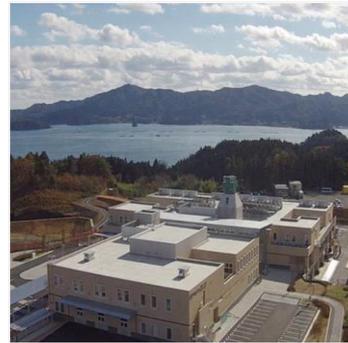


Japan: Earthquake and Tsunami

60 Month Report
Glide no. EQ-2011-00028-JPN
31 January 2017



Period covered by this report: 11 March 2011 – 31 March 2016



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EXECUTIVE SUMMARY

Five years after the Great East Japan Earthquake and the Tsunami (GEJET) of 11 March 2011, some 171,000¹ people are still displaced from their homes, living in temporary housings, apartments provided by the municipalities or at relatives' homes. Among them, approximately 70,000² people live in prefabricated temporary homes.

In Fukushima Prefecture, there are still approximately 90,000 displaced people, due to mainly by the consequence of the Fukushima Daiichi Nuclear Power Plant accident, 40 per cent of these individuals have been evacuated to the outer regions of the prefecture. Anxiety born of uncertainty about their future weighs heavily on their minds.

As of March 2016, the Japanese Red Cross Society (JRCS) has received approximately 437 billion Japanese Yen (JPY), of which 72% comes from domestic donations and the rest from abroad, including 60 billion JPY in donations from more than 100 Partner National Societies (PNS). This report focuses mainly on the use of this fund which was implemented by the JRCS for its relief and recovery programmes. By the end of March 2016, 91.1 per cent of the donations have been spent.

Another 40 billion JPY was donated by the State of Kuwait. This fund was allocated to the three worst hit prefectures, Iwate, Miyagi and Fukushima. The project implementation of this fund is under the management of prefectural governments.

The remaining 337 billion JPY, including 22 billion JPY from abroad was allocated to the so-called "Gienkin" scheme or Cash Grant programme and distributed to the affected people³ through local governments.

In 2015 (from April 2015 to March 2016), main achievements have been seen in the area of capacity building for disaster preparedness, nuclear disaster preparedness in particular, and physical rehabilitation of medical and social welfare facilities.

To list a few;

- Guidelines and Manual were revised to better respond to nuclear power plant disasters safely,
- A Basic Training Session was organized to strengthen the nuclear disaster response capacity,
- Pilot training programmes were conducted in seven prefectures to promote the disaster preparedness education in community
- Education Programme for Junior Red Cross/ Red Cross Youth was implemented to promote the preparedness education at schools,
- A 90 beds Hospital and a Social Welfare Centre in Minamisanriku Town, Miyagi were completed in October, and started its operation on 14 December 2015.

Psychosocial support continues in the GEJET affected area as still many people are displaced. For Fukushima Prefecture the JRCS will continue for another five years. For the rest of the area JRCS recovery and rehabilitation activities will be completed for in two years.

(For further details please refer to "HIGHLIGHTS OF PROGRESS" below).

¹ Reconstruction Agency. *Zenkoku no Hinansha-to no Kazu* (Number of evacuees nationwide), 29 March 2016.

² Reconstruction Agency. *Fukko no Genjo to Kadai* (Current situation of reconstruction and challenges), September 11, 2015

³ Japanese Red Cross Society. Annual Report 2015-2016.

HIGHLIGHTS OF PROGRESS IN 2015

In 2015 (covering from April 2015 to March 2016), the main progress of each programme is highlighted below. As to the progress of each programme, please see "PROGRESS TO DATE" from page 25.

Programme 4: Assistance for Victims of Nuclear Power Plant Disaster

4.2.1 Nuclear Disaster Guidelines for Preparedness, Response and Recovery

The JRCS issued the revised guidelines on 31 March 2016 after making changes in wording and adding explanation on the guidelines that was issued on 30 March 2015.

Simultaneously, the "Annotations to the Nuclear Disaster Guidelines for Preparedness, Response and Recovery" was produced.

For the purpose to secure the safety of the JRCS responders, two type of manuals, "Instruction manual of the security management of staff in the affected area under Nuclear Disaster" and a pocket leaflet "To protect the health of you and your family under Nuclear Disaster" were produced and distributed.

4.2.2 Manual for Relief Activities under Nuclear Disasters

The manual that was published in May 2013 defined the limit of the cumulative level of radiation, code of conduct, and safety standards for the Relief Team. The revised manual was completed in March 2016.

4.2.3 Digital Archives

Through the Red Cross Nuclear Disaster Resource Centre (NDRC) Digital Archives, the JRCS continues to disseminate information on nuclear disasters and the situation in the affected areas. In 2015, the NDRC posted 1,661 information pieces on Digital Archives as well as 378 portal links. In addition, three special pieces have been released to the public to assist with understanding archives contents.

4.2.4 Radiation Emergency Medical Care Advisers Meeting

The First Radiation Emergency Medical Care Advisers Meeting was held in 22 to 23 July 2015 where the construction of the JRCS nuclear disaster relief system was discussed. The Second meeting was held in 3 to 4 December 2015 where they discussed: how to apply the security standard for the continuous relief activities by assuring the security of members in the affected area, response to evacuation of JRCS facilities, and exchanged opinions on how to contribute to international society. In addition, they discussed the revised content of Manual for Relief Activities under Nuclear Disasters, and supporting activities to the JRCS Nuclear Disaster Response Basic Training Session, in which to be held by each area zone in FY 2016.

4.2.5 Nuclear Disaster Response Basic Training Session

Nuclear Disaster Response Basic Training Session that was started in FY 2014 is one of the efforts to strengthen the nuclear disaster response based on lessons learned from GEJET. The target audience is the physicians, radiological technicians, nurses, administrative staff from the JRCS hospitals, and JRCS chapter staff.

The JRCS organized two sessions of "Nuclear Disaster Response Basic Training Sessions" on 3 September 2014 and on 6 November 2015. They covered several lectures, such as the Nuclear Disaster Guidelines for Preparedness, Response and Recovery, Basic knowledge of radiation protection during nuclear disasters relief activities, and Roles of the radiation emergency medical care advisor. In addition, workshops on the radiation protective equipment and group case study were delivered to the participants.

4.2.6 The Fourth Reference Group Meeting on Nuclear and Radiological Emergency Preparedness

The JRCS and the IFRC co-hosted the Fourth Reference Group Meeting on Nuclear and Radiological Emergency Preparedness in Berlin from 27 to 30 October 2015. The final draft of the Nuclear and Radiological Emergency Preparedness and Response Guidelines was reviewed.

In it, the member of National Societies reported the recent infectious disease outbreak and disaster occurrence, preparedness to respond to emergencies (chemical, biological, radiological, and nuclear substances), and shared information about legal arrangement.

4.2.7 Side event for the 20th IFRC General Assembly

The side event titling “are we prepared for emerging risk?” was held on 4 December 2016 prior to the 20th General Assembly of the International Federation of Red Cross and Red Crescent Societies (IFRC). The aim is to look back at the lesson learned from the nuclear disaster in Chernobyl, Fukushima and recent disasters. Also, to introduce new preparedness measures to respond to these risks in a global, regional and national level, and the outcomes of IFRC General Assembly Decision 11/46, 23-25 November 2011, Geneva, Switzerland, ‘preparedness to respond to the humanitarian consequences of nuclear accidents’. Following the presentation by panels of high schools and universities students from Fukushima and Tokyo, who are members of a group of “The Simplest NAIC⁴”, discussion was held.

4.2.8 Fourth Red Cross Nuclear Disaster Seminar

The Fourth Red Cross Nuclear Disaster Seminars was held in March 2016 as part of the “Forever remembered” project by the JRCS.

This seminar provided the opportunity for the participants to explore the topic of “what can we do towards the future” by learning about the current status of Fukushima through lectures and workshops.

Programme 5: Rehabilitation of Health Infrastructure

5.4 Strengthening of the disaster/emergency medical capacity of Ishinomaki Red Cross Hospital and reconstruction of the destroyed Japanese Red Cross school of Nursing and Disaster Medical Training Centre (Ishinomaki, Miyagi) -- *COMPLETED*

The Disaster Medical Training Centre located at the JRCS Ishinomaki Hospital in Miyagi Prefecture houses the JRC Ishinomaki School of Nursing was completed in March 2015. The centre began their operations in May 2015. The construction of the expanded annex building for which the JRCS also supports was completed in August 2015.

5.7 & 5.8 Construction of Minamisanriku Hospital and Social Welfare Centre (Minamisanriku, Miyagi) -- *COMPLETED*

Construction of the public hospital and social welfare centre in Minamisanriku Town was completed in October 2015. The completion ceremony was held on 25 November 2015, and started its operation on 14 December 2015.

5.9 Construction of Fukushima Red Cross Hospital (Fukushima, Fukushima)

Fukushima Red Cross Hospital is now in their initial design phase, and its construction is scheduled to start in October 2016 and finish by August 2018. The hospital will be operational around January 2019.

Programme 6: Improving the Living Conditions of Affected People

6.5 Psychosocial Support

Various events for psychosocial support have been organized and implemented by the JRCS chapters in the most GEJET affected areas of Iwate, Miyagi and Fukushima Prefectures. Beneficiaries, who usually stayed at home alone, were invited to participate in a Nordic-style walks, tea parties, health and social classes, and health consultation. The psychosocial support activities focus on meeting the new needs of beneficiaries of building new communities because of a merger and abolishment of temporary housing. The people who are living in temporary homes are mostly elderly individuals who have difficulties moving and adapting to new environments.

In 2015, 66 events with 1,387 participants were held in Iwate, and 32 events with 84 participants were held in Fukushima. Moreover, 269 individuals participated in 32 events in Miyagi.

⁴ The Simplest Explanation of The National Diet of Japan Fukushima Nuclear Accident Independent Investigation Commission Report

6.7 Disaster Recovery Public Housing in Otsuchi

A total of 980 housing units are planned to be built in Otsuchi Town, as disaster recovery public housing for the area. The JRCS provides part of the financing for 730 units, which will be under the management of Otsuchi Town. By the end of 2014, 161 housing units were completed. The number increased to 254 in March 2015 with the completion of the Terano/Usuzawa (No.1) Municipal Housing and Machikata (Suehiro-cho) Housing. Construction of the housing is projected to be completed by 2019.

6.8 Construction of Community Centres

In order to provide the space for the beneficiaries to get together and to do some activities, the JRCS has been supporting construction of the community centres in Fukushima and Miyagi Prefectures. To date, two community centres were completed in November 2011 and March 2014. Construction of the third community centre in Togura, Miyagi Prefecture was started in April 2015 and projected to be completed by August 2016.

6.9 Nordic-style Walking

The JRC Iwate and Fukushima Chapters started this project after the disaster to relieve the stress and to solve lack of exercise among the beneficiaries living in the temporary housing. Compared to the beginning of the project, elderly groups are becoming more active participants, and time-length and walking distance of the activities were adjusted in order to better meet the athletic abilities of the elderly. These activities are still very popular among residents of temporary housing. In 2015, 66 events with 1,387 participants were held in Iwate and 15 events with 365 participants were held in Fukushima.

6.10 Health and Social Classes

Various activities such as RC First Aid classes, soup kitchens, tea parties, and handicraft courses have been organized in Fukushima and Miyagi Prefectures. In Iwate Prefecture, this project finished in 2013. In 2015 at Miyagi Prefecture, RC First Aid Classes were held 140 times with 6,022 participants. In Fukushima Prefecture, 135 classes with 4,794 participants were implemented.

6.11 Health Consultation Project for the Evacuees from Namie Town

Due to the high level of radiations, residents of Namie Town have been relocated to Iwaki City in Fukushima. This project was started in October 2012 in coordination with local municipality, the JRCS, and JRC College of Nursing. Its purpose was to check the health, psychological and social status of the evacuees through door-to-door visits. By February 2016, the survey team had visited 9,305 evacuees (4,292 households). The team is now paying a fourth round of visits to the evacuees. Simultaneously, the Namie dispensary provides health consultation to the evacuees at any time and organizes a "mother salon" to provide child rearing and development advice and daily general concerns. Evacuees expressed their gratitude to the survey team for listening to their concerns, which previously they were not able to. This consultation helped to alleviate their feeling and uncertainty.

Programme 7: Social Welfare Support

7.5 Construction of Social Welfare Centre in Kesennuma, Miyagi

The newly-reconstructed social welfare centre in Kesennuma City will have multiple functions. It is a community support centre for parents, elderly and physically challenged individuals. At the same time it also serves as initial-meeting point for social workers in case of emergencies. Land development for the centre was started in 2013 and completed in March 2015. Construction of the buildings was started in December 2015 and projected to finish by December 2016. Operations are forecasted to begin around April 2017.

Programme 8: Children's Education Support

8.13 Red Cross Youth and Volunteer Project

Various activities managed by the local chapters and the Red Cross volunteers in the three most GEJET affected prefectures of Iwate, Miyagi, and Fukushima have been carried out. In 2015, the

following activities were implemented: two international youth exchange programmes with 23 participating, two summer camps with 124 youths, one Red Cross volunteer meetings with 600 participants and two musical concerts attended by 406 people. In addition, in Fukushima 35 events such as musical concerts, movie appreciation activities and plays attracted 3,277 youths.

8.16 Other Activities

A vocational experience programme for students was carried out at JRC Morioka Hospital in Iwate with 79 participating students.

Programme 10: Capacity Building for Disaster Preparedness

10.2 Disaster Preparedness Training

This project started in 2014 with the purpose of strengthening domestic disaster response capacities by providing education on disaster preparedness and risk reduction, promotion of the nurturing the spirit of self-reliance and cooperation among community members, and development of capable leaders to response to the disaster with in the region.

In 2015, this project has implemented three main activities: establishment of the JRCS Disaster Preparedness Training Programme Study Committee, implementation of the training for instructors for Disaster Imagination Game (DIG), and implementation of the JRCS Disaster Preparedness Training pilot programmes.

The JRCS Preparedness Education Promoting Committee was established in May 2015 in order to promote preparedness education in the community. The first committee meeting was held at the JRCS headquarters in July 2015 to strengthen their understanding of the JRCS Preparedness Education programmes, purpose and expected role of the committee, and to share their plan of FY2015. The second and third committee meetings was held in December 2015 and February 2016 where they examined the outcome of the implemented pilot programmes, and shared their plan of FY 2016. Also, the training for instructors for DIG was held in July 2015, and seven pilot programmes were implemented in Hiroshima, Iwate, Fukuoka, Osaka, Yamaguchi, Tokyo, and Okayama. A total of 391 individuals participated.

10.3 Mobilization of Youth Volunteers for Disaster Management -- COMPLETED

This project started in 2014. Mobilization of youth volunteers is one of important initiatives in the GEJET recovery activities. FY 2015 is scheduled to be the final year for the project where youth volunteers continued their activities. During this time, 9 groups of Red Cross Youth and Junior Red Cross volunteers implemented the recovery support and regional disaster preparedness activities, which were planned for the occasion of their visit to the affected area in 2014.

10.4 Preparedness Education Programme for Junior Red Cross/Red Cross Youth

This project started in 2014. After Hanshin-Awaji Earthquake in 1995 and the G EJET in 2011, the knowledge of life saving and preparedness skills is extremely crucial for survival in times of disaster. The project aims to teach elementary, junior high and high school students those skills that will protect themselves during disasters. It also aims to build better understanding and awareness of preparedness among families of students and their communities.

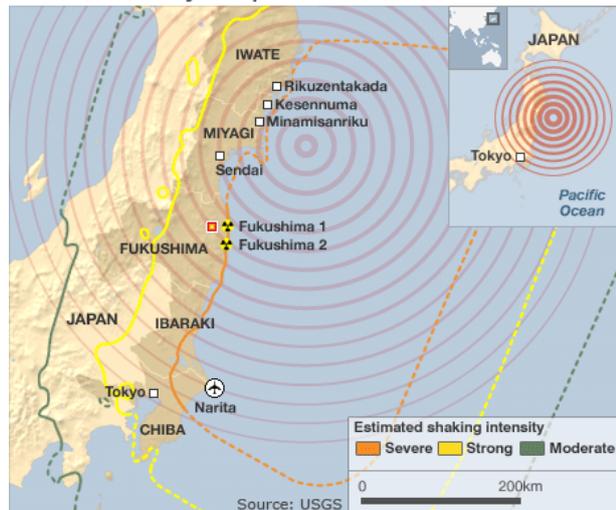
In 2015, 40,000 copies of “*Mamoru Inochi, Hiromeru Bosai* (Protecting Lives, Preparing for Disasters)” were reprinted in June after the initial 25,000 printed copies in January. A total 65,000 copies were delivered to chapters in each prefecture. In turn, each chapter delivered them to schools. They also explained its contents to the board of educations and to students through seminars.

This textbook in English was distributed at the JRCS booth of the exhibition hall during the 32nd International Conference of the Red Cross and Red Crescent held in December 2015.

CONTEXT

On 11 March 2011 at 02.46 PM, Japan was struck by a magnitude 9.0 earthquake⁵, which generated a gigantic tsunami that hit a 700 km stretch of its Pacific coast-lines. The tsunami devastated the *Tohoku* (north-eastern) region of Japan, with Iwate, Miyagi, and Fukushima prefectures being the worst affected. A 535 km² of land was inundated and nearly 400,000 houses were destroyed or damaged. Transport systems were extensively disrupted, and water and electric shut-downs affected an extensive area beyond Tohoku region. As of 10 March 2016, a total of 15,894 people were confirmed dead and 2,561 are still missing⁶. Failed reactors in the Fukushima Daiichi Nuclear Power Plant caused significant radioactive emissions.

Areas affected by the quake



On 12 April 2011, the nuclear accident at Fukushima Daiichi was rated as a level 7 “Major Accident” on the International Atomic Energy Agency (IAEA), International Nuclear and Radiological Event Scale (INES). Level 7 is the most serious level on INES and is used to describe an event comprised of “A major release of radioactive material with widespread health and environmental effects requiring implementation of planned and extended countermeasures”.⁷ It turning the event into the first triple disaster ever recorded in human history.

Since the onset of the disaster, the JRCS was active on the ground by providing much needed emergency medical/psychosocial care and relief services. Over 400,000 people took shelter in schools, public facilities, and hotels alike. In May 2011, with an unprecedented amount of funds made available to help victims of the disaster, the JRCS embarked for the first time since its establishment on a large-scale recovery operation in Japanese territory.

Now, five years after the disaster, as of 10 March 2016, an estimated 171,000 people, including 96,000 from Fukushima⁸, are displaced and their future remains uncertain. The central and local governments are making the utmost efforts to develop residential land and public housing for the evacuees. Each of the prefectures of Iwate, Miyagi, and Fukushima has disclosed highly-detailed development schedules, enabling even those without housing to begin planning for their new lives.⁹

However, the pace of return is slow due to considerable delays in the construction of permanent housing. As of February 2016, in Iwate, Miyagi and Fukushima, 14,829 units were completed which represents only 50.1 per cent of the total planned unit (29,573 units) in these three prefectures.¹⁰ In the meantime, the majority of the displaced are living in temporary housing, which includes some 70,000 people still living in prefabricated housing meant for short-term accommodation¹¹.

⁵ The epicenter is 130 kilometers from Japan’s northeast Pacific coast.

⁶ National Police Agency of Japan. Emergency Disaster Countermeasures Headquarters. *Heisei 23 nen (2011 nen) Tohoku-Chiho Taiheiyo-oki Jishin no Higai-Jokyo to Keisatsu-Sochi* (Damage Situation and Police Countermeasures associated with 2011 Tohoku district - off the Pacific Ocean Earthquake), 10 March 2016,

⁷ IAEA, *Fukushima Nuclear Accident Update Log (12 April 2011, 04:45 UTC)*, IAEA Briefing on Fukushima Nuclear Accident (12 April 2011, 14:30 UTC), <<https://www.iaea.org/newscenter/news/fukushima-nuclear-accident-update-log-15>>

⁸ *Ibid.*, 1. Of 96,000 people, approximately 42,000 people are displaced to other prefectures, and 54,000 people are displaced, but still in the area of Fukushima.

