

# Japan: Earthquake and Tsunami

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## EXECUTIVE SUMMARY

Seven years after the Great East Japan Earthquake and the Tsunami (GEJET) of 11 March 2011, some 71,000<sup>1</sup> people are still displaced from their homes, living in temporary housings, apartments provided by the municipalities or at relatives' homes. Among them, 18,987 people live in temporary homes including 8,125 prefabricated temporary homes, 9,519 private rental homes and 1,343 disaster recovery public housings.<sup>2</sup>

In Fukushima Prefecture, there are still approximately 49,434 displaced people, due to mainly by the consequence of the Fukushima Daiichi Nuclear Power Plant accident, approximately 68 per cent of these individuals have been evacuated to the outer regions of the prefecture<sup>3</sup>. Anxiety born of uncertainty about their future weighs heavily on their minds.

As of March 2018, the Japanese Red Cross Society (JRCS) has received approximately 439 billion Japanese Yen (JPY), from abroad as well as domestically, of which approximately 60 billion JPY in donations from more than 100 Partner National Societies (PNS) which was implemented by the JRCS for its relief and recovery programmes, 40 billion JPY in donations from the State of Kuwait which was allocated to the three worst hit prefectures, Iwate, Miyagi and Fukushima, and its project implementation is under the management of prefectural governments.

The remaining 339 billion JPY, including 22 billion JPY from abroad, allocated to the so-called "Gienkin" scheme or Cash Grant programme and distributed to the affected people through local governments.<sup>4</sup>

This report focuses mainly on the use of the fund of approximately 60 billion JPY which was implemented by the JRCS for its relief and recovery programmes. By the end of March 2018, 95.1 per cent of the donations was spent.

In FY 2017 (from April 2017 to March 2018), the Partnership Meeting on the Great East Japan Earthquake and Tsunami 2018 was held in February 2018 with about 50 participants from 23 Red Cross and Red Crescent Societies as well as from the IFRC.

Main achievements have been seen in capacity building for disaster preparedness, nuclear disaster preparedness, construction of disaster recovery public housings and physical rehabilitation of medical and social welfare facilities.

To list a few;

- Red Cross Disaster Preparedness Education Seminars were conducted 576 times with 28,487 participants at 41 chapters to promote the disaster preparedness education in the communities,
- Red Cross Disaster Preparedness educational material for the children of preschool age was produced.
- Meetings of Radiation Emergency Medical Care Advisors were held in July and December 2017. In these meetings, JRCS's plan for receiving inpatients from the affected area by Red Cross facilities across country was discussed.
- 447 out of planned 702 disaster recovery public housings have been constructed by 31 March 2018.
- Kesennuma Social Welfare Centre started its operation in April 2017.
- Construction of Fukushima Red Cross Hospital will be completed around August 2018.
- Psychosocial support continues in the GEJET affected area as still many people are displaced. For Fukushima Prefecture, the JRCS will continue for another three years until 2020. For the rest of the area JRCS recovery and rehabilitation activities have been completed.

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

<sup>1</sup> Reconstruction Agency. *Zenkoku no Hinansha-su* (Number of evacuees nationwide), *Heisei 30nen 3gatsu 30 nichi* (30 March 2018).

<sup>2</sup> Reconstruction Agency. *Fukko no Jokyō to Torikumi* (Current situation of reconstruction and challenges), January 2018

<sup>3</sup> *Ibid.*, 1. *Shōzaitodofukenbetsu no Hinansha-su* (Number of evacuees in each prefecture), 15 March 2017.

<sup>4</sup> The total amount of the Cash Grant Program received during FY 2017 was about JPY 1,294,985,000 JPY. Japanese Red Cross Society. *Annual Report 2017-2018*.

## HIGHLIGHTS OF PROGRESS IN 2017

In 2017 (covering from April 2017 to March 2018), the main progress of each programme is highlighted below. As to the progress of each programme, please see “PROGRESS TO DATE” from page 34.

### **Programme 4: Assistance for Victims of Nuclear Power Plant Disaster**

#### **4.2.1 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 2017, the NDRC posted two special reports, “Chernobyl Humanitarian Assistance and Rehabilitation Programme” and “Home visits for evacuee’s health care (Iwaki, Fukushima)” .

