

# [Collaboration of communities and organizations in promoting resilience](https://assignbuster.com/collaboration-of-communities-and-organizations-in-promoting-resilience/)

Resilience is not only an individual practice but an extensional practice to communities, organizations, and groups. Resilience is promoted through an excellent platform such as the family which serves a crucial role in studying organizations and communities of all kinds. Most resilient families believe in a family unit which promotes cohesiveness among family members, believe in the ability to protect as well as support their members, and celebrate important family functions such as parties, as well as the creation of family rituals (Everly & Lating, 2012). Communication among the family, cohesion, family routine adherence, family’s self-efficacy, optimism and sense of family identity, helps in rebounding families from adversity. Resilient culture creation helps families’ communities and organizations to succeed, since the environment that resilient culture thrives, serves as the main platform where the community’s culture is cemented. Resilient leadership helps create a resilient culture in a community since it serves as a catalyst which motivates the community and the people to exhibit resistance. The culture of resilience is created by efficient leadership in instances where misfortune is viewed as a platform which is always present. A resilient leader creates a crucial point where various cultures can change. These crucial points should meet various thresholds such as having credibility, have the willingness of promoting other peoples success, and serving the purpose of the informational conduit, which in most cases involves frontline supervisors(Everly & Lating, 2012). According to Everly et al, 2010, Optimism, decisiveness, open communication and integration are crucial factors that help communicate and foster the growth of resilient culture in the leadership that is the resilient base. Comprehensive services such as community-based programmes help to control gang problems through strategies that are in line with the community’s call which supplements suppression efforts. Community mobilization efforts help in organizing communities in order to tackle the problem of a youth gang. However, mobilizing the communities is marred by a myriad of challenges such as difficulty in institutionalizing the policies on the communities they serve. Mobilizing the entire community requires immense funding as well as donors (Conly, 1993). School-based strategies are another comprehensive service provided by the agencies to increase protective factors in a high-risk community. School-based services are a proactive approach which takes the form of improved educational services in societies or communities infiltrated by gangs. These programmes help to improve the lives of the individuals who have joined the gangs and also helps keep these youth busy and occupied in school work. Education preventive efforts include programs that are innovative, such as rehabilitative education on the use and abuse of drug and substance which helps improve the police and youth relationship and build trust. Education programs on drug and substance abuse involve parents and middle school programmes solely focused on counseling that is peer-oriented, and methods of resolving conflict within an individual, between individuals and between groups. School programmes help de marginalize potential gang recruits by providing guidance and counseling, tutoring, as well as testing youths learning disabilities (Conly, 1993). Family interventions is another protective factor in a high-risk community, which helps in solving youth gang problems since they create a negligible influence on the lives of a gang member. There is a need for Parents to support and increase their bond with their children in their early years of development, to prevent the youths from engaging in criminal behavior. Parental training is a family intervention strategy which helps transform delinquent children, through lowering their rates of aggressiveness, through observing undesirable and desirable behaviour among the children, teaching and providing a reinforced behaviour that is desirable and building the capacity of parents to support youths achievements in school by establishing home study routines, as well as learning and playing games (Conly, 1993). Crisis intervention is another family intervention approach, where youths who have joined gangs can receive intensive case management services. These services are designed for families who face a risk that involves out of home placements, aiming to keep children safe together with their families. However, there are certain challenges such as lack of control among the parents to the youths joining the gangs (Conly, 1993). Medical professional services are also community intervention services. Medical services are offered to family members as well as to the community. The services include dental and optometry services, vaccinations, mental health campaign, and nutrition. Medical services are beneficial to community members, who reside in remote and rural areas as well as small cities, and it plays a role in the provision of additional assistance to the communities that are far out of reach from medical care. Establishment of medical clinics and employing the community members to work at the established clinics also helps in the provision of services to the community. However financial constraint poses a great challenge in providing medical assistance to the community (Hartman, et al, 2003). Provision of social support to community members helps overcome life-disrupting problems through assistance and mutual support, provision of education regarding problems addressed by groups, and advocating social changes to improve conditions for those facing various social problems such as delinquency among the youth (Hartman, et al, 2003). Reaching diverse client’s population is the greatest challenge that affects service delivery in the community. Diversity in culture poses a great multicultural challenge since it affects people’s life experiences, values, and attitudes. However, practitioners are challenged to go beyond their own cultural encapsulation and figure out their appropriateness of viewing their clients differently, and instead view them as if they are from their own cultural and ethnic group (Corey & Callanan 2000).