⁹ *Id.*

¹⁰ Reconstruction Agency. *Higashin-Nippon-Daishinsai Hisaisha-muke Saigai-Koei-Jutaku oyobi Minkan-Jutaku-to-yo Takuchi no Kyokyu Jokyo (Heisei 28 nen 2 gatsu matsu genzai)* nitsuite (Situation of supply of public disaster housing and private residential land properties for the disaster- affected, as of 29 February 2016), The Government took legal measures, such as raising the limit of a tax deduction on a capital gain which a landowner obtains when the landowner sells his/her land to a local government, to facilitate the reconstruction.

¹¹ *Ibid.*, 2 *Hisaisha Shien* (Support to the affected people)

Among the displaced in the three most GEJET affected prefectures, Iwate, Miyagi and Fukushima, the situation is particularly complex for those from Fukushima. As of September 2015, a total of 3,352 cases had been registered as “disaster-related deaths¹²” in Iwate, Miyagi, and Fukushima which represents an increase of 213 people since 30 September 2014. Among those 213 new cases, 186 cases (87 percent) were registered in Fukushima. Fukushima holds the highest total number of “disaster-related deaths”, 1,979 cases¹³ and is the only prefecture where the disaster-related fatalities outnumber the direct GEJET disaster deaths. It shows that the prolonged impact of the nuclear disaster on the survivors

According to the Reconstruction Agency, in Fukushima, in the area except for the eastern coastal areas on the Pacific side which were afflicted by the nuclear power plant incident, reconstruction is well underway. The central government and local government are continuing decontamination efforts and combined with natural decay, the air radiation dose is definitely decreasing¹⁴.

The central government relaxed the evacuation policy since April 2014. Evacuation orders that were issued following the nuclear incident have gradually been lifted in line with the decreased dosage. For example, the orders were lifted in parts of Tamura city in April 2014, Kawauchi Village in October 2014, and Naraha town in September 2015¹⁵.

It facilitated the return of ex-residents and reconstruction of the once-abandoned towns. There are substantial number of those displaced from Fukushima express their fears of returning.

Among those areas where the evacuation order has not lifted yet, there is some progress to prepare for returning. For example, the Government allowed evacuees from Kawamata to stay overnight in their homes on a temporary basis from August 2015. Eligible for the program is evacuees from “area preparing for the lifting of the government’s evacuation order” and “a residency-restricted area”. Its program aimed at opening the way for the permanent returns for the residents to discover problems during their stays¹⁶.

Along coastal area which was afflicted by the nuclear power plant incident, reconstruction has recently started and will unavoidably require much more time¹⁷. As of 31 March, 2016, there are still 8 local towns and cities in Fukushima, have been wholly evacuating since GEJET. In many parts of them, the evacuation order of the “difficult-to-return area” was issued¹⁸. For example, in Futaba and Okuma town, approximately 95% of area of the town (based on population) was issued for the evacuation order of the difficult-to-return area¹⁹.

The central government is schedule to lift the evacuation order except for difficult-to-return area, by March 2017²⁰.

¹² *Disaster related deaths* means that fatalities caused by the indirect impact of the disaster, such as physical and psychological exhaustion and stress coming from living in temporary housing or being transferred from one place to another. It also includes the number of death caused by delayed medical treatment in the emergency phase, due to the destruction of hospitals.

¹³ Reconstruction Agency. *Higashi-Nippon-daishinsai ni okeru Shinsai-Kanren-shi no Shisha-su* (Number of Disaster-related Deaths due to the Great East Japan Earthquake), 30 September, 2015

¹⁴ Reconstruction Agency. *Recovery from the Great East Japan Earthquake, Five Years Later*, 23 February, 2016.

¹⁵ *Ibid.*, 2

¹⁶ *Ibid.*, 14

¹⁷ *Ibid.*, 14

¹⁸ Fukushima Prefectural Government. *Fukushima Revitalization Station, Hinan shiji kuiki no jyokyo*, 2016

¹⁹ Okuma town. *Okuma-cho no shokai (Introduction of Okuma town)*, web

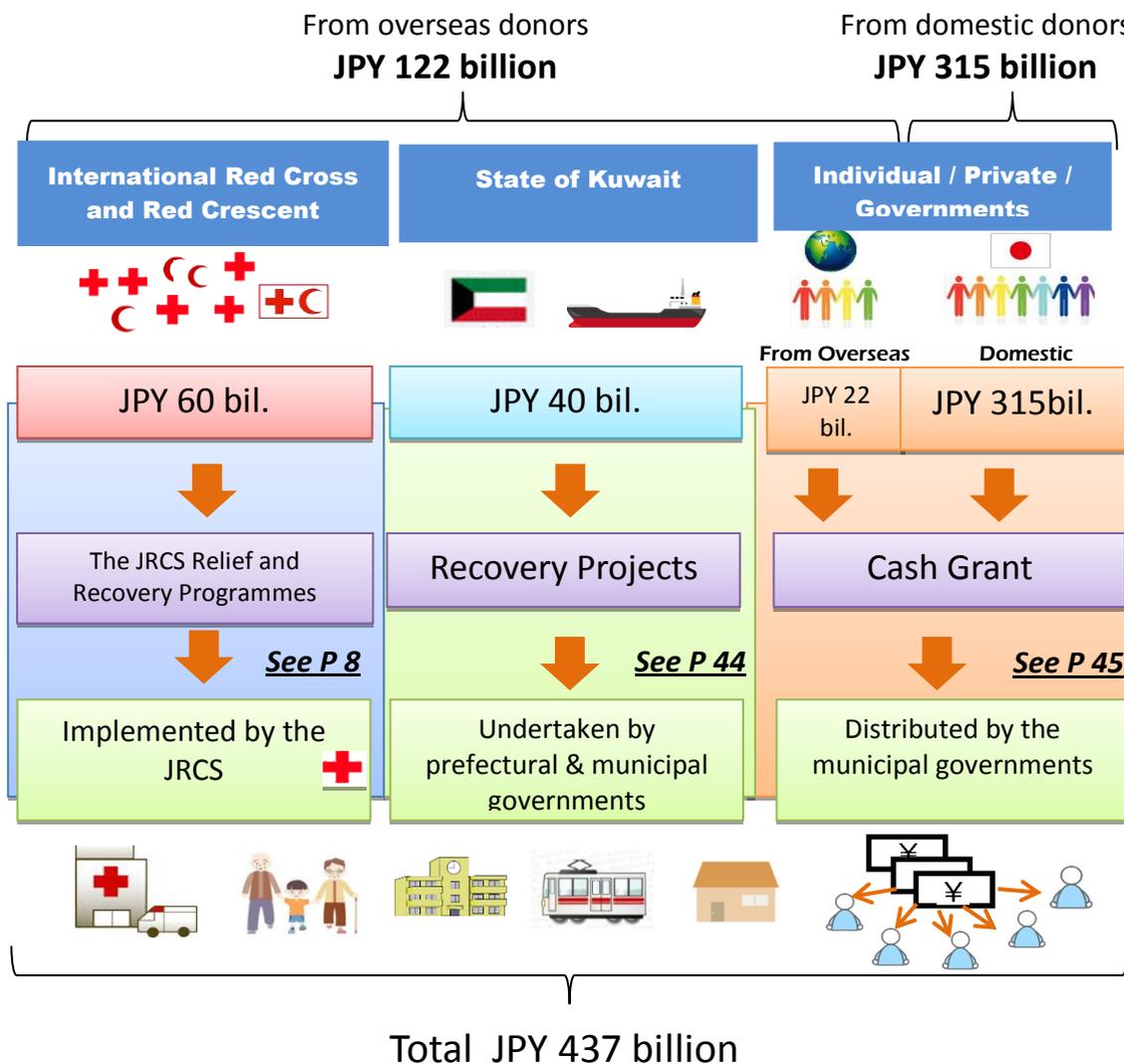
<http://www.town.okuma.fukushima.jp/content/%E5%A4%A7%E7%86%8A%E7%94%BA%E3%81%AE%E7%B4%B9%E4%BB%8B>. Futaba town, *Futaba town Machi Hito Shigoto Sosei sogo senryaku* (Futaba Town, Town, People, Work, and Comprehensive Strategy), March 2016.

²⁰ *Ibid.* 14

USE OF FUNDS

By 31 March 2016, the JRCs has received JPY 437 billion including JPY 122 billion from overseas, and they were allocated into the following four categories:

1. JPY 60 billion: Received from PNSs of the International Red Cross and Red Crescent Movement, and allocated for the JRCs Relief and Recovery Programme. At present 100 PNS have contributed to the GEJET Operation (see the following section 4 for details).
2. JPY 40 billion: Received from the State of Kuwait in the form of crude oil donation and disbursed through the JRCs to the three most GEJET affected prefectural governments²¹ in support of recovery projects on which they took the lead.
3. JPY 22 billion: Received from foreign governments, embassies, corporates and individuals, JPY 22 billion were allocated for the Cash Grant Scheme.
4. JPY 315 billion: Received from domestic donors (i.e. individuals, corporates, and other institutions), these were also allocated for the Cash Grant Scheme.



²¹ The three most GEJET affected prefectural governments are Iwate, Miyagi and Fukushima.

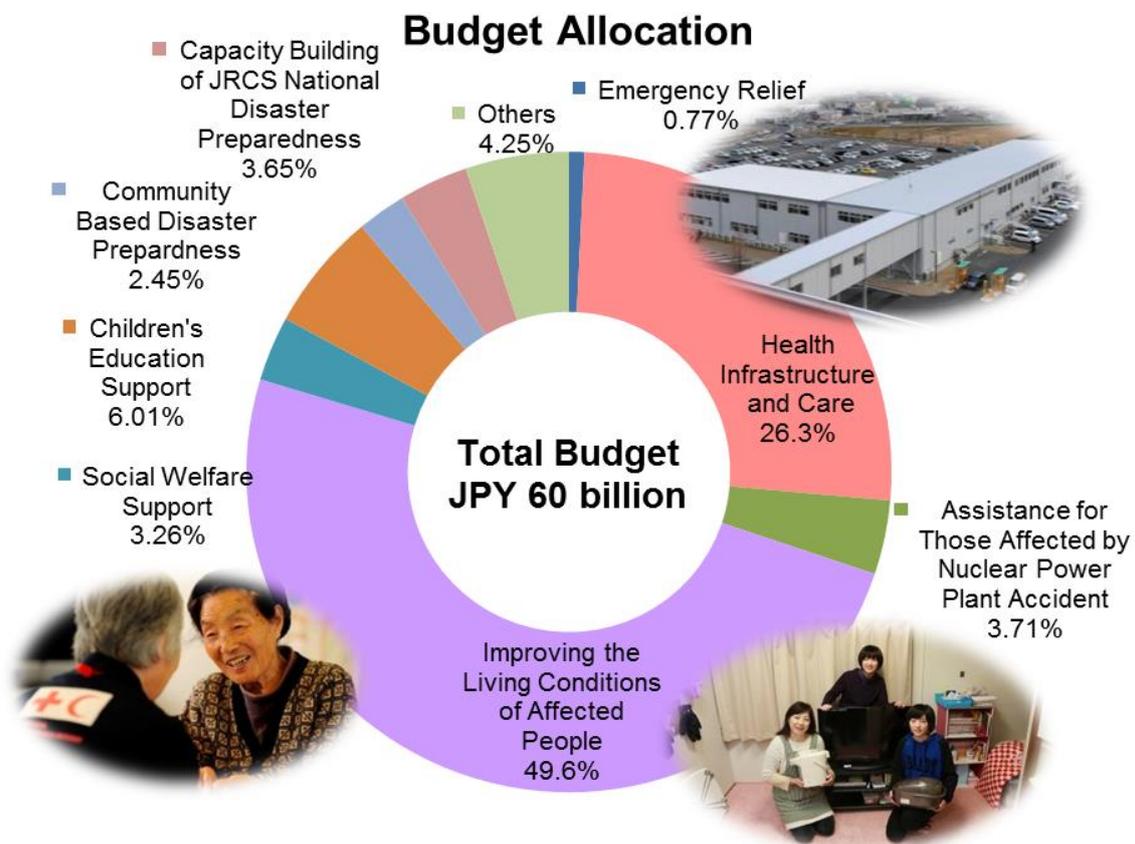
PLAN OF ACTION (PoA)

In a spirit of solidarity, PNSs and the IFRC have provided support to the JRCS GEJET operation and many projects have been implemented under the internationally endorsed Plan of Action (PoA), which primarily focused on the three most GEJET affected prefectures of Iwate, Miyagi and Fukushima. The projects have been carefully selected based on needs assessments and consultation with the municipalities and prefectures in the affected areas. The work has been conducted in close collaboration with the relevant stake holders.

On 9 May 2011, within two months of the disaster, the JRCS called the first PNS meeting in which the initial PoA was endorsed with a budget of JPY 30 billion. A revised PoA with a JPY 53 billion budget was presented at a PNS monitoring meeting on 31 October 2011 and endorsed at the second PNS meeting on 18 May 2012. Following the rapid increase in funds, the programmes have become more diverse with the total number of projects reaching 61 as of today.

The current PoA, appearing on the next page, has a budget of JPY 60 billion, covering the following eight areas of intervention.

- Emergency Relief (Programme 1 and 2)
- Health Infrastructure and Care (Programme 3 and 5)
- Assistance for those Affected by Nuclear Power Plant Accident (Programme 4)
- Improving the Living Conditions of Affected People (Programme 6)
- Social Welfare Support (Programme 7)
- Children's Education Support (Programme 8)
- Community Based Disaster Preparedness (Programme 9)
- Capacity Building of the JRCS National Disaster Preparedness (Programme 10)



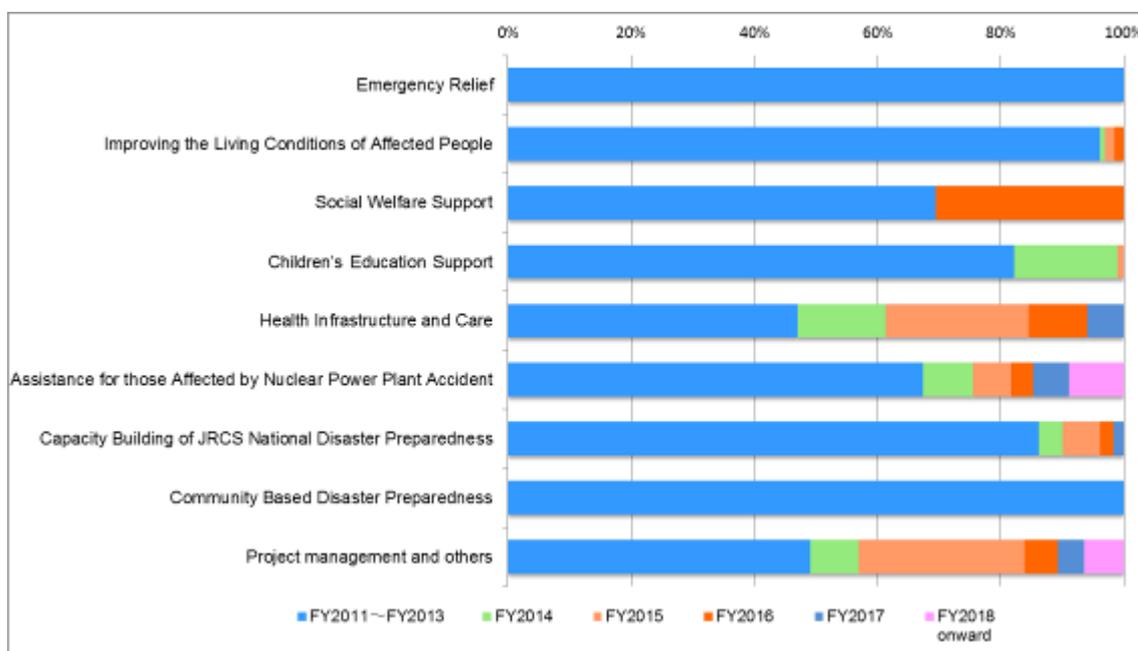
Plan of Action and Budget Allocation

Japanese Yen (JPY) in thousand

Program		[Status] CMPL: Completed / OG: Ongoing / NEW: New			Budget
No.	Name	No.	Status	Name	
1	Distribution of Emergency Relief Supplies	1-(1)	CMPL	Purchase and Replenishment of Emergency Relief Supplies	459,925
2	Emergency medical services and PSP	2-(1)	CMPL	Medical and PSP assistance	2,987
3	Regional Healthcare Support	3-(1)	CMPL	Pneumonia vaccination for the elderly	3,619,420
		3-(2)	CMPL	Provision of Air Purifiers	580
4	Assistance for nuclear power plant disaster victims	4-(1)	CMPL	Whole Body Counter and thyroid gland monitoring	1,022,838
		4-(2)	OG	Nuclear Disaster Preparedness Project	983,774
		4-(3)	CMPL	Provision of food radiation measuring equipment	222,626
		5-(1)	CMPL	Construction of a temporary night-time emergency medical centre (Ishinomaki)	108,950
5	Rehabilitation of health infrastructure	5-(2)	CMPL	Construction of a temporary hospital for secondary medical care (Ishinomaki)	715,160
		5-(3)	CMPL	Construction of a temporary hospitals as a secondary medical care (Minamisanriku)	600,220
		5-(4)	CMPL	Strengthening the disaster/emergency medical capacity of Ishinomaki RC Hospital and reconstruction of RC nursing school and emergency health training centre (Ishinomaki)	4,300,168
		5-(5)	CMPL	Construction of a hospital (Motoyoshi)	153,235
		5-(6)	CMPL	Rehabilitation of Community Medical Center (Onagawa)	1,888,181
		5-(7)	CMPL	Shizugawa permanent public hospital (Minamisanriku)	1,600,857
		5-(8)	CMPL	Social Welfare Care centre (Minamisanriku, Miyagi)	620,000
		5-(9)	OG	Construction of Fukushima Red Cross Hospital (Fukushima)	2,198,948
		6	Improving the living conditions of affected people in evacuation centres and temporary housing	6-(1)	CMPL
6-(2)	CMPL			Distribution of summer amenity items, drinking water, temporary showers, water taps, etc.	119,309
6-(3)	CMPL			Distribution of winter amenity items	97,762
6-(4)	CMPL			Community bus operations support	39,379
6-(5)	OG			Psychosocial support	26,927
6-(6)	CMPL			Distribution of six electric household appliances sets	26,968,223
6-(7)	OG			Public housing and community centres (Otsuchi, Iwate)	1,448,773
6-(8)	OG			Construction of community centres	170,285
6-(9)	OG			Nordic style walking as physical exercise	17,133
6-(10)	OG			Health and Social Class	45,020
6-(11)	OG			Home visits for evacuee's health care (Iwaki, Fukushima)	94,453
6-(12)	CMPL			Psychosocial support centre for children and youth in Iwate Medical University Hospital	137,155
6-(13)	CMPL			Mobile dental care services for elderly and physically challenged persons	56,350
6-(14)	OG			Miscellaneous	90,051
6-(15)	OG			Cash Grant Scheme	172,738
7	Social welfare support	7-(1)	CMPL	Distribution of medical/nursing beds	163,863
		7-(2)	CMPL	Distribution of items for group homes for the elderly	101,756
		7-(3)	CMPL	Provision of vehicles for social welfare institutions	687,383
		7-(4)	CMPL	Services of caretakers for the elderly	1,855
		7-(5)	OG	Social welfare centre (Kesennuma, Miyagi)	600,114
		7-(6)	CMPL	Public housing for the elderly (Shinchi, Fukushima)	300,100
		7-(7)	CMPL	Public housing for the elderly (Soma, Fukushima)	100,958
		7-(8)	CMPL	Support for social welfare centres	5,458
8	Children's education support	8-(1)	CMPL	Provision of items for school kitchen centres	292,219
		8-(2)	CMPL	Provision of goods for gymnasiums	9,065
		8-(3)	CMPL	Nursery schools and after-school clubs	980,761
		8-(4)	CMPL	Construction of after-class centre (Ofunato, Iwate)	24,033
		8-(5)	CMPL	Health and safety support	3,333
		8-(6)	CMPL	School bus operations support	202,170
		8-(7)	CMPL	Provision of school items	48,792
		8-(8)	CMPL	Training outfits for football teams	39,055
		8-(9)	CMPL	Provision of items for school clinics	23,495
		8-(10)	CMPL	Organisation of indoor playground (Smile Parks)	362,230
		8-(11)	CMPL	Summer Camps	1,103,285
		8-(12)	CMPL	Prefabricated school gymnasiums	289,288
		8-(13)	OG	Red Cross Youth and Volunteer Project	145,621
		8-(14)	CMPL	Establishment of "Children's World"	68,225
		8-(15)	CMPL	"Dream Blossom" Project	2,817
		8-(16)	OG	Miscellaneous	14,157
9	Community Based Disaster	9-(1)	CMPL	Provision of DP material and storage facilities	1,470,326
10	Capacity building of JRCS in the area of disaster management	10-(1)	CMPL	Development of disaster response capacity, tools and facilities	2,090,238
		10-(2)	OG	Disaster Preparedness Training	101,499
		10-(3)	CMPL	Mobilization of Youth Volunteers for disaster management	34,997
		10-(4)	OG	Disaster Preparedness Education Program for Junior Red Cross/Red Cross Youth	22,929
11	Other Projects	11-(1)	CMPL	AED and other necessities for volunteer centres	16,487
12	Project under formulation	12-(1)	N/A	Future potential programmed.	743,903
13	Project management and support	13-(1)	N/A	HR, consultancy, audit, evaluation, support by IFRC	1,795,880
TOTAL					60,154,425

OVERVIEW OF RELIEF AND RECOVERY OPERATION

As of March 2016, a total of JPY 54.8 billion or 91.1 per cent of the 60.2 billion budgets had been spent leaving JPY 5.3 billion to be carried over. This budget represents the donations by PNSs. The table below summarizes the expenditure and the budget allocation from 2011.