#### **4.2.2 Radiation Emergency Medical Care Advisors Meeting**

Radiation Emergency Medical Care Advisors Meeting was held twice on 6 July and 18 December 2017, where Japanese Red Cross Fukui Hospital and Japanese Red Cross Nagahama Hospital, which were designated as Nuclear Disaster Core Hospitals, gave a presentation individually about community initiatives for nuclear disaster medical response and their roles as Nuclear Disaster Core Hospitals.

#### **4.2.3 JRCS Nuclear Disaster Response Basic Training Session**

The JRCS organized three sessions in its operational blocks on 3 June, 16 June 2017 and 24 January 2018, where groupworks were conducted to establish relief activities plans according to the municipal evacuation order under the assumption that a nuclear power station accident happened within or nearby each block area.

#### **4.2.4 Production of a Booklet on “Communication with Affected People during Nuclear Disaster**

Based on a reflection on Fukushima Daiichi Nuclear Power Plant accident, the booklet was created for the purpose to ensure that the relief teams will be able to establish better communication with affectees and provide the very support they need at times of nuclear disaster. It covers the basic information such as the methodology of relief activities, psychological status of affectees, and establishing communication with affectees (presented with dialogue examples).

### **Programme 5: Rehabilitation of Health Infrastructure**

#### **5.9 Construction of Fukushima Red Cross Hospital (Fukushima)**

The construction of Fukushima Red Cross Hospital started in October 2016 and will be completed by August 2018. The hospital will be operational in 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 chapter in Iwate. Beneficiaries, who usually stayed at home alone, were invited to participate in Nordic-style walks, tea parties, health and social classes, and health consultation.

In 2017, 69 events with 1,028 participants were held in Iwate and 8 events with 552 participants were held in Fukushima.

#### **6.7 Disaster Recovery Public Housing in Otsuchi**

In September 2016, due to the rising costs of labors and building materials, Otsuchi town has reviewed the total number of housing units to be constructed in Otsuchi town from 730 to 702 units. Among 702 units, 452 units are under the management of Otsuchi town, and 250 units are under the management of Iwate prefecture. By the end of 2017, 447 housing units were completed. Construction of the housing in Machikata continues.

## **6.9 Nordic-style Walking**

In 2017, 69 events with 1,028 participants were held in Iwate and 8 events with 552 participants were held in Fukushima.

## **6.10 Health and Social Classes**

Various activities such as RC First Aid classes, hot meal kitchens, tea parties, and handicraft courses have been organized in Fukushima and Miyagi Prefectures. In 2017, at Miyagi Prefecture, RC First Aid Classes were held 201 times with 7,815 participants. In Fukushima Prefecture, 234 classes with 5,993 participants were implemented.

## **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. Construction of the buildings was started in December 2015 and completed in December 2016. The opening ceremony was held on 14 April 2017, with attendance of the President and the staff of the TRCO and the Taipei Economic and Cultural Representative Office in Japan (TECRO). It started its operation in April 2017.

## **Programme 8: Children's Education Support**

### **8.16 Other Activities**

A work place experience programme for students was carried out at JRC Morioka Hospital in Iwate with 91 participating students.

## **Programme 10: Capacity Building for Disaster Preparedness**

### **10.2 Disaster Preparedness Training for community members**

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 a disaster in the community. In 2017, the Red Cross Disaster Preparedness Seminar was held 576 times in 41 JRCs Chapters with 28,487 participants.

### **10.4 Disaster Preparedness Education Programme for Junior Red Cross/Red Cross Youth**

This project started in 2014. After Hanshin-Awaji Earthquake in 1995 and the GEJET in 2011, it has been well understood that the knowledge of life saving and disaster preparedness skills are extremely crucial for survival in times of disaster. The project aims to teach elementary, junior high and high school students those knowledge and skills that will protect themselves during disasters. It also aims to build better understanding and awareness of preparedness among families of the students and their communities. In 2018, JRCs completed a disaster preparedness educational material for preschool children jointly with a non-profit organization, Plus Arts, (During the development process, it has tested and validated the prototype at 14 kindergartens and nursery schools across the country.)

