is important to design a disaster preparedness village program for the community. (Trisnawati, 2023). Public participation in disaster management can be divided into three categories:

1. Pre-disaster activities. Activities include prevention, disaster mitigation and preparedness in cooperation with the Disaster Management Agency. As well as conducting routine education among communities such as simulation of disasters and conducting risk studies.
2. Activities when disaster occurs Some activities that can be done by communities in the event of disaster are emergency response activities to the disaster that is occurring without exacerbating suffering and immediately counteracting the impact that arises such as search and rescue (SAR) activities, rescuing property, as well as evacuation.
3. Activities in the post-disaster phase Activities include recovery, rehabilitation, and reconstruction. Activities are carried out by re-functioning facilities and facilities to their original condition. Besides, at the time of a disaster, many of the parties gave donations. The aid was managed to repair houses and public facilities damaged by the disaster.

Role of Community Service Providers

Of course, prevention and disaster management cannot be done by one party alone. A government strategy where governments collaborate in joint decision-making by implementing collaborative mechanisms with common vision and mission with the aim of raising awareness of the entire community. (Pasaribu et al., 2023). In the same study, the Penta Helix strategy is referred to as a multistakeholder collaborative technique that brings together governments, enterprises, universities, the community, and the media. The following are the roles of each stakeholder in disaster management:

1. Government: as the regulating and controlling authority, as well as the first authority to provide guidance or means of disaster handling.
2. Enterprise: contributing to the sustainability of society through CSR.

3. Community: identifying the needs of victims after a disaster.
4. Academic: publishing the development of the concept of community reach/community in the management of emergency response to disasters.
5. Media: disseminating information and socializing further treatment.

Widayatun & Fatoni, (2013) argued that the role of the health officer in carrying out the activities of identification of vulnerable groups in disasters with the method of rapid health assessment. It is important for health workers to carry out this activity to categorize the health problems that exist among disaster victims and then recommend intervention efforts involving various stakeholders.

Challenges and Obstacles

Being part of disaster management must be mentally strong and able to overcome physical and mental constraints. The limitations that exist in disaster situations such as a lack of food supply, and limited physical strength, then require individuals who have a high level of resilience and can work with risks, challenges, and pressures (Melina et al., 2012). According to Sadat, (2019) in his research mentions that the subsequent networking approach raises challenges and obstacles, namely the lack of communication and inter-agency relationships on which each agency should be interdependent.

Sukino et al., (2019) said in his research that the detailed guidelines for the management of disaster management activities, which are organized and systematic in mitigation, make the process well implemented without any obstacles. In planning the management of activities there are several things that need to be taken into account, among them are: (1) planning, (2) organizational, (organizational compilation), (4) guidance, (5) coordination, and (6) reporting. In the same study mentioned that the challenge in disaster mitigation management is the lack of human resources quantitatively so that it has to capture other tasks. In addition, the facilities and facilities that support the activities of mitigation and first aid are so limited that the use of facilities is not even. In addition, the poor geographical conditions of the territory can lead to obstacles in disaster mitigation such as land conditions and remote territory locations making it a unique challenge to reach such locations. (Firdaus, 2023). Therefore, to avoid obstacles that may arise during disaster mitigation activities, a detailed disaster management process is required.

Role of Community Service Providers

Kurniayanti, (2012) expressed his opinion that one of the conditions for successful disaster management is health power, because the weak point of disaster mitigation is in the absence of health power. Another study by Natalia, (2022) noted that the public health energy sector has a major role in disaster mitigation, especially its focus on disaster risk reduction is proactive and preventive by involving all stakeholders who play their respective roles. Since decentralization of government and autonomy makes the role of disaster management and management the responsibility of the local government, coordination between the central government and the regional government in disaster mitigation is required (Heryati, 2020).

In addition, non-governmental organizations also play a role in disaster mitigation activities and focus on development approaches by reducing risk through programmes directly in the community. (Namirah, 2015). The same research reveals that non-governmental organizations are starting to intervene by taking preventive measures. This is because the background of the existence of non-governmental organizations is the poor system of government. Therefore, the role of non-governmental organizations is through a preventive approach. Not less important than other sectors, social support plays an important role in post-traumatic mental recovery from disasters. (Sukarni et al., 2019). In the same study it was

also mentioned that victims of disasters experienced psychological stresses such as stress that triggered anxiety and fear disorders. Such social support plays an important role in the psychological recovery of disaster victims. The higher social support is known to have a positive impact on reducing psychological stress as the victim feels that others care and helps make things easier. Social support can be obtained from family, friends, or government. (Sukarni et al., 2019).

CONCLUSIONS

Disaster prevention and management is carried out in collaboration between the Government and health workers, NGOs, and community involvement, the role of the community is very important in efforts to increase awareness of disasters, requires individuals who have a high level of resilience and can work in any risk, and the public health energy sector has a big role in disaster mitigation.

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Conflict of Interest

The authors state they are not aware of any financial or interpersonal conflict that might have influenced this research.

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