The carry-over funds have been allocated mainly for the ongoing large-scale construction projects. This includes hospitals (under Health Infrastructure and Care), social welfare centres (under Social Welfare Support), public housing and community centres (both under improving the Living Conditions). The work is foreseen to be completed in 2018. Although small in scale, projects such as psychosocial support (under Improving the Living Conditions) and youth activities (under Children's Education) will be continued until 2017 to address the persistent needs of affected populations. Nuclear-related activities will be extended until 2020 by the JRCs Nuclear Disaster Resource Center (<http://ndrc.jrc.or.jp/?lang=en>).

Starting from the next page, the goal and achievements are summarized and sorted by area of intervention, while details of the progress are available from page 25 onwards.

PROGRAMME GOAL AND ACHIEVEMENTS

Emergency Relief (Programme 1 and 2)

In the coastal area of Tohoku, hundreds of hospitals and medical clinics were destroyed or damaged, and many other effectively became inoperative due to cut of the power supply resulting from the earthquake. Meanwhile, the survivors, men and women, children and the elderly, the sick and the injured, were all seeking urgent help, creating a situation almost akin to a war-zone.

The JRCs, in accordance with its national mandate and mission, provided medical relief and psychosocial support (PSP) and distributed relief items to survivors.

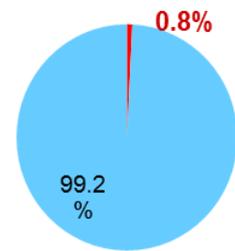
The funds were urgently allocated for deployment and activities carried out by medical/PSP teams, provision of relief items, and support to the JRCs chapters to facilitate warehousing/dispatch of relief supplies.

The JRCs deployed 896 medical teams to the affected prefectures. Out of these, 55, including 22 Disaster Medical Assistance Teams (DMAT), were deployed within the first 24 hours. The JRCs network of 92 Red Cross hospitals provided sites to receive patients. Fourteen out of 20 domestic Emergency Response Units (dERU) were mobilised. More than 87,000 patients were treated in the most affected prefectures. Additionally, more than 14,000 people received psychosocial support.

The JRCs distributed relief items such as blankets, emergency kits and sleeping sets to the survivors in evacuation centres. By mobilising its emergency stocks from JRC chapters and in seamless coordination with the transport agencies, relief items were quickly and safely delivered to the survivors.

The JRCs relief activities were closed by September 2011, as the recovery activities moved forward into the recovery phase. The balance of the budget reflects the expense for the depreciable assets acquired in the operation.

Budget Allocation



Budget: JPY 463 million

Medical teams deployed	896 teams
People treated by medical teams	87,445 people
Essential goods provided to operate evacuation centres	1,257 items
Blankets distributed	148,493 pieces
Emergency kits distributed	38,437 kits
Sleeping sets distributed	15,406 sets
People received psychosocial support	14,039 people



Loading the relief items for dispatch. ©JRCs



JRCs nurse provides care at an evacuation centre in Kamaishi, Iwate. ©JRCs

Expenditure on Emergency Relief



Budget: JPY 463 million
Spent: JPY 461 million
Balance: JPY 2 million

as of March 2016

* The balance will be spent for depreciation of the items.

Health Infrastructure and Care (Programme 3 and 5)

As an integral part of its response, the JRCS supported health service delivery to the affected population, focusing on health care and rehabilitation of health facilities.

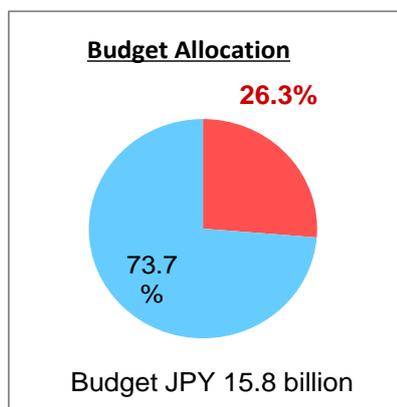
The funds were allocated to a pneumonia vaccination campaign for the elderly, improvement of service delivery for a prefectural hospital in Iwate, and strengthening community health care service in Miyagi and Fukushima through rehabilitation and (re)construction of temporary and permanent health care facilities.

Immediately following the disaster, the risk of pneumonia infection rose significantly due to the harsh living conditions and unusually cold weather. The elderly were particularly susceptible as many had to endure overcrowded indoor camp settings and numerous transfers during evacuation. The JRCS thus launched a vaccination campaign in the three most affected prefectures from October 2011 to March 2012, reaching out to 437,856 people over 70 years of age.

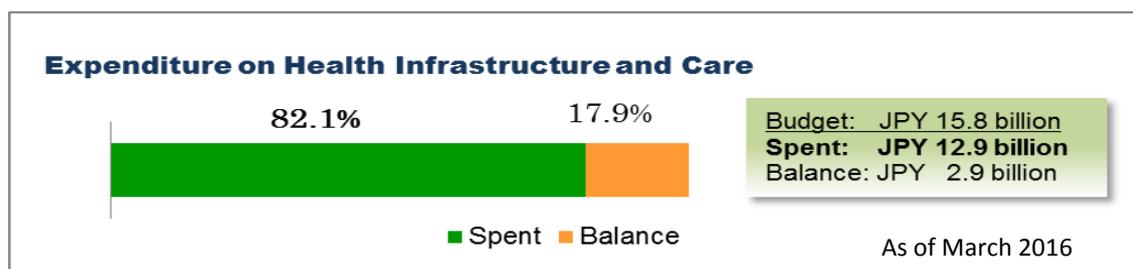
As part of strengthening community health care service, the capacity of two Red Cross hospitals will be reinforced. One is JRC Ishinomaki Hospital in Miyagi, which is the principle hospital of the JRCS' 1st regional block. It played a crucial role in delivering first aid as it was the only major hospital left standing in the middle of the devastation. It now aims to double its emergency ward capacity and to add an extended emergency medical centre with a new intensive care unit.

The other hospital is JRC Fukushima Hospital, which has been conducting radiation checks for local residents in collaboration with Fukushima Medical University. The nuclear disaster brought an unexpected change in the medical service architecture in Fukushima. Now with increased demand for services and the need to strengthen its capacity in disaster response, plans are underway to shift the hospital to a new location.

To date, there are addition to two permanent facilities: the Onagawa Community Medical Centre and Motoyoshi Hospital, construction of two permanent facilities: Minamisanriku Hospital, which was integrated Shizugawa Public Hospital with Minamisanriku Public Clinic, and Social Welfare Care Centre Minamisanriku, that was completed on 30 October 2015. Its operation began on 14 December 2015. The expected annual numbers of outpatients and inpatients are 50,000 and 31,000 respectively. The construction of Fukushima Red Cross Hospital is scheduled to start in October 2016.



Pneumonia vaccination for elderly	437,856 people
Provision of air purifiers	4 machines
Constructed or Rehabilitated health facilities	7 facilities
Construction of health facilities ongoing	1 facilities
Constructed a social welfare facility	1 facility



Assistance for those Affected by Nuclear Power Plant Accident (Programme 4)

The nuclear accident in Fukushima added a new dimension to the JRCS relief and recovery operation. The programme focus has two holds; response to the nuclear disaster in Fukushima and preparedness to the potential nuclear accidents.

The funds were allocated to cover provision of machines or equipment to monitor the radiation and Nuclear Disaster Preparedness Project through establishment of the Red Cross Nuclear Disaster Resource Centre.

The JRCS provided a Whole Body Counter (WBC) and two Thyroid Gland Monitors (TGM) to JRC Fukushima Hospital in March 2012. Along with the local authorities and Fukushima Medical University Hospital (FMUH), the Red Cross Hospital plays a key role in monitoring survivors' exposure to radiation. Seven additional WBCs were provided to municipalities to increase the coverage.

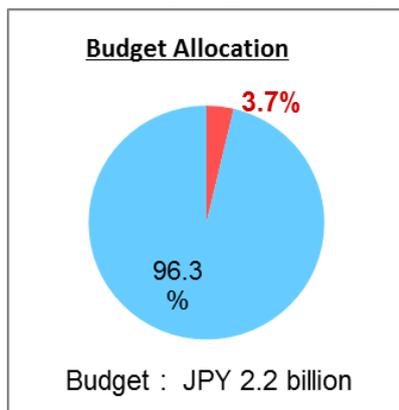
Under this project, 73 items of medical equipment were also procured for Fukushima Medical University Hospital to meet the needs of an increasing number of patients requiring medical check-ups, and 109 units of food radiation measuring equipment were provided in Fukushima and Miyagi to address the unease being felt by residents over food safety.

Since the nuclear accident in Fukushima, the JRCS acknowledged the necessity for producing guidelines to provide activities during a nuclear disaster. The Guideline Committee was established comprising of experts within and outside of the JRCS and the "Nuclear Disaster Guidelines for Preparedness, Response and Recovery" was developed in March 2015²².

During the development process of the guidelines, the Committee identified 11 challenges which need to continue to be considered. For example, as a solution for one of challenges, "Realization of the Guidelines content", it is necessary to develop manuals, etc. and to provide training to the JRCS relief team members, etc., the JRCS organized a "Nuclear Disaster Response Basic Training Session" in September and November 2015 for the JRCS relief team members to provide basic knowledge about radiation and radiation emergency medical care.

Furthermore, the First Radiation Emergency Medical Care Advisers Meeting was held in July 2015, and the second in December 2015.

During the meeting, they examined another challenge, a "Necessary arrangement to secure the security and health of the staff and family in the nuclear disaster affected area". In correspond to the above challenge, the "Guidance for security management of staff in the affected area under nuclear disaster" and a leaflet on "how to protect health of you and your family under nuclear disaster" were produced and distributed in March 2016.



WBC provided	8 units
TGM Provided	2 units
Medical equipment provided	73 items
Provision of food radiation measuring equipment	109 units
Established Nuclear Disaster Resource Centre	1 facility



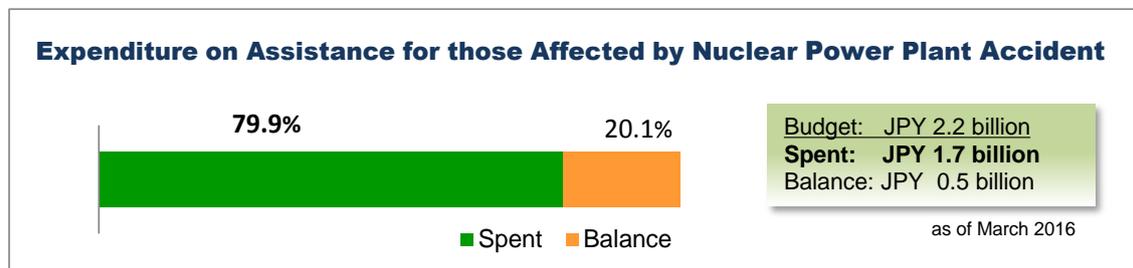
JRCS First Nuclear Disaster Response Basic Training Session (FY2015) was held at the JRCS Headquarters in September 2015. ©JRCS



²² Japanese Red Cross Society. Red Cross Nuclear Disaster Resource Center, *Challenges to be Considered Based on the Discussions at the "Guidelines for Red Cross Activities during Nuclear Disasters Committee"*, (English Translation), March 30, 2015

As a part of dissemination activities, the Fourth Red Cross Nuclear Disaster Seminar was held in March 2016 as part of the “Forever remembered” project by the JRCS.

The Fourth Reference Group Meeting on Nuclear and Radiological Emergency Preparedness was held in Berlin in October 2015. The final draft of the Nuclear and Radiological Emergency Preparedness and Response Guidelines was reviewed.



Improving the Living Conditions of Affected People (Programme 6)

The disaster sent large numbers of people fleeing to evacuation centres and temporary housings, in what was expected to be a prolonged displacement. Therefore, improving the living conditions of evacuees have consistently been a major concern of the local authorities. By complimenting the efforts of the Government, which provided basic infrastructure, the project contributed to helping the survivors picking up and restoring their lives with dignity, despite the destruction of many of their possessions.

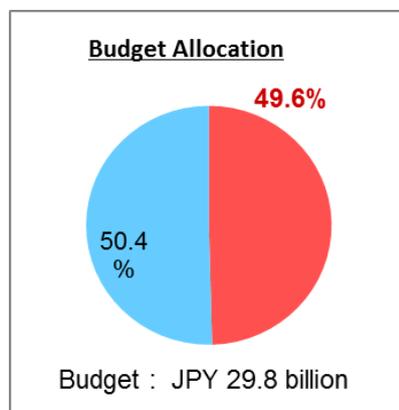
The funds were allocated to; distribution of seasonal amenities and medical reassurance kits²³; provision of electric

appliance and/or furniture to evacuation centres, temporary housings, and private households; support to the community through the construction of community centres; and special care for individuals through mobile dental care, psychosocial care, home visits and other outreach activities.

A huge operation with JPY 26.8 billion (equivalent to 45 per cent of the total GEJET budget) followed involving the distribution of a set of six essential electric house-hold appliances²⁴. In coordination with the prefectural and municipal governments, over 133,183 sets were delivered to the families who were in the temporary housings, some of whom may have to serve for a protracted period.

The coverage in terms of beneficiaries and geographical area of delivery was extended due to the revised eligibility criteria endorsed by the Government and in response to the evolving needs of the people affected by the nuclear accident in Fukushima. The distribution also involved some

of the younger generation who decided, due to the higher health risk to children, to live separately from the older generations and sometimes as far away as the south-western island of Okinawa.



Furniture and electric appliances for evacuation centres and community centres provided	38,005 items
Summer amenity provided	202,546 kits
Winter amenity items distributed	137,438 items
Medical information reassurance kits provided	57,720 sets
Electric household appliances sets distributed	133,183 sets
Community bus operations supported	3 routes in 2 towns
Items for mobile dental care services distributed	11 sets of equipment , 5 vehicles
Public household units constructed	253 units
Community centres constructed	2 facilities

²³ Reassurance (Anshin) kit” enables an individual to provide information to medical staff regarding chronic diseases, emergency contacts including the contact of family doctors, health insurance, patient’s registration card, pharmaceutical memo and the holder’s photo, for possible emergency medical interventions The kits will be especially useful for the elderly.

²⁴ It is comprised of a washing machine, a refrigerator, a TV set, a rice-cooker, a microwave and a hot water kettle.

From its initial focus on domestic supplies delivery, the programme has gradually shifted its emphasis to com-munity building and assistance to those who required special attention.

In addition to two community centres in Miyagi and Fukushima, a psychosocial support centre for children “Iwate Children’s Care Centre” located in Iwate Medical University Hospital and 254 out of the total 730 disaster recovery public housing units have been completed to date in Iwate. These days, most of the projects besides construction of disaster recovery public housing and community centres have been completed.



Completed disaster recovery public housing in Iwate Prefecture. ©JRCS

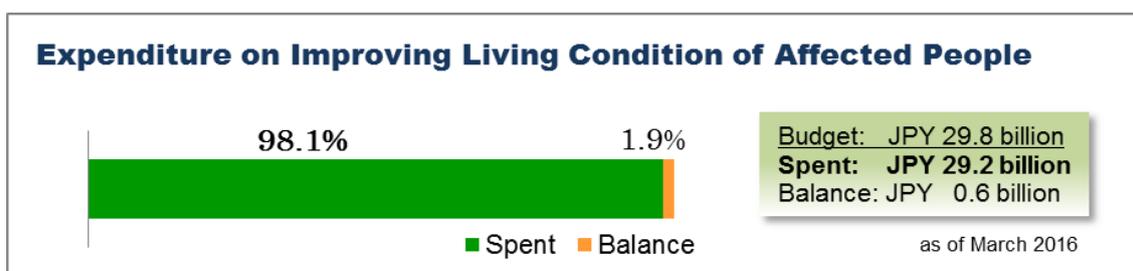
Psychosocial support is provided in combination with events like Nordic-style walking, tea parties and health and social classes to encourage participation of intended beneficiaries who may otherwise tend to stay home by themselves. The main focus for the programme has shifted to psychosocial support to those who still reside in temporary housings, as well as those who have moved to the other housing and still look forward to participating in it. In some area, residents in a community also participate as an interchange between these beneficiaries. Therefore, there are still needs for psychosocial care for them, and it will likely be required for some years to come.

By February 2016, the JRCS health care survey team had visited 9,305 evacuees (4,292 households) from Namie town where was established planned evacuation area, and wholly evacuated after GEJET. Namie town is currently divided into three areas: area being readied for the removal of the evacuation order, a residency-restricted area and a difficult-to-return area.²⁵ As of 31 March 2016, 20,879 evacuees from Namie town still wholly evacuate in Fukushima (14,442 evacuees) and other prefectures (6,437). Among those evacuate in Fukushima, 2,988 evacuees are registered to evacuate in Iwaki city²⁶.



Health and Social Class was held in Fukushima. ©JRCS

The health care team is now paying a fourth round of visits to those evacuees in Iwaki city. Simultaneously, the Namie dispensary provides health consultation to the evacuees at any time and organizes a “mother salon” to provide child rearing and development advice and daily general concerns. Evacuees expressed their gratitude to the survey team for listening to their concerns, which they could not speak to any person through consultation. This helped to alleviate their uncertainty. The central government is scheduled to lift an evacuation order except difficult-to-return area by March 2017²⁷.



²⁵ Namie Town. *Report on the end of evacuation by the committee*. March 2016. Fukushima Minpo News. *2 bus stop set up in litate village ahead of planned end to evacuation*, 21 August 2016. <http://www.fukushimaminponews.com/news.html?id=715>

²⁶ Namie Town Homepage. *Situation of the evacuation of the population of the Namie town*, 31 March 2016. <http://www.town.namie.fukushima.jp/site/shinsai/12599.html#>

²⁷ *Ibid.*,14

Social Welfare Support (Programme 7)

Given that the elderly, the group most susceptible to the effects of the disaster, accounted for over 25 per cent of the population, addressing their well-being naturally became an indispensable component of the JRCS relief and recovery operation.