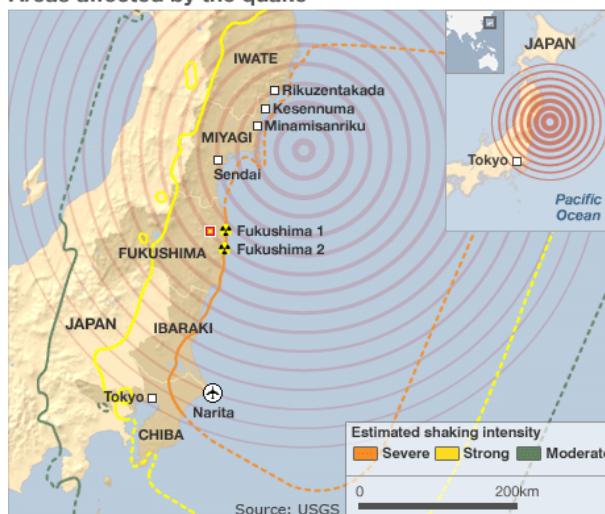
From 2 to 3 February 2018, the JRCs participated in the large-scale earthquake preparedness awareness event in Tokyo sponsored by Japan Meteorological Agency and Cabinet Office, where the JRCs introduced the disaster preparedness educational material for preschool children.



## CONTEXT

On 11 March 2011 at 02:46 PM, Japan was struck by a magnitude 9.0 earthquake<sup>5</sup>, 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 km<sup>2</sup> 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 9 June, 2017, a total of 15,894 people were confirmed dead and 2,550 are still missing<sup>6</sup>. 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”.<sup>7</sup> It turns 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. Furthermore, JRCS provided the emergency relief activities to the affected people based on the Disaster Relief Act, although they are not included in this report.

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, seven years after the disaster, as of 15 March 2018, an estimated 71,300 people are still displaced, including 49,434 from Fukushima, 8,502 from Miyagi, and 8,364 from Iwate,<sup>8</sup> and their future remains uncertain.

The central and local governments are making the utmost efforts to develop residential land properties, and to construct disaster recovery public housings for the evacuees. As of 31 March 2018, in Iwate, Miyagi, and Fukushima, 28,496 units of public disaster recovery housings were completed which represent 95.7 per cent of the total planned units (29,754 units), and 16,190 private residential land properties were developed which represent 88.8 per cent of the total planned unit (18,226 units) in these three prefectures.<sup>9</sup> However, the schedule of the construction has been considerably delayed, and has been affected to the relocation of the displaced people.

<sup>5</sup> The epicenter is 130 kilometers from Japan’s northeast Pacific coast.

<sup>6</sup> National Police Agency of Japan. Emergency Disaster Countermeasures Headquarters. *Heisei 23 nen (2011 nen) Tohoku-Chiho Taiheiyō-oki Jishin no Higai-Jokyo to Keisatsu-Sochi* (Damage Situation and Police Countermeasures associated with 2011 Tohoku district - off the Pacific Ocean Earthquake), 9 June 2017.

<sup>7</sup> 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>>

<sup>8</sup> *Ibid.*, 1. Of 49,434 people, approximately 33,976 people are displaced to other prefectures, and 15,458 people are displaced, but still in Fukushima.

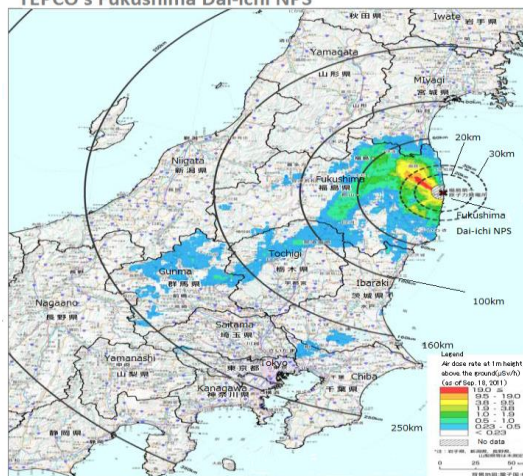
<sup>9</sup> Reconstruction Agency. *Higashi-Nippon-Daishinsai Hisaisha-muke Saigai-Koei-Jutaku oyobi Minkan-Jutaku-to-yo Takuchi no Kyokyo Jokyo* (Heisei 30 nen3 gatsu matsu genzai) nitsuite (Situation of supply of public disaster housing and private residential land properties for the disaster-affected, as of 31 March 2018). [http://reconstruction.go.jp/topics/main-cat1/sub-cat1-12/20180518\\_jutakukyokyo.pdf](http://reconstruction.go.jp/topics/main-cat1/sub-cat1-12/20180518_jutakukyokyo.pdf). The

As of January 2018, approximately 18,987 displaced people (23 per cent of the total number of displaced people) are living in temporary housings which includes 8,125 people still living in prefabricated housing designed for short-term accommodation<sup>10</sup>.