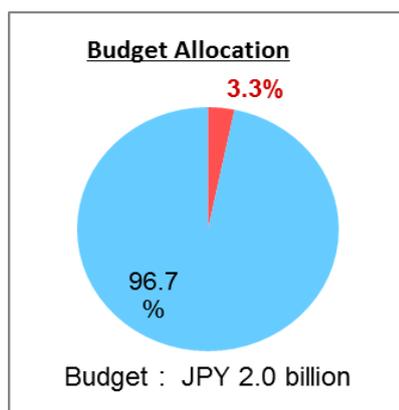
A significant amount of funds was allocated for the provision of emergency care to the elderly; strengthening service delivery through provision of items to social welfare institutions; and construction of social welfare facilities and housings for the elderly.

To meet the urgent needs of special care for the elderly, the JRCS deployed nearly 70 staff to evacuation centres in the affected prefectures and provided psychological care, meals, baths and other assistance required on the ground.

To strengthen its service delivery, the JRCS provided basic supplies to social welfare institutions in the three most affected prefectures. The JRCS was in the frontline providing critical services to the vulnerable elderly. The disaster destroyed many social welfare facilities, swept away their vehicles and equipment and placed enormous strain on their capacities. In Fukushima, many institutions were no longer able to function and had to relocate due to the entry restrictions imposed in the high radiation areas. The JRCS donated vehicles, furniture, fixtures, and nursing beds to hundreds of these welfare institutions in order to help them to resume their operations and services for needy elderly and physically challenged persons.

Construction of public housing for the elderly was also critically needed in Fukushima. These facilities, that were already completed, provide permanent housing for elderly survivors who lost their homes. They are equipped with community rooms or common laundry spaces as a measure to prevent isolation among residents.

Most projects in this programme have already been completed. The only ongoing project is rebuilding a Kesenuma Social Welfare centre in Miyagi. The JRCS has been supporting to rebuild the social welfare centre which will have multiple functions, such as a community centre that will serve parents, elderly and physically challenged persons. It will also serve as the first meeting-point for social workers in case of an emergency. The work is now scheduled to be completed in December 2016, and its operation to start around April 2017.

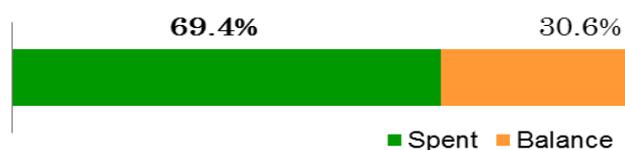


Caretakers for evacuation centres dispatched	67 staff
Nursing Beds distributed	959 beds
Group-home (home for the elderly) items distributed	2,239 items
Vehicles for social welfare institutions provided	338 vehicles
Elderly housing constructed	5 facilities
Construction of social welfare centre ongoing	1 facility



An elderly is now able to reach to the nearest social welfare centre with the special vehicle donated by JRCS. ©JRCS

Expenditure on Social Welfare Support



Budget: JPY 2.0 billion
Spent: JPY 1.4 billion
Balance: JPY 0.6 billion

as of March 2016

Children's Education Support (Programme 8)

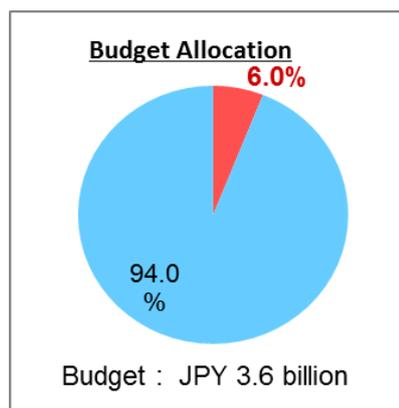
Apart from the elderly, the most vulnerable segment of the survivors was undoubtedly children and youth who lost the space and opportunity for education and social activities following the disaster. The concerns of local governments were addressed through the projects which envisioned the creation of a healthy and sound environment for the future generation in this rapidly aging Tohoku region.

The funds were allocated to cover three areas; events involving learning and socializing opportunities; provision of items and/or equipment; and establishment of facilities.

When many schools were destroyed or forced to relocate due to the triple disaster, support to the schools provided a crucial channel to reach out to the children. Numerous items such as school kitchen items, buses, clinic supplies and equipment, training outfits, electric blackboards and flashlights were provided in the most affected prefectures to help the children resume their schooling at the earliest possible time. Further support to date includes construction of three prefabricated gymnasiums, four nursery schools, two after-school clubs, and a kindergarten facility.

The summer camp project, which took nearly 5,800 children from the disaster-hit prefectures to Hokkaido, was the largest project of this programme. The camp aimed at providing children with time and space to release stress from the numerous changes brought about by the disaster. Children learned first aid and experienced various outdoor activities, with additional content of educational perspectives being provided through workshops on environmental issues, international understanding, dietary education, etc. In 2015, two sessions of the camp were organized in total with 124 participants. Another significant initiative was a mobile indoor playground "Smile Park" in Fukushima. It provided a safe space where parents could let their children play without being anxious about radiation. Given the high demand, the operation of this temporary playground was extended to two years, and until the closure in December 2013, it drew 53,538 children.

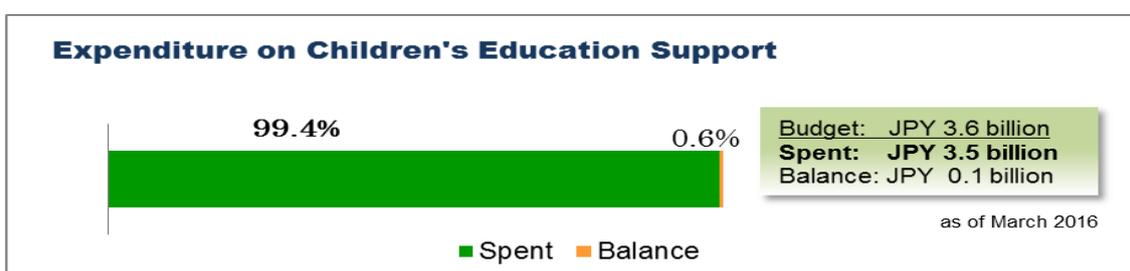
To date, most of the projects have been completed, and the Red Cross Youth and Volunteer Project is the only project which is ongoing. This project has been organized by the JRC Iwate, Miyagi, and Fukushima Chapters, which provide opportunities for younger children to release stress by participating in various activities such as overseas study tours, musical concerts and essay competitions. In 2015, overseas study tours to Thailand and Philippine were organized with 23 participants. Musical concert was held twice in Iwate with 406 participants. 35 psychosocial support activities were conducted in Fukushima with 3,277 participants.



School kitchen items provided	8,933 items
School operations supported and buses donated	14 operations 18 buses
School clinic items provided	1,799 items
Training outfits for children distributed	3,655 items
Participants of smile parks	53,538 children
Summer camps held	22 times, 5,912 children
Electric blackboards provided	16 boards
Prefabricated gymnasiums constructed	3 facilities
Nursery schools, kindergarten and after-school clubs constructed	7 facilities



Kirikiri Nursery School completed in July 2014. ©JRCS

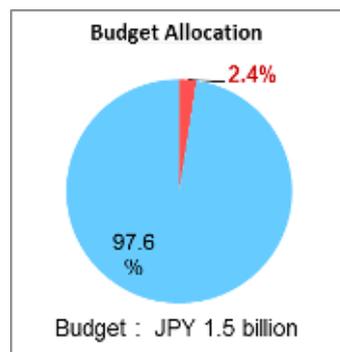


Community Based Disaster Preparedness (Programme 9)

Strengthening the capacity of municipalities in the affected areas is vital to complement the on-the-ground work of the JRCS in times of emergency.

Since Japan is a disaster-prone country, most municipalities have a good stock of emergency supplies in their warehouses. However, many of the emergency stocks in the affected area were washed away, damaged or exhausted during the disaster, leaving an urgent need for replenishment.

The JRCS supported 26 municipalities in the three most affected prefectures under this programme. Learning from the GEJET experience, 432 storage facilities were set up in strategic spots that the communities themselves identified and in which disaster preparedness materials of their choice were stored by December 2013.



Expenditure on Community Based Disaster Preparedness

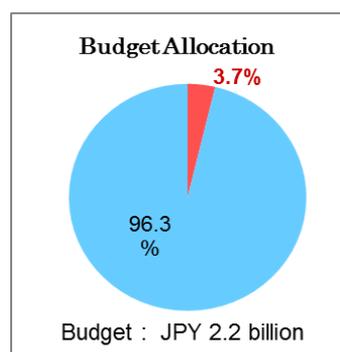


Capacity Building of JRCS National Disaster Preparedness (Programme 10)

The JRCS is working systematically to strengthen its capacity to respond to any future emergency. In parallel with assisting municipalities in increasing their preparedness, the JRCS also increased the capacity of its 47 chapters by procuring necessary supplies and equipment.

The procured emergency items were carefully prioritized and selected based on the lessons learnt from the GEJET, including prefabricated operation centres for rapid deployment, large-size tents for aid stations, special vehicles for communication and command stations, ambulances, vehicles for pharmaceutical storage, vehicles for doctors' use and personnel transportation, trucks for emergency relief delivery, cooling/heating systems for aid stations, satellite phones, portable ultrasound diagnostic devices and medical bags. Delivery was completed by November 2013.

Under this programme, three projects were added in 2014; Disaster Preparedness Training, Mobilization of Youth Volunteers for Disaster Management, and Disaster Preparedness Education Program for Junior Red Cross/Red Cross Youth. These projects focus on strengthening preparedness against disasters among the targeted age groups by utilizing the experiences learned from the GEJET and other disasters.



Under the Disaster Preparedness Training, which aims at promoting awareness, relevant knowledge and skills in the community, the JRCS Preparedness Education Promoting Committee was established in May 2015. Training for instructors for DIG was held in July 2015 to develop the capacity of instructors for DIG, and to create a guideline for producing teaching materials and seven pilot projects were held in seven prefectures, Hiroshima, Iwate, Fukuoka, Osaka, Yamaguchi, Tokyo and Okayama in 2015-2016 with a total 391 participants.



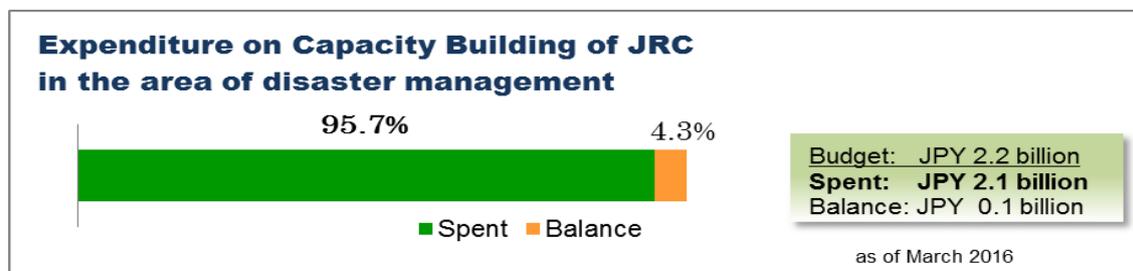
Disaster Ethnography in the Third Pilot Programme held in Fukuoka, in December 2015. © JRCS

Since 2013, the Red Cross Youth Volunteers has promoted the national common theme “Continue supportive activities for the affected people by GEJET and cope with the future disasters”.

As the FY 2015 is considered to be the last year for this theme, youth volunteers continued supportive activities.

9 groups of the Red Cross Youth and Junior Red Cross volunteers implemented the recovery support and regional disaster preparedness activities which were planned for the occasion of their visit to the affected area in 2014.

In the Disaster Preparedness Education Program for Junior Red Cross/Red Cross Youth, the targeted groups were students in junior and senior high schools. The text book, “Mamoru Inochi Hiromeru Bosai (Junior Red Cross Disaster Preparedness Education Program)” was compiled and published in 2014. It was initially printed 25,000 copies in January 2015, and reprinted 40,000 copies in June. A total 65,000 copies were delivered to schools, through the board of educations by the JRCS Chapters in each prefecture. According to the report of a survey conducted on 4,000 randomly selected schools, from primary schools in nationwide to senior high schools in January 2016, they found out that about 20% schools nationwide have already used the textbook.



COORDINATION AND PARTNERSHIPS

Two noteworthy events that were important for coordination and partnership during the reporting period include the September 2015's 4th Reference Group Meeting on Nuclear and Radiological Disaster Preparedness in Berlin and was joined by about 30 participants from 15 Red Cross Red Crescent Societies.

The final draft of the IFRC Operational Guidelines for the Nuclear and Radiological Emergency Preparedness and Response were developed based on the discussions at the previous meeting in Fukushima was confirmed.

The group member of National Societies also reconfirmed the necessity for the Red Cross's expansion of their response scope to threats from biological and chemical substances following the recent virus disease outbreak and other disasters.²⁸

*<http://ndrc.irc.or.jp/special/4rgm/?lang-en.html>



4th Reference Group Meeting on Nuclear and Radiological Disaster Preparedness in Berlin in September 2015. ©IFRC

The other JRCS sponsored side event, titling "Are we prepared for emerging risk?" was held on 4 December 2016 prior to the 20th IFRC General Assembly of the International Federation of Red Cross and Red Crescent Societies (IFRC).

The aim is to look back at the lesson learned from the nuclear disaster in Chernobyl, Fukushima and recent disasters, as well as to introduce new preparedness measures to respond to risks in global, regional and national levels. Moreover, to review the outcomes of IFRC resolution on 'preparedness to respond to the humanitarian consequences of nuclear accidents' 11/46 in 2011.

During the event, presentations were made by panellists from Japan, Belarus, IFRC secretariat, and OCHA. Also, students from a group called "The Simplest NAIIC²⁹" made a presentation on current situation in Fukushima to about 130 participants.



Presentation made by panelists from Japan, Belarus, IFRC secretariat, and OCHA in the JRCS sponsored side event. © JRCS

²⁸ IFRC. *About the Fourth Reference Group Meeting on CBRN Emergency Preparedness, Summary of Action Points, The Fourth Reference Group Meeting on CBRN Emergency Preparedness*

²⁹ The Simplest Explanation of The National Diet of Japan Fukushima Nuclear Accident Independent Investigation Commission Report

EVALUATION

The JRCS seized the opportunity to learn as many lessons as possible from its first large-scale relief and recovery operation carried out on the national stage. The JRCS was also keen to disseminate these lessons so as to contribute to the institutional development of the entire Movement for future disaster response, particularly in high-income countries. To this end, the JRCS, jointly with IFRC, commissioned independent experts to carry out two evaluations; one for relief activities during the first six months of operation; and the other for recovery activities during the first two years of operation.

Independent Evaluation Report (Relief)

Preparing for and Responding to Large Scale Disasters in High-Income Countries, Findings and Lessons Learned from the Japanese Red Cross Society's Response to the Great East Japan Earthquake and Tsunami; 11 January 2012

http://www.ifrc.org/docs/Evaluations/Evaluations_per_cent202012/AsiaPacific/JPTsunamiEarthquake12_report.pdf

Independent Evaluation Report (Recovery)

Evaluation of the JRCS and IFRC Recovery and Rehabilitation Interventions After the Great East Japan Earthquake and Tsunami of 11 March 2011; September 2013

http://www.jrc.or.jp/vcms_lf/JPTsunamiEarthquakeEvaluationSEP2013.pdf

The JRCS has been striving to follow the various recommendations which have been made. In response to the first independent evaluation, the JRCS has already taken steps such as strengthening external relations with other stakeholders, formulating guidelines for nuclear disaster response, building better capacity within the JRCS, and strengthening media relations and communications. The JRCS/IFRC management response to the recommendations on the first evaluation report is available online.

JRCS Management Response to the Independent Evaluation Report

https://www.ifrc.org/docs/Evaluations/Evaluations_per_cent202012/AsiaPacific/JPEarthquakeTsunami12_management_per_cent20response.pdf

To supplement the above evaluations, the JRCS also commissioned the Japan Research Institute Ltd (JRI) to carry out a third party evaluation for the first two years of operation. Given that most of the projects have been carried over into a third year, an additional evaluation was not undertaken for 2013.

Third-Party Evaluation Report for FY2011

Summary Report, Third Party Evaluation of the Great East Japan Earthquake Recovery Task Force (FY2011 Project); November 30, 2012

http://www.jrc.or.jp/vcms_lf/Third_Party_Evaluation_2011.pdf

Third-Party Evaluation Report for FY2012

Summary Report, Third-party Evaluation of The Great East Japan Earthquake and Tsunami Recovery Task Force (FY2012 Activities); October 31, 2013

http://www.jrc.or.jp/vcms_lf/Third_Party_Evaluation_2012.pdf

FINANCIAL AUDIT

With JPY 60 billion in financial resources at hand and the JPY 40 billion disbursed from the sale of donated oil, the GEJET operation became the Movement's largest disaster response undertaken ever in a single country. To guarantee utmost transparency and accountability to its donors, the JRCS adhered rigorously to international standards of auditing. Ernst and Young ShinNihon LLC completed an audit of the GEJET international donations received until 31 March 2015. The reports have been uploaded on the JRCS Website and shared for public perusal.

Independent Auditor's Report for 2011

Statement of Income and Expenditure of the Japanese Red Cross Society for the Great East Japan Earthquake and Tsunami International Donation from 16 March 2011 to 31 March 2012

http://www.jrc.or.jp/vcms/lf/jrc_statement_income_expenditure.pdf

Independent Auditor's Report for 2012

Statement of Income and Expenditure of the Japanese Red Cross Society for the Great East Japan Earthquake and Tsunami International Donation from 1 April 2012 to 31 March 2013

http://www.jrc.or.jp/vcms/lf/2012_kyuenkin_auditors_report.pdf

Independent Auditor's Report for 2013

Statement of Income and Expenditure of the Japanese Red Cross Society for the Great East Japan Earthquake and Tsunami International Donation from 1 April 2013 to 31 March 2014

http://www.jrc.or.jp/vcms/lf/2013_kyuenkin_auditors_report1.pdf

Independent Auditor's Report for 2014

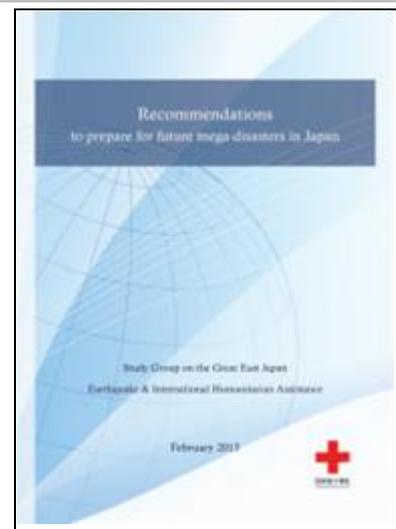
Statement of Income and Expenditure of the Japanese Red Cross Society for the Great East Japan Earthquake and Tsunami International Donation from 1 April 2014 to 31 March 2015

http://www.jrc.or.jp/eq-japan2011/pdf/2014_kyuenkin_auditors_report.pdf

RECOMMENDATION PAPER

A recommendation paper, "**Recommendations to prepare for future mega-disasters in Japan,**" is the outcome of the Study Group on the Great East Japan Earthquake and International Humanitarian Assistance. Two well-experienced JRCS staff members were part of the study group. The English version of the paper was published in February 2015 and widely shared among the humanitarian community. The JRCS, through JRC Institute for Humanitarian Studies, which acts as the secretariat of the Study Group, was actively involved in the paper's compilation. The Japanese version of the paper was published in March 2014.

The GEJET taught us many lessons that better prepare us for future mega-disasters in the Japanese context, and the lessons are also useful for the disaster preparedness of any industrialized country. The full version is available at the link below.



<http://reliefweb.int/report/japan/recommendations-prepare-future-mega-disasters-japan-enja>

COMMUNICATION, MEDIA AND PUBLIC INFORMATION

On 11 March 2016, mark the five year anniversary since the GEJET, the JRCS has developed a remembrance campaign with a, Japanese slogan that's translated as "Forever remembered". The 5th year GEJET message has focused on bringing about awareness of collaboration and disaster preparedness among the general public, so as not to let the lessons of GEJET fade away with the passage of time.

The fifth anniversary poster, panel, flag, postcard, leaflet were produced. The panels were displayed at the JRCS Chapter, hospital, blood center, and the newspaper ads appeared in one national newspaper and local papers.

Since 2014, in the collaboration with All Nippon Airways, various promotional opportunities have been implemented to arouse public interest in GEJET, such as advertisements on paper cups in domestic flights and a supportive event in the affected area.

In collaboration with ITO EN LTD., the JRCS received a free endorsement attaching JRCS project stickers on approximately 2,500 bottling cars, and staff badges, and posting posters in approximately 600 shops of Tully's Coffee Japan Co., Ltd., which is the group company of ITO EN LTD. In a business partnership with ITO EN LTD., the JRCS collaborated a product development of an original drinking water bottle which has been used in the JRCS chapters, facilities and events etc. throughout the country.

In collaboration with AEON Mall Co., Ltd, a fifth anniversary event and panel exhibitions were held at the Morioka-Minami AEON Mall, Iwate in March 2016.

The JRCS, also took an opportunity to provide an update of the progress of the GEJET operation and the status of Fukushima to the international community, such as the side event of IFRC General Assembly sponsored by the JRCS - How should we prepare for CBRN emergencies?, which took place on December 4, 2015.

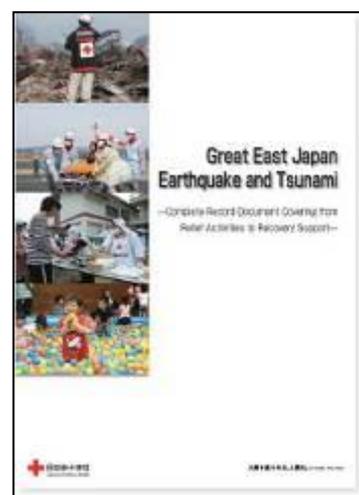
Updates have been published throughout the year through the JRCS homepage, Facebook, and monthly newsletter to keep the donors and other interested parties abreast of the latest progress.

The digital version of "Great East Japan Earthquake and Tsunami – Complete Record Documents Covering from Relief Activities to Recovery Support –" has been released on the Red Cross Nuclear Disaster Resource Center Digital Archives. The record includes the JRCS activities and data regarding the disaster (note: as of March 31, 2013, for financial data) from the earthquake day through December 31, 2012. The record is available for downloading from the links below:

<http://ndrc.jrc.or.jp/notice/20150428/?lang=en>



JRCS Logo for the brochures issued at the occasion of the JRCS logo for the 5th anniversary since the GEJET. © JRCS



PROGRESS TO DATE (until March 2016):³⁰

1 Distribution of Emergency Relief Supplies -- **PROGRAMME COMPLETED**

Purchase and replenishment of emergency relief supplies -- COMPLETED

Immediately after the disaster, due to the scale of the needs, the JRCs released emergency stocks from its national network of warehouses. The transport was facilitated by the logistic agencies with which the JRCs had stand-by agreements. Over 148,000 blankets, 38,000 emergency kits and 15,000 sleeping sets were delivered and distributed to evacuees to alleviate their suffering. Stocks were later replenished and stored in the warehouses for future use, along with an additional 1,257 units of items that replaced stocks that had been either damaged or washed away from the warehouses in the three most affected prefectures.



Blanket

Prefectures delivered	Amount delivered
Iwate	1,000
Miyagi	88,490
Fukushima	16,020
Others	42,983
TOTAL	148,493



Emergency Kit

Prefectures delivered	Amount delivered
Iwate	10,920
Miyagi	16,398
Fukushima	1,500
Others	9,619
TOTAL	38,437



Sleeping Set

Prefectures delivered	Amount delivered
Iwate	5,000
Miyagi	6,000
Fukushima	1,500
Others	2,906
TOTAL	15,406

Additional items replenished	Amount (Units)	Distributed Prefecture
Partitions for evacuation centres	525	Iwate
Large pots for soup kitchens	66	Iwate, Miyagi
Vehicle for emergency relief	1	Miyagi
Tents for setting up local HQ and soup kitchen stands	37	Miyagi
Uniforms for the volunteers	597	Miyagi
Storage unit for relief goods	1	Miyagi
Large rice cooker	30	Fukushima

2 Emergency Medical Services and the Psychosocial Support Programme (PSP) -- **PROGRAMME COMPLETED**

Medical and PSP assistance (Iwate, Miyagi, Fukushima, and Ibaraki) -- COMPLETED

In the first six months of operation after the disaster, 896 medical teams were dispatched and attended to 87,445 survivors throughout the three worst affected prefectures and in neighbouring Ibaraki prefecture. Psychosocial support was also provided to 14,039 survivors. At the request of the Government, the JRCs also dispatched medical and PSP teams to Fukushima to cater to the special needs of evacuees returning from brief authorized visits to their homes in areas restricted by high radioactive contamination.

³⁰ The completion of a project in the narrative report as the time when distributions, construction, and all related activities have ended, and does not necessarily represent the completion of all financial settlements.

3. Regional Healthcare Support -- PROGRAMME COMPLETED

3.1 Pneumonia vaccination for the elderly -- COMPLETED

After the disaster, the risk of infection rose dramatically due to poor living conditions and harsh weather. The elderly were particularly susceptible as many had to endure over-crowded camp living conditions and numerous transfers during evacuation. In response to reports of increased number of cases of infections, the JRCS launched a vaccination campaign for elderly people 70 years or older in the three most affected prefectures. The campaign started on 15 October 2011 and was completed in March 2012, concurrently with the end of the winter season. The total number of beneficiaries was 437,856, with the breakdown as follows:

Pneumonia vaccination	No. of people vaccinated
Iwate	125,711
Miyagi	132,251
Fukushima	179,894
TOTAL	437,856

3.2 Provision of air purifiers (Iwate) -- COMPLETED

A prefabricated hospital was constructed on the location where the prefectural hospital in Iwate used to stand. Dust rising from unpaved roads surrounding the temporary facility for in- and out-patients caused unacceptable levels of air pollution, and in April 2012 The JRCS provided four air purifiers to improve the air quality inside the facility.

4. Assistance for Nuclear Power Plant Disaster Victims

4.1 Whole Body Counter and thyroid gland monitoring (Fukushima) -- COMPLETED

To contribute to the health control scheme carried out in Fukushima, one Whole Body Counter (WBC) which can examine the amount of radiation for 30 people per day on average and two Thyroid Gland Monitors were provided to Fukushima Red Cross Hospital in March 2012. An additional seven WBCs, two of which were mobile, were also provided in August 2013 to municipalities and the prefectural government in Fukushima. The mobile units can be used in schools in order to provide targeted populations, especially children, with easier and more frequent access to WBC examination. Under this project, 73 items of medical equipment were also procured for Fukushima Medical University Hospital to meet the needs of an increasing number of patients requiring medical check-ups, including evacuees in Fukushima City.

4.2 Nuclear disaster preparedness project

4.2.1 Nuclear Disaster Guidelines for Preparedness, Response and Recovery

Based on the experiences and relief activities following the Fukushima Daiichi Nuclear Power Plant accident caused by the GEJET, the JRCS started to develop these guidelines in 2013. The guidelines are intended for internal use and as a reference for other Red Cross and Red Crescent Societies in case of possible future nuclear disasters, as well as for other humanitarian organizations around the world.

In order to make effective, practical and objective guidelines, a guideline committee was formed to gather opinions from both internal and external sources. Four committee meetings were held, and the guidelines, consisting of eight chapters in 23 pages, were finalized and established on 31 March 2015.

Since the guidelines establishment, the JRCS has made some changes in wording and added explanations, and the revised guidelines was issued on 31 March 2016.

Simultaneously, the "Annotations to the Nuclear Disaster Guidelines for Preparedness, Response and Recovery" was produced. During the development process of the guidelines, the Committee identified 11 challenges which the JRCS is planning to discuss with related organizations and departments within and outside of the JRCS to find solutions and revise the guidelines

accordingly³¹ as follows:

- Realization of the Guidelines content;
- Support for community-based nuclear disaster preparedness;
- Collaboration with public authorities and specialized organizations, etc. during the initial phase of a nuclear disaster;
- Communication during a nuclear disaster;
- Response to people requiring special consideration;
- Efforts for securing the safety of the JRCs responders;
- Assistance to affected populations, etc., who temporarily have to stay in evacuation order areas;
- Evacuation, etc., of the JRCs facilities;
- Assistance to affected populations evacuated to non-affected prefectures;
- Recovery activities;
- Assistance to Sister Red Cross and Red Crescent Societies.

So far, the JRCs took actions for the following 2 challenges.

- Realization of the Guidelines content;

To realize the course set out in the Guidelines, it is necessary to develop manuals, etc., and provide training to the JRCs relief team members, etc.³²The JRCs also needs to be continuously prepared for nuclear disasters and continue its mid- and long-term activities. In addition, the JRCs is required to enhance cooperation with external organizations specialized in nuclear disaster response, as well as within the JRCs³³. This resulted in leading the “JRCs Nuclear Disaster Response Basic Training Session” in September, and November 2015.

- Efforts for securing the safety of the JRCs responders;

In order to secure the safety of the JRCs responders during a nuclear disaster, it is important to understand the conditions in affected areas in a timely manner, to consult with specialists who have expertise and receive their advice in responding to nuclear disasters. Thus, it is necessary to improve the knowledge and skills of the JRCs personnel including leaders of JRC facilities, radiation emergency medical care advisor and the JRCs relief team members. Strengthening cooperation among related personnel will also need to continue.³⁴

These actions taken resulted in producing and distributing two kinds of manuals, “Instruction manual of the security management of staff in the affected area under Nuclear Disaster”, and a pocket leaflet “To protect the health of you and your family under Nuclear Disaster”.

The Red Cross Nuclear Disaster Resource Center HP uploaded the Nuclear Disaster Guidelines for Preparedness, Response and Recovery in English and is available at <http://ndrc.jrc.or.jp/infolib/cont/01/G0000001nrcarchive/000/072/000072662.pdf>

4.2.2 Manual for Relief Activities under Nuclear Disasters

The manual which was published in May 2013, defined the limit of the cumulative dose of radiation, code of conduct, and safety standards for the Relief Team. The revised manual was issued in March 2016.

³¹ JRCs. Red Cross Nuclear Disaster Resource Center. *Challenges to be considered based on the Discussions at the “Guidelines for Red Cross Activities during Nuclear Disasters Committee”*, March 30, 2015.

³² *Ibid.*

³³ *Ibid.* 31

³⁴ *Ibid.* 31

4.2.3 Digital Archives

Through the Red Cross Nuclear Disaster Resource Centre (“NDRC”) Digital Archives, the JRCS continues to disseminate information on nuclear disasters and the situation in the affected areas. In 2015, the NDRC posted 1,661 information pieces on the Digital Archives as well as 378 portal links. In addition, three special pieces have been released to the public to help them understand the contents of the archives.

4.2.4 Radiation Emergency Medical Care Advisers Meeting

Radiation Emergency Medical Care Advisers members are comprised of a radiological expert (physician) and a radiological support member (radiological technologist) from the JRCS hospitals in Hiroshima, Nagasaki, and Fukushima and from the JRCS appointed Radiation Emergency medical facilities in a prefecture where the Nuclear Power Plant is located. Their duties are advising the Local Chapter Disaster Control Headquarters and Disaster Control National Headquarters to determine policy activities and manage the relief team members` level of radiation exposures.

The First Radiation Emergency Medical Care Advisers Meeting was held in 22 to 23 July 2015 where the construction of the JRCS nuclear disaster relief system was discussed. The second meeting was held in 3 to 4 December 2015 where they discussed: how to apply the security standard for the continuous relief activities by assuring the security of members in the affected area, response to evacuation of the JRCS facilities, and exchanged opinions on how to contribute to international society. In addition, they discussed the revised content of Manual for Relief Activities under Nuclear Disasters, and supporting activities to the JRCS Nuclear Disaster Response Basic Training Session, in which to be held by each JRCS area zone in FY 2016.



JRCS First Radiation Emergency Medical Care Advisers Meeting was held in July 2015. ©JRCS

4.2.5 Nuclear Disaster Response Basic Training Session

Nuclear Disaster Response Basic Training Session that was started in FY 2014 is one of the efforts to strengthen the nuclear disaster response based on the lessons learned from the GEJET. It is addressing physicians, radiological technicians, nurses, administrative staff from the JRCS hospitals, and the JRCS chapter staff. The JRCS organized two sessions of “Nuclear Disaster Response Basic Training Sessions” on 3 September 2014 and on 6 November 2015. They covered several lectures, such as the Nuclear Disaster Guidelines for Preparedness, Response and Recovery, basic knowledge of radiation protection during nuclear disasters relief activities, and roles of the radiation emergency medical care advisor. In addition, workshops on the radiation protective equipment and group case study were delivered to the participants.



JRCS First Nuclear Disaster Response Basic Training Session in September 2015. ©JRCS

4.2.6 The Fourth Reference Group Meeting on Nuclear and Radiological Emergency Preparedness

The Fourth Reference Group Meeting on Nuclear and Radiological Emergency Preparedness was held in Berlin from 27 to 30 October 2015 with about 30 members participated from 15 RCRC Societies.³⁵ During this meeting, they reviewed the final draft of the Nuclear and Radiological Emergency Preparedness and Response Guidelines. In addition, the member of National Societies reported on the recent infectious disease outbreak and disaster occurrence, disaster preparedness to respond to emergencies (chemical, biological, radiological, and nuclear substances), and shared information about legal arrangement.

³⁵JRCS. Red Cross Nuclear Disaster Resource Center. *The Fourth Reference Group Meeting on CBRN Emergency Preparedness*. <http://ndrc.jrc.or.jp/special/4rgm/?lang=en>

4.2.7 Side event of IFRC 20th IFRC General Assembly

The JRCS sponsored side event “Are we prepared for emerging risk?” was held on 4 December 2015 prior to the 20th IFRC General Assembly of the International Federation of Red Cross and Red Crescent Societies (IFRC). The aim is to look back the lesson learned from the nuclear disaster in Chernobyl, Fukushima and recent disasters, to introduce new preparedness measures to respond these risks in global, regional and national level, to introduce the outcomes of IFRC resolution on ‘preparedness to respond to the humanitarian consequences of nuclear accidents’ 11/46 in 2011.

Presentation was made by high school and university students of Fukushima and Tokyo who are members of a group of “The Simplest NAIC³⁶”, as well as panelists, representative from the Belarus Red Cross Society, the JRCS and IFRC. About 130 participants in the IFRC General Assembly joined this side event.³⁷

4.2.8 Fourth Red Cross Nuclear Disaster Seminar

Marking the five years anniversary of the GEJET, the Fourth Red Cross Nuclear Disaster Seminars was held in March 2016 as part of the “Forever remembered” project by the JRCS.

The seminar provided the opportunity for participants to explore the concept of “what can we do towards the future” by learning about the current status of Fukushima through lectures and workshops.



Fourth Red Cross Nuclear Disaster Seminar was held in March 2016 ©JRCS

4.3 Provision of food radiation measuring equipment -- COMPLETED

Because of growing concerns about radiation in food, radiation measuring equipment was urgently needed, especially in Fukushima. Three cities/villages in Fukushima (Fukushima, Nihonmatsu and Kawauchi) received a total of 106 units of equipment in 65 locations. In Miyagi, three units were provided in three locations. The distribution was completed in May 2012.

5. Rehabilitation of Health Infrastructure

5.1 Construction of a temporary night-time emergency medical centre (Ishinomaki, Miyagi) -- COMPLETED

An emergency night-time medical centre in Ishinomaki City, which used to accommodate approximately 15,000 patients annually, was damaged by the tsunami. The centre reopened on 1 December 2011 with capacity to provide full out-patient care in the fields of internal medicine, trauma and paediatrics.

5.2 Construction of a temporary hospital for secondary medical care (Ishinomaki, Miyagi) -- COMPLETED

Construction of a temporary 50-bed facility provided primary and secondary medical services, allowing Ishinomaki Red Cross Hospital to focus on tertiary medical care. With a rehabilitation room, an administrative office and disaster relief item storage, the newly-constructed prefabricated building, which is an annex to the Ishinomaki Red Cross Hospital, began receiving patients on 5 March 2012 and has been in operation since.

5.3 Construction of a temporary hospital for secondary medical care (Minamisanriku, Miyagi) -- COMPLETED

Minamisanriku, once with a population of 17,815, was left with 13,991 people after the disaster. This was caused by a high number of deaths and cases of missing persons as well as by migration to other parts of Japan. In April 2012, the temporary hospital for secondary medical care in Minamisanriku replaced the make-shift clinics in which the Israeli medical team had been providing medical services since immediately after the disaster. This building was used until the

³⁶ *Ibid.*,4.

³⁷ JRCS.Red Cross Nuclear Disaster Resource Center Digital archive. *A side event of IFRC General Assembly sponsored by the JRCS - How should we prepare for CBRN emergencies?*, 21 December 2015

permanent city hospital was rebuilt (see below 5.7). The facility consists of nine out-patient departments including internal medicine, trauma, orthopaedics and paediatrics.

5.4 Strengthening of the disaster/emergency medical capacity of Japanese Red Cross Ishinomaki Hospital and reconstruction of the destroyed Japanese Red Cross Ishinomaki School of Nursing and Disaster Medical Training Centre (Ishinomaki, Miyagi) -- COMPLETED

Given the loss of medical facilities within the Ishinomaki region, the Japanese Red Cross` Ishinomaki Hospital, which stood a sufficient distance from the sea and was equipped with a heliport, has been playing a crucial role in providing medical services to a population of 220,000 people. The hospital aimed to double its emergency ward capacity and to add an extended emergency medical centre with a new intensive care unit and advanced medical technology in the newly constructing annex. It also had planned to establish a Disaster Medical Training Centre for disaster response medical teams, and to rebuild the destroyed Japanese Red Cross Ishinomaki School of Nursing in the same building. The establishment of Disaster Medical Training Centre was completed in March 2015 and started operations in May 2015. Construction of the expanded annex building for which the JRCS also supports was completed in August 2015.

5.5 Construction of a hospital (Motoyoshi, Miyagi) -- COMPLETED

The severely damaged hospital in Motoyoshi area, which covers Kesenuma and Minamisanriku, was used to treat 21,000 patients per year. The JRCS supported part of the reconstruction of the facilities, including staff residences and exterior construction. The work was completed in March 2013. In addition, the JRCS provided 20 hospital beds, blood-pressure gauges, cardiograph equipment and other medical items which required replacement due to the loss and/or damaged by the tsunami.

5.6 Rehabilitation of Community Medical Centre (Onagawa, Miyagi) -- COMPLETED

Prior to the devastation, Onagawa used have 10,000 inhabitants. The disaster took the lives of approximately seven percent of its population. Although the hospital stood 16 meters above sea level, the first floor was severely damaged by the tsunami. The rehabilitation and reconstruction of the hospital included plans, which were in place prior to the devastation, specifically to provide medical services for the aging population by strengthening home services. The new building included a group home for elderly people who were unable to live in the prefabricated houses provided by the government. The facility was opened in April 2012. The centre was equipped with 19 beds for general care department and 100 beds for the elderly healthcare facility.



Minamisanriku Hospital was completed in October 2015. © JRCS

5.7 Construction of Minamisanriku Hospital (formerly named "Shizugawa Public Hospital") (Minamisanriku, Miyagi) -- COMPLETED

Shizugawa Public Hospital in Minamisanriku was the only public medical facility for the local population of 15,000, until it was destroyed by the tsunami. Meanwhile, a prefabricated temporary Minamisanriku Public Clinic that was built by the JRCS in March 2012 provided a secondary medical care for the people of the municipality (see above 5.3).