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 31 March 2018, a total of 3,620 cases had been reported as “disaster-related deaths”<sup>11</sup> in Iwate, Miyagi, and Fukushima which represents an increase of 152 deaths since 30 September 2016.

Among those 152 new cases, 141 cases (approximately 92 percent) were registered in Fukushima. As the result, it holds the highest total number of “disaster-related deaths” (2,227 cases<sup>12</sup>), and it is the only prefecture where the disaster-related fatalities outnumber the direct GEJET disaster deaths. It shows the prolonged impact of the nuclear disaster on the survivors in Fukushima.

Radioactive Pollution Caused by the Accident at TEPCO's Fukushima Dai-ichi NPS



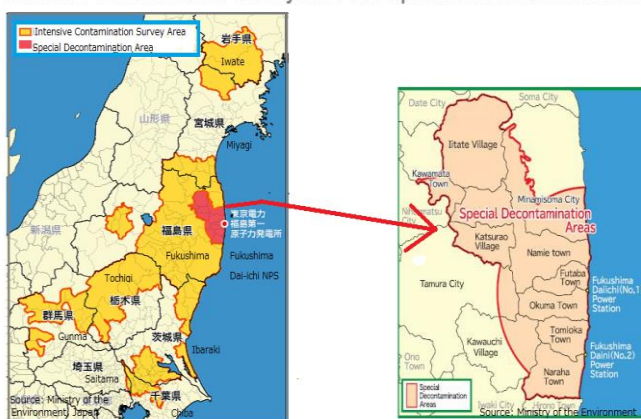
Source: Ministry of the Environment, Japan. Map: Geospatial Information Authority of Japan

### The prolonged impact of the nuclear disaster in north-eastern Japan including Fukushima

The map on the left, the “Radioactive Pollution Caused by the Accident at TEPCO’s Fukushima Dai-ichi NPS (as of September 2011)”<sup>13</sup> shows the widespread effects on *Tohoku* (north-eastern) region of Japan. Its effects dispersed in 8 prefectures including Fukushima, Iwate, Miyagi, Tochigi, Gunma, Ibaraki, Chiba and Saitama.

On 28 December 2011, based on the Act on Special Measures Concerning the Handling of Radioactive Pollution, the central government designated 11 municipalities in Fukushima for “Special Decontamination Areas” and 102 municipalities in the above 8 prefectures for “Intensive Contamination Survey Areas”<sup>14</sup>

Intensive Contamination Survey Area and Special Decontamination Area



### “Special Decontamination Areas”

11 municipalities in Fukushima where were former restricted zone or planned evacuation zone within 20 km from the Nuclear Power Station, or annual cumulative dose was more than 20 mSv. Decontamination was implemented by the central government<sup>15</sup>.

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.

<sup>10</sup> *Ibid.*, 2 Hisaisha Shien (Support to the affected people)

<sup>11</sup> Reconstruction Agency. *Higashi-Nippon-Daishinsai ni okeru Shinsai-kanren-shi no shisha-su (Heisei 30 nen 6 gatsu 29nichi)* (Number of Disaster-related death due to the Great East Japan Earthquake, as of 31 March 2018), [http://www.reconstruction.go.jp/topics/main-cat2/sub-cat2-6/20180629\\_kanrenshi.pdf](http://www.reconstruction.go.jp/topics/main-cat2/sub-cat2-6/20180629_kanrenshi.pdf). 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.

<sup>12</sup> *Id.*

<sup>13</sup> Ministry of the Environment, Japan. *Progress on Off-site Cleanup Efforts in Japan (April 2014)*.