A basic construction plan to rehabilitate medical facilities was finalised by the municipality of Minamisanriku in March 2013. The plan aimed to build a permanent hospital, Minamisanriku Hospital, by integrating the Shizugawa Public Hospital with the temporary Minamisanriku Public Clinic that is resilient to future disasters with a quake-absorbing structure, and emergency water and power supply systems. Construction of the hospital was started in April 2014 and completed in 30 October 2015. Completion ceremony was held on 25 November 2015. Operation at the new hospital started from 14 December 2015. There are ten departments, which is as same as the former Shizugawa Public Hospital. The expected decrease of the population number in the future has also decreased the number of beds to 90, which are 36 beds less than the former Shizugawa Public Hospital. About 50,000 out-patients and 31,000 in-patients per year are expected.

5.8 Construction of Health and Social Welfare Centre Minamisanriku (Formerly named "Social Welfare Care Centre") (Minamisanriku, Miyagi) -- COMPLETED

In response to the request of the municipality of Minamisanriku, the JRCS supported the construction of a health and social welfare centre that was destroyed by the tsunami. Construction of the health and social welfare centre was completed in October 2015, and the operation started from 14 December 2015. It is adjoined with the newly built Minamisairku Hospital (see above 5.7). The centre plays a key role as multi-functional facility, including health care, regional comprehensive support, child support, support for the physically challenged, and the Social welfare council. The centre construction is completed, it will be able to provide housing, health, nursing care, and life support as a whole and it will serve as a comprehensive care system for the regional area.

5.9 Construction of Japanese Red Cross Fukushima Hospital (Fukushima, Fukushima)

The nuclear disaster brought a substantial change in the context of medical service delivery in Fukushima. The evacuees and residents, especially in northern and central areas of the prefecture, were forced to live with anxieties over radiation exposure for a prolonged time period. Under these circumstances, JRC Fukushima Chapter, upon receiving the request from the prefectural government, began providing radiation checks to Fukushima residents in collaboration with Fukushima Medical University. This has reinforced the necessity of the delivery of medical service (especially radiation checks), for the people in the coastal area, and enhance its capacity to respond to this emerging medical needs. In order to fulfil this, construction of the new JRC Fukushima Hospital was planned in a new location. Due to the modification of the basic design phase in order to reduce the cost of the construction project, construction is scheduled to start in October 2016 and finish by August 2018. The hospital is planning to be operational from January 2019. Content of Modification is as follows:

- The construction fee becomes JPY 9,850,629,000.
- Postponed the introduction of the supply system of nature resources for energy at the time of hospital opening.
- The modified design for special sickbeds which enables to make change when needed.
- Due to the expansion of the surrounding street, the land area to be expanded was donated to the city for a city street, and the parking capacity was modified from 920 to 756.
- The number of beds was reduced from 323 to 288 through consideration of the health facilities in the same region.
- Cardiovascular surgery department was divided into two separate departments, vascular surgery and cardiac surgery.
- The department name was modified from neuropsychiatry to psychiatric. The new department of psychosomatic medicine is established.
- The building structure was modified from reinforced concrete nine-story building to steel-frame structure seven-story building to reduce the project cost.

6. Improving the Living Conditions of Affected People

6.1 Installation of electric appliances and other items at large-scale evacuation centres and temporary housing community centres (Iwate, Miyagi, Fukushima) -COMPLETED

Immediately after the disaster, electric appliances such as TV sets, large fans, and washing machines were delivered to 29 large-scale evacuation centres (i.e. in local school gymnasiums and community centres). After the closure of most of the evacuation centres by October 2011, the project shifted its focus to the community centres and common rooms in prefabricated temporary housing clusters, to which the JRCS provided refrigerators, TV sets, electric water heaters, vacuum cleaners, tables, chairs, book shelves, white boards and automated external defibrillators (AED). Further distribution was made at the request of Fukushima for nuclear disaster evacuees, and the JRCS distributed furniture and electric appliances to seven community centres and two group homes in Fukushima in February 2013. Under this project, 57,720 sets of "Reassurance (Anshin) Kits" were provided. A "Reassurance (Anshin) Kit" enables an individual to provide information to medical staff regarding chronic diseases, emergency contacts including the contact of family doctors, health insurance, a patient's registration card, pharmaceutical memos and the holder's photo, for possible emergency medical interventions. These kits will be especially useful for the elderly. Different activities were also carried out under this project in order to create better community environment. Planting flowers with residents of the temporary housing and the JRCS

volunteers in Fukushima drew 2,130 people until the closure of the activities in November 2012.

6.2 Distribution of summer amenity items, drinking water, temporary showers, water taps, etc. -- COMPLETED

In July 2011, more than 202,000 kits containing 43 items were distributed in 145 locations throughout Iwate, Miyagi and Fukushima. Water taps in nine evacuation centres benefitted more than 2,000 people, and tea and rehydrating drinks were distributed to 6,100 people at evacuation centres in four towns in Iwate from July to September 2011.

6.3 Distribution of winter amenity items -- COMPLETED

All meeting places in the prefabricated housing clusters received winter amenities in kits containing dew condensation/prevention sheets for windows, heating pads to go under futons and kotatsu (a small table covered by a quilt with an electric heater underneath). Precaution against fire was duly taken into consideration when selecting the items. Over 137,000 kits were distributed in 692 locations in Iwate, Miyagi and Fukushima to 77,000 beneficiaries. The project was completed in December 2011.

6.4 Community bus operations support (Miyagi, Fukushima) -- COMPLETED

Community bus services were provided in Miyagi and Fukushima for evacuees' transportation. This was a complete service with a bus stop equipped with solar panels and LED lights for eco-friendliness and safety. The buses were mostly used by students commuting to their schools and by the elderly residing in temporary houses to go to nearby towns. A route in Minamisanriku, Miyagi, served five times daily, was handed over to the municipality. It has been operated by public bus services since April 2013. Another daily community bus service with alternating routes served primarily evacuees from Okuma town that were relocated in groups to Aizuwakamatsu, Fukushima due to the nuclear accident. It was handed over to Okuma municipality in April 2013.

6.5 Psychosocial support

Five years have been passed since the earthquake; many beneficiaries moved from the temporary prefabricated housing to the municipal and other housings, and still look forward to participate in activities. Currently, participants are also coming from neighboring temporary housings and other municipal housings. Accordingly, these activities have been promoting an interchange between residents in the GEJET affected area. These activities are conducted by group level, the staffs from Iwate Chapter continue an individual visit in the temporary housing to inform their activities and listen to their current condition and problems. In 2015, 1,387 people participated in 66 events in Iwate, 269 people participated in 32 events in Miyagi.



6.6 Distribution of six electric household appliances sets -- COMPLETED

By February 2013, when the project was completed, 133,183 sets of six electric appliances were distributed to affected households in Iwate, Miyagi, Fukushima and other prefectures, providing a substantial means for those displaced families to resume their lives. These six items were considered indispensable in daily life for those who were evacuated or lost their household appliances; washing machine, refrigerator, TV, rice-cooker, microwave oven and electric water heater. The project is the largest within the JRCS recovery operation in terms of scope and budget. Although it was initially expected to end in March 2012, the timeframe was extended in response to the evolving needs of those who were evacuated from Fukushima due to the nuclear accident. Below is a breakdown of the distributions by prefecture.

Name of Prefectures	No. of Sets Delivered
Iwate	18,694
Miyagi	49,045
Fukushima	63,617
other prefectures	1,827
TOTAL	133,183

6.7 Disaster Recovery Housing (Otsuchi, Iwate)

In Otsuchi Town, Iwate, almost 60 percent of the houses were destroyed by the tsunami. The disaster recovery housing project aims to provide inexpensive rental houses for those who cannot afford to rebuild their own houses. A total of 980 housing units are planned to be constructed in Otsuchi Town as the disaster recovery public housings for the area. Of these, 730 units will be under the management of Otsuchi Town, and partially financed by the JRCS. By the end of 2014, 161 housing units were completed, and during 2015 the number increased to 254 with the completion of the Terano/Usuzawa (No.1) Municipal Housing and Machikata (Suehiro-cho) Housing. Currently, Terano/Usuzawa (No.2), Machikata (Oshachi), and Namiita Housings are under construction and completion of housing construction is projected around 2017.

Completed Housing Complexes

Location	No. of housing units	Current Situation	Year of Completion
Ogaguchi 1-Chome	70	completed	Aug. 2013
Kirikiri	34	completed	Aug. 2013
Gensui	21	completed	Nov. 2013
Ogaguchi 2-Chome	23	completed	Sep. 2014
Masanai (1)	13	completed	Dec. 2014
Terano/Usuzawa (No.1)	16	completed	Sep. 2015
Machikata (Suehiro-cho)	53	completed	Mar. 2016
Masanai	24	completed	Mar. 2016
Total	254		

6.8 Construction of community centres (Kawauchi in Fukushima, Ishinomaki and Togura in Miyagi)

In order to provide the spaces where beneficiaries can get together and participate in various community activities, the JRCS has been supporting construction of three community centres in Fukushima and Miyagi Prefectures. To date, two community centres, Kawauchi Community Centre and Yoriiso Community Centre, were completed in November 2011 and March 2014 respectively.

The third community centre construction, the Togura Community Centre in Miyagi Prefecture, was delayed due to the procedure relating to the law on 'rationalization of budgetary extension.' This is concerning the modification in the usage of the building from Togura Junior High School to Togura Community Centre, and the revision of its design to match the usage for a community centre. Construction started from April 2015 and is scheduled to finish in August 2016.

6.9 Nordic-style walking as physical exercise (Iwate, Fukushima)

To address the lack of exercise and the need to reduce stress among beneficiaries residing in temporary housing, the JRC Iwate and Fukushima Chapters have been operating a Nordic-style walking program since the disaster occurred. Older age groups are becoming more prominent among the participants, so the programme has been modified in order to best suited for the elderly. These activities are still popular among the residents of temporary housings. During 2015, 66 events with 1,387 participants were held in Iwate and 15 events with 365 participants were held in Fukushima.



Participants enjoy Nordic-style walking in Jan.2016 © JRCS

6.10 Health and social classes

Various activities, such as Red Cross First Aid classes, soup kitchens, tea parties and handicraft courses have been carried out in Miyagi and Fukushima Prefectures. In Miyagi Prefecture, RC First Aid Classes were held 140 times with 6,022 participants during 2015. In Fukushima Prefecture, 135 such activities with 4,794 participants were implemented.



Survey team visited evacuees to check the health, psychological and social status in January 2016© JRCS

6.11 Health consultation for the evacuees from Namie Town (Fukushima)

Due to the high level of radiation, original residents of Namie Town have been relocated to Iwaki City in Fukushima. This project started in October 2012 in coordination with the municipality, the JRCS, and Japanese Red Cross College of Nursing. Its purpose was to check the health, psychological and social status of the evacuees through door-to-door visits. By February 2016, the survey team had visited 9,305 evacuees (4,292 households). The team is now paying a fourth round of visits to evacuees. There were a lot of gratitude words from evacuees to the survey team who came and visited them. According to one

evacuees “Through consultation, I was able talk about my concern, which previously I was not able to tell any other person. This consultation helped me to relieve my feelings”.

Additionally, the Namie infirmary provides health consultation to the evacuees, at any time, and organizes a “mother salon” to provide advice in child rearing and child development, as well as, daily concerns in general, as a part of their community activities.

6.12 Psychosocial support centre for children and youth in Iwate Medical University Hospital (Iwate) -- COMPLETED

Construction of the psychosocial support centre for children and youth in Iwate was completed with an opening ceremony in May 2013. This centre is run by the Iwate Medical University Hospital (IMUH) to support children and youth showing psychosomatic symptoms or who are absent from school due to traumatic experiences or loss. The centre is intended to address the needs for psychological support, professional counselling and, in some cases, appropriate medication for children. The need for these services has been increasing since the disaster.

6.13 Mobile dental care services for elderly and physically challenged persons (Miyagi) -- COMPLETED

The JRCS supported the Miyagi Dental Association (MDA) in procuring 11 dentistry sets and five vehicles to provide mobile dental care services to 1,000 elderly and physically challenged persons in Miyagi prefecture who had limited access to dental care. The procured dentistry sets were comprised of dental care kits, mobile X-ray machines, sterilizers, generators and medical supplies. The mobile operation started in April 2013.

6.14 Miscellaneous

Apart from the projects mentioned above, activities such as soup kitchens, music concerts and reunion parties were organised during this reporting period. In 2015, 17 soup kitchens were used by 1,597 people in Iwate, and activities like musical concerts, movie showings and tea parties were held 8 times in Fukushima which was attended by 1,041 people.

7. Social Welfare Support

7.1 Distribution of medical/nursing beds -- COMPLETED

A total of 959 medical and nursing beds were distributed to 161 facilities which, due to the exceptional circumstances, accommodated a higher number of elderly patients than what was indicated by the official capacity limit. The distribution was based on the requests from the prefectures and completed in November 2011. The details are as follows:

	Iwate	Miyagi	Fukushima	Total
No. of Institutions	29	209	23	161
No. of Beds delivered	205	658	96	959

7.2 Distribution of items for group homes for the elderly -- COMPLETED

More than 60 group homes for the elderly and physically challenged were operating in prefabricated structures throughout the three affected areas: 22 in Iwate, 29 in Miyagi and 11 in Fukushima. To help improve these facilities, the JRCS provided furniture and fixtures, including dining tables to fit wheelchairs, electronic appliances for dining spaces and kitchens, vacuum cleaners, AEDs and other items. Based on requests from the municipalities, a total of 2,239 items were distributed throughout the three prefectures; 505 items for Iwate, 1,289 items for Miyagi and 445 items for Fukushima. The distribution was completed in April 2012.

7.3 Provision of vehicles for social welfare institutions -- COMPLETED

A total of 338 vehicles were distributed to the municipalities, social welfare institutions, group homes in the prefabricated housing clusters and other relevant organisations in the three most affected prefectures to benefit elderly and physically challenged people. The vehicles played a particularly crucial role in the region due to the scarcity of public transportation. The distribution of the vehicles started in early December 2011 and was completed in September 2012.

7.4 Services of caretakers for the elderly -- COMPLETED

The JRCS deployed staff from its Red Cross welfare facilities to the evacuation centres in the affected areas to provide psychological care, meals, baths and other necessary assistance to the elderly. A total of 67 caregivers were deployed from April to June 2011. Psychological support was also provided for staff and volunteers in the centres.

7.5 Construction of Kesenuma Social Welfare Centre (Kesenuma, Miyagi)

The newly-reconstructed social welfare centre in Kesenuma City will have multiple functions. It is a community support centre for parents, elderly and physically challenged people. At the same time it also serves as the first-meeting point for social workers in case of emergencies. Land development for the centre started in 2013 and was completed in March 2015. Construction of the building was started in December 2015 and will finish by December 2016, with operations starting from April 2017.

7.6 Public housing for the elderly (Shinchi, Fukushima) - - COMPLETED

In Shinchi, Fukushima Prefecture, 550 houses were destroyed by the tsunami. The project aimed to provide permanent housing for elderly people older than 65 who had lost their homes. The buildings were designed to have a community room in order to prevent residents from feeling isolated, and were to be built using traditional woodworking techniques so as to make them resistant to earthquakes and typhoons. The facilities, which can accommodate 22 households, were officially opened in November 2013, and the residents started their new lives.

7.7 Public housing for the elderly (Soma, Fukushima) - COMPLETED

The city of Soma in Fukushima Prefecture has a population of 38,000, of whom 15 per cent lost their homes by the earthquake and the tsunami. The Soma City authorities decided to build public housing in four districts (Babano, Minamitosaki, Kitsuneana, and Hosoda) with a focus on preventing isolation among the elderly. The construction of three public housing projects in Babano, Minamitosaki and Kitsuneana was completed in March 2013. Construction of the complex in Hosoda district was completed in November 2013.

7.8 Support for social welfare centres (Miyagi) - - COMPLETED

In December 2012, a braille printer and cutting machine were provided to the Information Centre for Visually Impaired Persons in Miyagi Prefecture to promote equal access to information on disaster prevention and livelihoods rehabilitation. More than 5,400 visually impaired persons in the prefecture will benefit from this project. In addition, installation of special plumbing in the Social Welfare Centre for Physically Challenged Persons was completed by the end of December 2012. It was designated as an evacuation centre by the city of Sendai, which required renovations. It has resident social workers, and can accommodate 26 people per day. All of these support projects were completed in December 2012.

8. Children's Education Support

8.1 Provision of items for school kitchen centres (Iwate, Miyagi, Fukushima) - COMPLETED

In the Japanese school system, lunch is generally taken in the classrooms, not in a cafeteria. Lunch is either prepared in the kitchen centres and delivered to multiple schools, or prepared in individual school kitchens attached to the schools. Fifteen school kitchens and kitchen centres received a total of 8,933 items, benefitting almost 15,000 students throughout the three prefectures. Distribution was completed in August 2012 with the delivery of two dish washers in Ishinomaki Kitchen Centres, which serve 4,500 meals for 11 schools per day.

8.2 Provision of goods for gymnasia (Miyagi) - - COMPLETED

In response to the request for school gymnastic materials from the Office of Education of Miyagi Prefecture in the autumn of 2011, the JRCS made assessments and began delivering the items in February 2012. Five schools, three elementary schools and two junior high schools received 81 types of goods including mats, racquets, balls, track hurdles and cupboards. The distribution was completed in July 2012.

8.3 Nursery schools, kindergarten and after-class centres (Yamada and Otsuchi in Iwate and Rikuzentakata in Miyagi) - - COMPLETED

Yamada Town was one of the most devastated towns in Iwate Prefecture, with more than 50 per cent of the houses completely destroyed, including public facilities for children such as nursery schools, kindergartens, and after-school clubs. Under this project, the JRCS has supported reconstruction of four nursery schools, one kindergarten and two after-school clubs in Yamada Town and Otsuchi Town in Iwate Prefecture. By the end of 2013, three nursery schools and one after-school club had been completed. During 2014, the JRCS decided to support the reconstruction of Midori Kindergarten, which was completed in September 2014. The second after-school club, After-School Club for Toyomane District, was completed in March 2015, and started its operation in April 2015. All nursery schools and after-school clubs have been operating as planned.



Midori Kindergarten completed in Sept. 2014. © JRCS

The nursery school, Hirota Nursery School in Rikuzentakata, was damaged by the debris generated by the tsunami. Relocation of the school to higher ground is crucial to provide a safe environment for children and staff, and the JRCS decided to support this reconstruction. By the end of July 2014, land development was completed; construction followed immediately after and was completed in March 2015. The school, located 30 meters above sea level, started its operation in April 2015.

8.4 Construction of after-class centre (Ofunato, Iwate) -- COMPLETED

Due to changes in the circumstances of children and their families after the tsunami, the community in Ofunato was in need of an after-class centre. Since the disaster, after-class services had been organized by the parents' voluntary association without any proper facilities. The major concern was that children living in temporary housing spend more time alone at home because the work places of their parents are often farther away than before and commuting takes longer. The new centre, which can accommodate 30 children per day, was built in June 2013 in a school compound in order to avoid children coming to and leaving from the school alone in the dark. Until the opening of the centre, the staff needed to escort the children between the school and their temporary housing to ensure their safety, so the opening of this centre has greatly improved the community.

8.5 Health and safety support -- COMPLETED

During the summer of 2011, Red Cross safety classes were held twice in Iwate where 99 pre-school children made handheld fans while learning about heat stroke and how they and their families could protect themselves from illnesses. Picnics were also organized for nursery schools in Rikuzentakata City as part of psychosocial support for children with traumatic experiences from the tsunami and the drastic changes in their daily lives. A total of 282 children participated in three picnic sessions for which the bus rental fees were supported by the JRCS, along with health and safety introduction sessions designed for the parents. In Rikuzentakata, 35 people participated in a

“snow picnic” which took place on a ski slope. In December 2011, mobile movie shows were held in Iwate and Fukushima Prefectures in cooperation with a private company as part of their CSR project. A total of 236 children enjoyed the screening of a popular animated film, “The Clockwork Samurai.” The children enjoyed games designed to raise flu awareness before the movie.

8.6 School bus operations support (Iwate, Fukushima) -- COMPLETED

The purpose of this project was to assist displaced children in their commute to temporary schools. The buses, equipped with AEDs, were provided to schools which were affected by the earthquake, tsunami and radiation from the nuclear power plant disaster. The children affected by the disasters did not have access to public transportation and faced logistical challenges in travelling between their schools and the prefabricated and temporary housing. The JRCS has completed all bus operation services, in total 14, by March 2013 and provided 18 buses in order for schools to maintain school bus services for their students.

8.7 Provision of school items -- COMPLETED

As part of the effort to secure the safety of children walking in the dark under failed street lights and through debris, flashlights were distributed to 5,621 students in 32 schools in Iwate Prefecture. Also, 121 personal computers were distributed on requests from the prefectures: 25 in four schools in Iwate Prefecture and 96 in four schools in Fukushima Prefecture. In Fukushima, the request was particularly urgent since many students stayed indoors due to fears of radiation. The distribution was completed in March 2012.

8.8 Training outfits for school football teams -- COMPLETED

Donations raised by the former football player Hidetoshi Nakata through goodwill games in Singapore and Thailand were allocated for purchasing warm-up jackets for boys’ and girls’ soccer teams in junior schools, high school, as well as women’s teams. These outfits were distributed by the JRCS to 3,655 dedicated young athletes in 121 teams throughout Iwate, Miyagi and Fukushima Prefectures. AED training sessions were held for the athletes and their instructors. This project finished in May 2012.

8.9 Provision of items for school clinics -- COMPLETED

Sets of items for school clinics were distributed to 157 schools clinics in Iwate and Miyagi Prefectures, which included the following 11 items; height measurement instrument, weight scale, vision analyzer, eye cover for vision test, sitting height measurement instrument, hearing measurement instrument, stretcher, bed, bedding (including mattress, futon mattress, blanket, cotton blanket, linen sheets, pillow and pillow cover), partition and fan/heater. A total of 84 school clinics in Iwate and Miyagi also benefitted from one fan/heater each while 15 schools in Miyagi received 17 AEDs. The distribution was completed in June 2012.

8.10 Organization of indoor playgrounds, “Smile Parks” (Fukushima) -- COMPLETED

The “Smile Parks” project, one of the largest mobile indoor playgrounds in Fukushima Prefecture, opened in February 2012 and enabled children to play safely in the environment where parents did not need to worry about exposure to radiation. The locations were selected to maximise participation by children and their parents, both among evacuees and host communities. The parks provided an outdoor running track, a ball pit, a ring toss game, climbing sessions, drawing and cultural classes, and sports trials. Since July 2013, educational programming and weekend performances from famous cartoon characters were incorporated as new features. Given the increased number of indoor playgrounds operated by municipalities or other agencies in Fukushima, the JRCS managed to phase out the project in December 2013. In two years of operation, Smile Parks received 86,584 people, including 53,538 children. Under this project, the JRCS also provided indoor play equipment to support a municipal indoor play space in Kunimi Town in Fukushima Prefecture.

Entrance to Smile Parks

Event Year	Session	Location	Terms of session	No. of children visited	No. of parents visited	TOTAL
2012	1	Fukushima (City)	Feb 2012	3,614	1,726	5,340
	2	Fukushima (City)	Jul 2012	4,305	2,182	6,487
	3	Soma	Jul - Aug 2012	3,208	2,089	5,297
	4	Iwaki	Sep - Oct 2012	4,617	2,990	7,607
	5	Shirakawa	Oct 2012	3,266	1,509	4,775
	6	Soma	Nov 2012	3,520	2,098	5,618
	7	Fukushima (City)	Dec 2012	3,669	2,097	5,766
2013	1	Fukushima (City)	Jul 2013	4,597	2,911	7,508
	2	Sukagawa	Sep 2013	3,008	2,044	5,052
	3	Shirakawa	Oct 2013	4,232	2,450	6,682
	4	Soma	Nov 2013	3,214	2,157	5,371
	5	Koriyama	Nov - Dec 2013	7,063	5,283	12,346
	6	Iwaki	Dec 2013	5,225	3,510	8,735
Total number of visitors				53,538	33,046	86,584

8.11 Summer Camps -- COMPLETED

The main objective of this project was to help children recover from the after-effects of the disaster and to provide them with opportunities to learn from each other for their personal growth. From July to August 2012, 11 summer camps were held with 3,451 children from every affected area, and 951 JRC volunteers participated. The needs of the children and the impact that the summer camps had on the children led the JRCS to initiate the second round of summer camps in the following year, with 2,337 children and 870 volunteers. Generous donations of goods and manpower came from 18 corporate partners. The volunteers for the camp were drawn from Red Cross volunteers, staff from private sector stakeholders, teachers, nurses, clinical psycho-therapists and travel agency staff as well as the JRCS NHQ staff. The camp brought enriching experiences to the children through activities such as farm work, horseback riding, climbing, fishing, handicraft classes, mountain biking, rafting and orienteering, all of which helped to relieve the stress that they face from post-disaster life. The second round of summer camps incorporated more educational perspectives through workshops on environmental issues, international understanding, dietary education, and understanding of the needs of physically challenged people and the elderly. The project was successfully finished, and was given overwhelmingly positive feedback from children and parents as well as the volunteers. In 2014, the JRCS chapters in the affected area plan to organise smaller-scale summer camps within the prefectures. The details are summarized below:

Year	No. of Session	Children participated	Volunteers participated	Total participants
2012	11	2,337	870	3,207
2013	9	3,451	951	4,402

8.12 Prefabricated school gymnasia (Otsuchi and Ofunato in Iwate, Iitate in Fukushima) -- COMPLETED

Temporary gymnasia were provided to three prefabricated schools in Otsuchi and Ofunato in Iwate Prefecture and Iitate in Fukushima Prefecture which had to be relocated due to the damage caused by the tsunami. The last gymnasium was inaugurated along with the new temporary school building in July 2012, allowing more than 1,000 children in all three temporary schools to have their own campus and gymnasium.

8.13 Red Cross Youth and Volunteer Project (Iwate, Miyagi, Fukushima)

Various activities managed by the local chapters and the Red Cross volunteers in the three most GEJET affected prefectures of Iwate, Miyagi, and Fukushima have been carried out. In 2015, the following activities were implemented: two international youth exchange programmes with 23 youths participating, two summer camps with 124 youths; one Red Cross volunteer meetings with 600 participants; two musical concerts attended by 406 people. In addition, in Fukushima 35 events such as musical concerts, 100-words essay competition with 5,441 entries, movie appreciation activities and plays attracted 3,277 youths.

8.14 Establishment of “Kodomo-En (Centres for Early Childhood Education and Care)” (Iwaki, Fukushima) - - COMPLETED

Many citizens of Naraha Town in Fukushima Prefecture have been evacuated to other locations due to high levels of radiation. Most of them currently stay in the city of Iwaki. The JRCS built a facility named “Kodomo-En,” *Centres for Early Childhood Education and Care*, in Iwaki, which served as a kindergarten and a nursery school in response to the urgent needs of working parents.

The facility was built in the compound of the Naraha temporary primary and junior high school which was located on land rented from Iwaki Meisei University. It opened in December 2012, directly benefitting 42 children at the time of inauguration. The JRCS also distributed playground equipment, gymnastics equipment and nursery items to both Kodomo-En and the schools to make the evacuee children’s lives closer to what it was prior to the disaster.

8.15 “Dream Blossom” project (Kamaishi, Iwate) - COMPLETED

In collaboration with Chiba Prefectural Museum of Art, the Board of Education of Kamaishi City in Iwate Prefecture and the JRC Chiba Chapter conducted a four-day mobile creative art workshop for 146 children in August 2012. The collaboration was established based on the close relation between the JRC Chiba Chapter and Iwate Prefecture following the implementation of relief activities after the disaster. During the workshop, the children made badges and built large-scale works of art together. Some of them were donated to the Board of Education of Kamaishi City for further use in schools.

8.16 Miscellaneous

Responding the request from Miyagi Prefecture, the JRCS provided electric blackboards to primary and junior high schools. The targeted schools, previously 16 schools located in coastal areas and destroyed by the tsunami, were relocated and reformed into eight schools. In June 2012, a handover ceremony to Miyagi Prefecture was held in which each school received two electric blackboards.

The JRCS also provided playground equipment to schools relocated to different towns to promote better health among evacuee children. The temporary schools were poorly equipped, and in December 2013 the JRCS decided to set up a jungle gym with a slide at the school compound. The playground was completed in March 2014.



A student giving milk to a baby during the vocational experience programme. © JRCS

In 2015, a vocational experience programme for students was carried out at JRC Morioka Hospital in Iwate, where 79 students participated.

9. Community Based Disaster Preparedness – PROGRAMME COMPLETED

Provision of Disaster Preparedness material and storage facilities -- COMPLETED

The JRCS supported 26 municipalities in the three most affected prefectures to strengthen their preparedness for future disasters. Learning from the GEJET experience, the affected communities wished to set up community-based emergency supply storage in strategic locations that they had identified. A total of 432 storage facilities were set up, in which disaster preparedness materials such as generators, cord reels, floodlights, lanterns, portable toilets and partitions, and solar power systems with LED lights, were stored in December 2013. The JRCS lets municipalities choose items for storage from a number of available items in order to accommodate their local needs.

10. Capacity Building of JRCS National Disaster Preparedness

10.1.1 Development of disaster response capacity, tools and facilities -- COMPLETED

To strengthen the response capacity to future disasters, the JRCS procured emergency supplies for JRC chapters. The items were carefully selected and prioritized based on the lessons learned from GEJET. Delivery of the following items was completed in November 2013. In addition, a warehouse of the JRC Fukushima Chapter was reconditioned for the optimal storage and dispatch of the emergency supplies.

Item	No. of unit
Large-size tents for aid stations	99
Special vehicles for Disaster Response Headquarters	12
Satellite phones	108
Doctors' vehicles	27
Cooling/heating systems for aid stations	38
Vehicles for pharmaceutical storage	12
Portable ultrasound diagnostic devices	6
Special vehicles for command and communication station	43
Transportation trucks for emergency relief supplies and equipment	40
Ambulances	28
dERU repair/reconditioning	8
Medical bags	808
Vehicles for personnel transportation	32

10.1.2 Development of Disaster Response Capacity, Tools and Facilities-- COMPLETED



Renovated Iwate Chapter's building with the storehouse in the first floor of the building. © JRCS

As part of the capacity strengthening component of the JRC chapters, a warehouse for JRC Iwate Chapter was established in February 2015 in the renovated chapter building on the first floor. Based on the experiences from the GEJET response, it has been decided that it will also serve as a logistic relay station.

10.2 Disaster Preparedness Training

Through the lessons learned from GEJET of 2011, it became clear that the bigger the scale of the disaster, the fewer the lives could be saved solely by outside relief responses after a disaster. On the other hand, there were a lot of lives saved when community residents worked together, such as a well-known story of "the miracle of Kamaishi" in GEJET" where nearly 3,000 elementary and junior high school students of Kamaishi, Iwate Prefecture, incredibly survived after the GEJET. Kamaishi East Junior High School students' prompt response to the urgent situation was by running out of school to a higher ground while supporting each other in the process.³⁸ Another example was during the Hanshin-Awaji Earthquakes in 1995, it was said that more than 80% of the affected people was rescued by the local residents.

Based on these facts, there is a need to strengthen domestic disaster response capacities and promote the nurturing spirit of self-reliance and cooperation among community members in order to "protect human life, health and dignity." This is the mission of the JRCS. Additionally, a long-predicted mega disaster, like the earthquake whose hypocentre is directly below a

³⁸ Government of Japan. Public Relations Office, *The miracle of Kamaishi, Made in New Japan*, Public Relations Office,. Their prompt response to the urgent situation was the fruit of a tsunami disaster prevention education program that Kamaishi schools had been working on over the past several years under the guidance of Toshitaka Katada, professor of civil engineering at Gunma University.

populated area, the Nankai Trough earthquake and many others, reinforce the need of preparations.

The project started in 2014 with the purpose of strengthening domestic disaster response capacities by providing education on disaster preparedness and risk reduction, promotion of the nurturing the spirit of self-reliance and cooperation among community members, and development of capable leaders to response to the disaster within the region.



DIG programme in the Sixth Pilot Programme held in Tokyo, in February 2016. © JRCS

In 2015, this project has implemented three main activities: establishment of the JRCS Disaster Preparedness Training Programme Study Committee, implementation of the training for instructors for Disaster Imagination Game (DIG), and implementation of the JRCS Disaster Preparedness Training pilot programmes. The JRCS Preparedness Education Promoting Committee was established in May 2015 in order to promote preparedness education in the community. The first committee meeting was held at the JRCS headquarters in July 2015 to strengthen their understanding of the JRCS Preparedness Education programmes, its purpose and expected role of the committee, and to share their plan of FY2015. The second and third committee meetings were held in December 2015 and February 2016 where they examined the outcome of the implemented pilot programmes, and shared their plan of FY 2016.

In 2014, training for instructors for DIG presented two kinds of curriculum: Disaster Ethnography and DIG programme. They were further evaluated by the pilot programme. The report concluded that there was a need for developing capable instructors and producing teaching materials for DIG programme.

In response to this, training for instructors for DIG was held in July 2015 with 7 participants who are appointed as the JRCS Disaster Preparedness Training Programme Study Committee member from the JRCS Chapters and Headquarters. The instructor of the Institute of Scientific Approaches for Fire & Disaster, who has been implementing DIG training to local municipality, provided the training and examined issues to manage the DIG training. Through this training, participants strengthened their understanding of DIG programme and learned how to conduct their own training session.

Once the training for instructors for DIG was completed, seven pilot programmes were implemented in Hiroshima, Iwate, Fukuoka, Osaka, Yamaguchi, Tokyo, and Okayama. A total of 391 individuals participated. The newly trained JRCS Instructors, from DIG pilot programme, has obtained the opportunities to practice the DIG programme as well as preparation to be a qualified instructor. They are now expected to connect their experience to the training for instructors of Disaster Preparedness Training Programme scheduled in 2016.

Furthermore, several technical issues for the management of Disaster Ethnography and DIG programme were reported during the pilot programmes. The JRCS has obtained concrete measures to improve each curriculum and guidelines for producing the training materials. These improvements are to be scheduled in 2016. Throughout the pilot programmes, positive response was received on programme management and implementation from each chapter.

10.3 Mobilization of Youth Volunteers for Disaster Management

This is a new project started in 2014. Mobilization of youth volunteers is one of the important initiatives in the GEJET recovery activities. Youth Volunteers is putting the national common theme “Supportive activities for the affected people by GEJET, and efforts for the future disasters” since 2013.



Youth Volunteers put away the cotton after harvest that has been planted in the fields for reducing the salt. © JRCS

FY 2015 is scheduled to be the final year for the project where youth volunteers continued their activities. During this time, 9 Red Cross Youth and Junior Red Cross volunteers implemented the recovery support and regional disaster preparedness activities, which were planned for the occasion of their visit to the affected area in 2014.

Supportive activities are made up of various topics, such as sending greeting letters to the affected people, distribution of free magazines published in the affected area, and organizing events addressing evacuees in multi-municipal area.

Five years has passed since the GEJET and memories of the disaster will soon be fading. It has now become a necessity for youth volunteers to visit the affected area to identify the current needs, to explore further activities and to implement the volunteer activities.

Youth Volunteers National Action Research Meeting was held at Matsushima, Miyagi prefecture in July 2015 with participants from all over the country.



Youth Volunteer participated in the group discussion at the community center . © JRCS

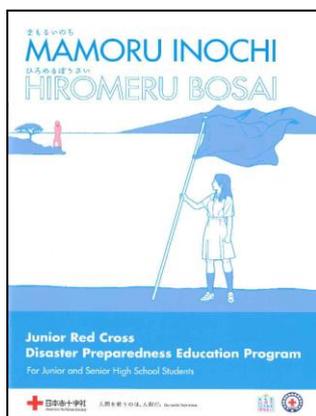
10.4 Preparedness Education Programme for Junior Red Cross/Red Cross Youth

This is a new project that was started in 2014. After the experiences of the Hanshin-Awaji Earthquake of 1995, and the Great East Japan Earthquake and the Tsunami of 2011, it has been recognized that providing survival skills is very crucial to save lives in times of disaster.

This project aims to teach elementary, junior high and senior high school students preparedness skills that will protect themselves during disasters. The programme also aims to build a better understanding and awareness on the importance of preparedness among families of students and communities they belong to.



Preparedness Education Programme was introduced in Junior Red Cross Training, in Kagawa, August 2015 © JRCS



The textbook for Junior Red Cross Disaster Preparedness Education Program for Junior and Senior High School Students, “*Mamoru Inochi, Hiromeru Bosai (Protecting Lives, Preparing for Disasters)*,” was written in Japanese in 2014, and were distributed for free to all junior high and high schools in Japan. This can be used as a part of their regular curriculum. In 2015, 40,000 copies of the textbook were reprinted in June after initially printed 25,000 copies in January. A total 65,000 copies were delivered to Chapters in each prefecture.

The textbook was distributed for free to elementary, junior high and high schools in Japan © JRCS

There was a fear that teachers might not be able to understand its objective well enough if the textbooks were sent directly to the school. Therefore, each chapter personally delivered the books to schools, through the board of educations, a preparedness education seminar and explained its purpose and contents.

According to the report of a survey conducted on 4,000 randomly selected schools, from primary schools in nationwide to senior high schools in January 2016, they found out that about 20% schools nationwide have already used the textbook.



Junior Red Cross Disaster Preparedness Education seminar was held with about 40 participants in Kagawa, June, 2015 Japan © JRCS

Also, the textbook was translated into English in 2015, and was distributed at the JRCS booth of the exhibition hall during the 32nd International Conference of the Red Cross and Red Crescent held in December 2015.

The project was awarded the “Ninth Kids Design Award,” Future design for children, study & Understanding Category in July 2015.

11. Other Projects – PROGRAMME COMPLETED

AED and other essential items for volunteer centres - - COMPLETED

A total of 257 items were distributed in 11 locations to enhance preparedness at the volunteer centres. These included equipment such as 90 sets of emergency kits, 29 AEDs, temporary showers and 28 tents. The temporary showers had been provided by March 2013.

12. Project Management and Support

HR, consultancy, audit, evaluation, and support by IFRC

The IFRC Secretariat and its regional offices have been providing the JRCS with delegates and technical support when requested. The IFRC representative was stationed at the JRCS NHQ since 2011 until the end of his mission in June 2013. IFRC support is currently provided from the East Asia Regional Delegation in Beijing and the Asia Pacific Zone Office in Kuala Lumpur.

An evaluation of the JRCS relief and recovery operations during the first two years was jointly commissioned by the JRCS and IFRC from February to March 2013. This evaluation follows the effort in 2011³⁹, which focused on emergency operations.

The outcomes and lessons learned from the evaluation were presented at the IFRC General Assembly in 2013 by the team leader (a former IFRC Representative in Japan) and the JRCS Representative.

Japan Research Institute (JRI) has also completed an external evaluation on the JRCS recovery programmes in fiscal year 2012. The report was submitted to the JRCS and is now available online⁴⁰.

The JRCS compiled the 48-Month-Later Report to summarize its relief and recovery activities in the first four years.

³⁹ http://ifrc.org/docs/Evaluations/Evaluations_per_cent202012/AsiaPacific/JPTsunamiEarthquake12_report.pdf

⁴⁰ http://www.jrc.or.jp/vcms/lf/Third_Party_Evaluation_2012.pdf

SUPPORT FROM THE STATE OF KUWAIT

Five million barrels of crude oil valued at JPY 40 billion (approximately USD 520 million)⁴¹ were donated by the State of Kuwait. The Government appointed the JRCS as the recipient agency, based on its past performances in relief activities, and requested the JRCS to optimise the funds disbursed from the sale of the oil. The JRC chapters in Iwate, Miyagi and Fukushima facilitated the establishment of an advisory panel comprised of members from the prefectural and municipality authorities, media, banks and enterprises which provided the prefectural governments with advice on the use of the funds. In January 2012, the following amounts were transferred: JPY 8.4 billion to Iwate, JPY 16.2 billion to Miyagi, and JPY 15.5 billion to Fukushima. The prefectures report to the JRCS on the use of the funds every six months. The allocations, the expenditures of the funds and the projects in 2014 are listed below:

Iwate (Budget: 8.4 billion / Spent: 5.6 billion (66.6 per cent) by March 2015):

- Recovery of the regions along the Sanriku Railway⁴² and the restoration of the trains and the stations
- Support for housing reconstruction
- Support for installation of solar power systems to affected houses
- Restoration of private schools
- Recovery of traditional local performing arts
- Financial support for the restoration of small-to medium-sized businesses

Miyagi (Budget: 16.2 billion / Spent: 5.9 billion (36.4 per cent) by March 2015):

- Maintenance of prefabricated housings
- Rehabilitation of homes through support of mortgage interest
- Restoration of utilities for small- to medium-sized businesses
- Resumption of local commerce
- Revitalization of tourist destination facilities

Fukushima (Budget: 15.5 billion / Spent: 7.9 billion (50.9 per cent) by March 2015):

- Preservation of designated cultural property
- Restoration of local cultural heritage
- Revitalization of communities (Satoyama-Iki-Iki Strategy)
- Support for sports competition classes at a high school
- Support for “Satellite Schools”
- Support for the farmers affected by forced evacuation
- Financial support for small- to medium-size businesses
- Assistance for repatriation to “Home Land Fukushima”

Thanks to the fund from the Kuwait, five stations of the Sanriku Railway in Iwate, and Otakamori pier in Miyagi were reconstructed. In Fukushima, support to the “Satellite Schools” was provided to Tomioka High School students. Satellite Schools are the schools which are located out of range of the restricted areas caused by the nuclear accident and are partially borrowed for the evacuated students to provide classes. Tomioka High School students were divided into 4 Satellite Schools, and were provided support for their study as well as school ceremonies and events to keep their sense of belonging.



Shimanokoshi Station, the Kita-Riasu Line of the Sanriku Railway in Iwate. ©JRCS.



Ohtakamori Pier, Higashi-Matsushima in Miyagi ©JRCS.



Gathering of the Tomioka High School students in Fukushima. ©JRCS.

⁴¹ The rate is as of when the donation was made.

⁴² A 107.6 km railway built in 1984 as a first joint public-private venture project in Japan. The construction of the railway had long been sought by the local population as a viable path to travel along a mountainous coastline.

CASH GRANT SCHEME

Under the National Disaster Management Plan of Japan⁴³, all funds raised by the JRCS from the public in Japan (i.e., “Gienkin” in Japanese) have been distributed as cash grants to the people who were affected by the disaster. The funds donated directly to the JRCS from foreign governments and embassies, as well as foreign corporates and individuals, have also been delivered as cash grants⁴⁴.



Cash donation campaigns were rolled out by the Red Cross Youth Volunteers. ©JRCS

Due to the facts that the prefectural and municipal governments were slow in assuming their responsibilities to receive and allocate the cash grants, and the damage was geographically extensive, the JRCS requested the Government to set up a Central Grant Disbursement Committee to accelerate fair allocation of the cash collected by the JRCS and two other publicly-designated fundraising organisations, namely the Central Community Chest of Japan and the national broadcasting agency, NHK. This allowed the national society to start the cash transfer to the prefectures on 13 April 2011. Since April 2014, the JRCS has been the sole organization that collects cash donation from the public.

Based on the decisions made by the Central Committee, the JRCS transferred the funds to 15 prefectures⁴⁵. Each prefecture established a prefectural Grant Disbursement Committee that set the criteria for eligible recipients, the amounts to be distributed (by the municipality authority); who in turn were responsible for ensuring the distribution to beneficiaries.

Due to the magnitude of the disaster, the JRCS has extended the period for accepting cash donations to 31 March 2017. As of 31 March 2016, JPY 337 billion has been received by the JRCS, of which JPY 22.4 billion was from overseas donations⁴⁶. Cash donations made by PNSs after 30 September 2013 were also used as cash grants.

The lack of an allocation system at the prefectural and municipality levels and subsequent delays in the transfers in the initial phase has undermined the reputation of the national society, however the greater portion of the cash donation, as shown below, collected by the JRCS, reflected a wide cross-section of the public who has donated.

As of 31 March 2016

Cash Donation	JPY	USD
Total Donation received by the JRCS, the Central Community Chest of Japan and NHK	378.9 billion⁴⁷	approximately 3.36 billion
[in which total donation received by the JRCS ⁴⁸]	[337.2 billion ⁴⁹]	[approximately 2.99 billion]
Status of Cash Distribution	JPY	USD
➡ Total amount transferred to 15 prefectures	378.0 billion	approximately 3.36 billion
➡ Total amount further transferred to Municipalities from 15 prefectures	371.9 billion	approximately 3.30 billion
➡ Total amount further distributed to Beneficiaries	367.8 billion	approximately 3.26 billion

The donation list from foreign countries and territories appears from page 54 onwards.

⁴³ The national Disaster Management Plan was created by the Central Disaster Management Council. The JRCS is a member of the Council.

⁴⁴ Almost 2.9 million times of cash grant transfers were recorded, coming from overseas and domestic donors.

⁴⁵ 15 prefectures (by 31 March 2014): Hokkaido, Aomori, Iwate, Miyagi, Yamagata, Fukushima, Ibaraki, Tochigi, Gunma, Saitama, Chiba, Tokyo, Kanagawa, Niigata, Nagano. Starting from 1 April 2014, the cash grants will be distributed only in 4 prefectures including Iwate, Miyagi, Fukushima and Ibaraki.”2015-2016 Special Report #1, All the cash grant is sent to the affected people”, P7, Annual Report 2015-2016.

⁴⁶ See page 54-55 “Annex 1: Donation towards the GEJET Relief and Recovery Programmes from PNS and other organizations.”

⁴⁷ Government of Japan. Cabinet Office, Disaster Management. *Higashinohon Daishinsai-n-kakaru Nippon Sekijujisha-to Gienkin Haifu jokyo, Heisei 28nen 3gatsu 31nichi genzai.* (Status of distribution of cash grants for the Great East Japan Earthquake as of 31 March 2016)

⁴⁸ The total collected from national and international donor sources, excluding the funds donated by PNSs after 30 September 2013.

⁴⁹ JRCS. *Annual Report 2015-2016*

How We Work

All JRCS and IFRC assistance seeks to adhere to the Code of Conduct for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGO's) in Disaster Relief and the Humanitarian Charter and Minimum Standards in Disaster Response (Sphere) in delivering assistance to the most vulnerable.

The vision of the Japanese Red Cross Society, as a member of the IFRC, is to inspire, encourage, facilitate and promote at all times all forms of humanitarian activities, with a view to preventing and alleviating human suffering, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.

The JRCS and IFRC's work is guided by Strategy 2020 which puts forward three strategic aims:

- save lives, protect livelihoods, and strengthen recovery from disaster and crises.
- enable healthy and safe living.
- promote social inclusion and a culture of non-violence and peace.

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Notification

Donation after 30 September 2013

The JRCS would like to announce that all the international donations for the GEJET operation received after 30 September 2013 will be used for the Cash Grant Scheme.

Annex 1: Donation towards the GEJET Relief and Recovery Programmes from PNS and other organizations

		as of 31 March 2016
	Organisation Name	JPY
1	Afghan Red Crescent Society	4,879,150
2	Albanian Red Cross	1,682,400
3	American Red Cross	23,096,375,050
4	Andorran Red Cross	29,058
5	Argentine Red Cross	4,382,045
6	Armenian Red Cross Society	102,874
7	Australian Red Cross	2,180,588,839
8	Austrian Red Cross	496,774,402
9	Red Crescent Society of Azerbaijan	13,453
10	Bahamas Red Cross Society	405,200
11	Bangladesh Red Crescent Society	8,681,211
12	Belarus Red Cross	3,481,200
13	Belgian Red Cross	129,623,606
14	Belize Red Cross Society	779,896
15	Bolivian Red Cross	104,429
16	The Red Cross Society of Bosnia and Herzegovina	11,597,299
17	Brazilian Red Cross	13,234,664
18	British Red Cross	1,834,380,375
19	Bulgarian Red Cross	14,926,315
20	Burkinabe Red Cross Society	1,464,945
21	Cambodian Red Cross Society	1,584,772
22	The Canadian Red Cross Society	4,027,776,967
23	Chilean Red Cross	14,779,794
	Red Cross Society of China	904,038,322
24	Red Cross Society of China, Hong Kong Branch	1,669,068,154
	Red Cross Society of China, Macau Branch	44,305,000
25	Colombian Red Cross Society	1,277,721
26	Cook Islands Red Cross	175,098
27	Costa Rican Red Cross	11,889,223
28	Croatian Red Cross	85,775,140
29	Cyprus Red Cross Society	5,618,812
30	Czech Red Cross	47,342,500
31	Danish Red Cross	53,362,250
	Danish Red Cross (Faroe Islands Red Cross)	681,500
32	Dominican Red Cross	335,291
33	Ecuadorian Red Cross	2,590,860
34	Estonia Red Cross	3,302,936
35	Finnish Red Cross	119,570,000
36	French Red Cross	1,850,669,146
37	Red Cross Society of Georgia	4,031,550
38	German Red Cross	3,335,437,740
39	Honduran Red Cross	367,398
40	Hungarian Red Cross	6,688,594
41	Icelandic Red Cross	19,113,287
42	Indonesian Red Cross Society Bali Chapter	79,118,244
43	Red Crescent Society of the Islamic Republic of Iran	7,653,000
44	Irish Red Cross Society	65,045,681
45	Italian Red Cross	389,027,862
46	Jamaica Red Cross	45,034
47	Red Cross Society of the Democratic People's Republic of Korea	8,090,000
48	The Republic of Korea National Red Cross	2,977,101,031
49	Lao Red Cross	636,563
50	Latvian Red Cross	18,391,430
51	Lithuanian Red Cross Society	12,205,182
52	Luxembourg Red Cross	23,705,000
53	The Red Cross of The Former Yugoslav Republic of Macedonia	1,529,982
54	Malaysian Red Crescent Society	370,787,362
55	Maldivian Red Crescent	2,718,135

	Organisation Name	JPY
56	Mexican Red Cross	72,535,786
57	Micronesia Red Cross	8,223,912
58	Red Cross of Monaco	5,156,582
59	Mongolian Red Cross Society	12,301,960
60	Red Cross of Montenegro	956,661
61	Myanmar Red Cross Society	4,309,161
62	Nepal Red Cross Society	3,580,216
63	The Netherlands Red Cross	752,925,547
64	New Zealand Red Cross	57,809,560
65	Nicaraguan Red Cross	200,527
66	Norwegian Red Cross	161,780,204
67	Pakistan Red Crescent Society	8,340,626
68	Palau Red Cross Society	2,428,894
69	The Palestine Red Crescent Society	840,563
70	Red Cross Society of Panama	1,092,949
71	Peruvian Red Cross	2,519,291
72	Philippine Red Cross	167,000,000
73	Polish Red Cross	12,420
74	Portuguese Red Cross	6,169,630
75	Qatar Red Crescent Society	67,526,838
76	Romanian Red Cross	11,443,454
77	The Russian Red Cross Society	163,836,124
78	Rwandan Red Cross	8,183,902
79	Salvadorean Red Cross Society	3,258,180
80	Samoa Red Cross Society	1,752,769
81	Red Cross of the Republic of San Marino	1,017,100
82	The Red Cross of Serbia	191,253,450
83	Singapore Red Cross Society	817,708,385
84	Slovak Red Cross	2,872,219
85	Slovenian Red Cross	19,304,221
86	South African Red Cross Society	10,829,000
87	Spanish Red Cross	416,304,782
88	The Sri Lanka Red Cross Society	395,169
89	Swedish Red Cross	51,600,000
90	Swiss Red Cross	1,999,210,672
91	Taiwan Red Cross Organization	7,027,360,958
92	The Thai Red Cross Society	748,707,214
93	Tonga Red Cross Society	11,534,778
94	Trinidad and Tobago Red Cross Society	5,999,459
95	Uganda Red Cross Society	108,047
96	Ukrainian Red Cross Society	7,100,000
97	Red Crescent Society of the United Arab Emirates	15,968,619
98	Uruguayan Red Cross	1,872,938
99	Vanuatu Red Cross Society	297,234
100	Vietnam Red Cross Society	608,584,747
101	Alwaleed Bin Talal Foundation	8,376,000
102	Embassy of Belgium	9,107,700
103	European Commission - DG ECHO	943,464,578
104	Irish Aid, Ireland	121,450,000
105	Japan-America Society of Hawaii	245,975,395
106	New Zealand Ministry of Finance and Trade	60,730,000
107	State of Kuwait	157,420,000
108	Stavros Niarchos Foundation	20,212,500
109	IFRC	4,902,319
110	IFRC at the UN Inc.	232,932,738
111	Others*	918,295,861
	TOTAL	60,154,424,811

*Others include individuals, corporations and other organizations.

Annex 2: Donation towards Cash Grant Scheme from Foreign Countries and Territories received by the JRCS

		as of 31 March 2016
	Name of Country or Territory	Amount Received (in JPY)
1	Afghanistan	25,270,030
2	Albania	8,935,198
3	Algeria	835,100,000
4	Andorra	4,340,809
5	Angola	877,320
6	Antigua and Barbuda	390,550
7	Argentina	38,708,820
8	Armenia	41,423,278
9	Aruba	7,851
10	Australia	357,240,072
11	Austria	55,718,845
12	Azerbaijan	83,003,845
13	Bahamas	2,307,597
14	Bahrain	567,729
15	Bangladesh	163,023,870
16	Barbados	403,503
17	Belarus	41,963,974
18	Belgium	107,572,308
19	Belize	134,003
20	Benin	20,000
21	Bermuda	1,124,260
22	Bhutan	11,911,942
23	Bolivia, Plurinational State of	1,523,054
24	Bosnia and Herzegovina	35,759,341
25	Botswana	10,624,818
26	Brazil	480,409,030
27	Brunei Darussalam	24,123,196
28	Bulgaria	4,028,399
29	Cambodia	34,640,450
30	Cameroon	316,933
31	Canada	236,273,954
32	Cayman Islands	2,517,498
33	Channel Islands	1,850,660
34	Channel Islands	3,262,175
35	Chile	5,541,706
36	China	925,939,725
37	Colombia	42,750,668
38	Congo, the Democratic Republic of the	178,898
39	Costa Rica	1,961,208
40	Croatia	11,479,120
41	Cyprus	6,764,702
42	Czech Republic	60,843,932
43	Denmark	44,792,012
44	Dominican Republic	3,747,697
45	Ecuador	26,863,840
46	Egypt	5,138,344
47	El Salvador	4,944,606
48	Estonia	272,929
49	Ethiopia	215,317
50	Falkland Islands (Malvinas)	334,373
51	Faroe Islands	8,170
52	Fiji	1,007,298
53	Finland	5,326,581
54	France	620,024,228
55	French Polynesia	193,593
56	Gabon	698,719
57	Georgia	4,125,159
58	Germany	265,976,769
59	Ghana	11,880,064
60	Gibraltar	2,466,115
61	Greece	42,002,989
62	Guam	44,806,525
63	Guatemala	15,889,088
64	Guinea	8,071
65	Guyana	410,338
66	Honduras	2,686,323
67	Hong Kong	720,757,877

	Name of Country or Territory	Amount Received (in JPY)
68	Hungary	3,511,483
69	Iceland	2,112
70	India	488,715,633
71	Indonesia	209,465,045
72	Iran, Islamic Republic of	2,010,568
73	Ireland	24,987,995
74	Isle of Man	39,508,310
75	Israel	7,385,961
76	Italy	282,096,860
77	Jamaica	4,525,142
78	Jordan	10,298,029
79	Kazakhstan	112,353,468
80	Kenya	86,528,335
81	Korea, Republic of	215,643,915
82	Kuwait	110,164,707
83	Kyrgyzstan	16,265,259
84	Lao People's Democratic Republic	54,006,976
85	Latvia	3,969,423
86	Lebanon	5,776,963
87	Lithuania	12,986,891
88	Luxembourg	54,225,119
89	Macao	1,238,745
90	Macedonia, the former Yugoslav Republic of	15,921,885
91	Madagascar	150,542
92	Malawi	973,630
93	Malaysia	523,520,766
94	Maldives	2,897,521
95	Mali	5,344,108
96	Malta	2,652,655
97	Marshall Islands	2,759,538
98	Mauritania	1,057,156
99	Mauritius	5,264,726
100	Mexico	156,302,760
101	Monaco	10,787,457
102	Mongolia	299,521,171
103	Montenegro	330,182
104	Morocco	3,927,811
105	Mozambique	97,696
106	Myanmar	14,729,624
107	Nepal	1,316,370
108	Netherlands	99,704,991
109	New Caledonia	15,101,900
110	New Zealand	38,454,929
111	Nicaragua	6,057,578
112	Niger	2,091,906
113	Nigeria	8,807,299
114	Northern Mariana Islands	2,000
115	Norway	53,533,996
116	Oman	1,076,700,641
117	Pakistan	30,670,338
118	Palau	2,428,894
119	Panama	38,481,959
120	Papua New Guinea	325,210,893
121	Paraguay	12,684,483
122	Peru	32,598,830
123	Philippines	299,108,534
124	Poland	47,543,141
125	Portugal	5,095,192
126	Puerto Rico	2,000
127	Qatar	58,998,142
128	Republic of Kosovo	15,212
129	Réunion	23,577
130	Romania	2,352,975
131	Russian Federation	182,198,423
132	Saint Kitts and Nevis	184,759
133	Saint Lucia	1,917,057
134	Saint Vincent and the Grenadines	240,658

	Name of Country or Territory	Amount Received (in JPY)
135	Samoa	1,323,360
136	San Marino	1,130,045
137	Saudi Arabia	15,367,948
138	Senegal	878,398
139	Serbia	56,753,573
140	Seychelles	942,334
141	Singapore	318,737,603
142	Slovakia	13,364,505
143	Slovenia	22,597,570
144	Solomon Islands	2,148,868
145	South Africa	46,417,280
146	Spain	102,450,565
147	Sri Lanka	84,886,111
148	Sudan	9,202,923
149	Sweden	45,982,105
150	Switzerland	588,417,563
151	Syrian Arab Republic	56,683
152	Taiwan, Province of China	2,929,444,408
153	Tajikistan	276,437
154	Tanzania, United Republic of	1,490,250
155	Thailand	2,061,535,423
156	Timor-Leste	7,577,700
157	Togo	15,422,985
158	Tonga	2,000
159	Trinidad and Tobago	7,904,179
160	Tunisia	3,595,656
161	Turkey	34,257,211
162	Tuvalu	1,525,570
163	Uganda	8,091
164	Ukraine	7,350,603
165	United Arab Emirates	148,390,768
166	United Kingdom	798,074,868
167	United States	3,302,344,272
168	Uruguay	7,096,478
169	Uzbekistan	165,533
170	Vanuatu	240,822
171	Venezuela, Bolivarian Republic of	5,804,489
172	Viet Nam	790,350,189
173	Virgin Islands, British	13,873,255
174	Zambia	129,629
175	Zimbabwe	401,808
176	Others	377,622,245
		22,454,387,444

NOTE)

1. The Name of Countries/Territories is the standard notation used by IFRC.
2. The data reflects the contributions received from overseas and it is categorized by country/territory from where the funds were transmitted.
3. When the origin of transmission is not established, the funds are categorized as "Others" in the list.
4. The "Amount Received in JPY" is based on the rates at the time the transfers were received by JRCS.