<sup>14</sup> Ministry of the Environment, Japan. *Hodohappyo shiryō, “Houshaseibussshi osen taisho tokusoho-ni motodoku osen haikibutsu-taisaku-chiiki, osen-tokubetsu-chiiki oyobi osenjokyo-juten-chosa-chiiki-no shitei-ni tsuite” Heisei 23nen 12gatsu 19nichi*.

<sup>15</sup> *Id.*

### “Intensive Contamination Survey Areas”

92 municipalities in 8 prefectures where the radiation exposure was 0.23 mSv/h or more<sup>16</sup>.

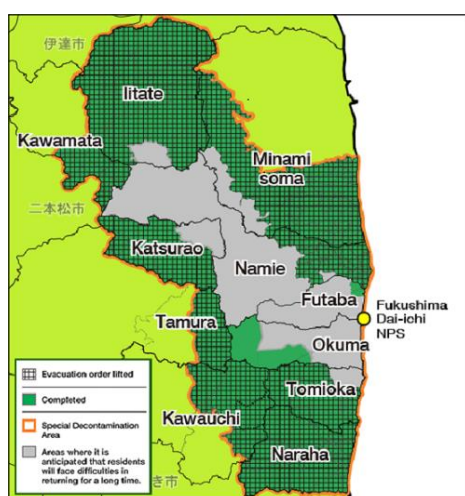
Decontamination work had been completed by each municipality by March 2018. The central government took financial and technical measures<sup>17</sup>.

Fukushima holds 47 municipalities including all 11 municipalities of “Special Decontamination Area<sup>18</sup>”, and 41 municipalities of “Intensive Contamination Survey Area”. It represents the effects of radioactive pollution have been concentrated in Fukushima.

In order to counter the radioactive pollution, planning and implementation of decontamination works in Fukushima have been carried out since January 2012 based on the Act<sup>19</sup> and have been completed in Fukushima by March 2017 based on the decontamination implementing plan<sup>20</sup>

### Current progress of the decontamination efforts by 31 March 2018

#### Progress in the Special Decontamination Area (as of April 1, 2017)



Ministry of the Environment, Japan. Progress in the Special Decontamination Area (as of April 1, 2017)

#### Special Decontamination Area

All 11 municipalities in Fukushima completed the full-scale decontaminations except the Area where Returning is Difficult (ARD) by 31 March 2017<sup>21</sup>.

The decontamination works in 22,000 residential area, 8,500 ha farmlands, 5,800 ha forest, 1,400 ha road were completed by 31 March 2017.<sup>22</sup>

Effects of Decontamination work is in residential areas, the air dose rate at the height of 1m from the ground has been decreased 73 % after the post decontamination monitoring which was implemented after 6 months to a year after the decontamination work.<sup>23</sup>

#### Intensive Contamination Survey Areas

All 92 municipalities completed the decontamination work except ARD by 31 March 2018. In total, the decontamination work of 566,239 housings, 23,761

public facilities, 32,649 ha of farmlands, 4,778 ha of forest and 24,240 km of roads were completed<sup>24</sup>. 92 municipalities designated in 8 prefectures as follows<sup>25</sup>:

- Iwate: 3 municipalities,
- Miyagi: 8 municipalities,
- Fukushima: 36 municipalities,
- Ibaraki: 19 municipalities,
- Tochigi: 7 municipalities,
- Gunma: 8 municipalities,
- Saitama: 2 municipalities,
- Chiba: 9 municipalities<sup>26</sup>

<sup>16</sup> *Id.* Later, it has been revised as the additional exposure is 1 mSv/year or more.

<sup>17</sup> *Ibid.*, 15. Ministry of the Environment, Japan. Josen Joho saito

<sup>18</sup> *Act on Special Measures Concerning the Handling of Radioactive Pollution* (1 January 2012).

<sup>19</sup> *Ibid.*, 15.

<sup>20</sup> *Ibid.*, 2.

<sup>21</sup> Ministry of the Environment, Japan. *Progress on Off-site Cleanup and Interim Storage Facility in Japan*, May 2017

<sup>22</sup> *Id.*

<sup>23</sup> Ministry of the Environment, Japan. *Environmental Remediation in Affected Areas in Japan*, October 2018. *Effects of Decontamination in SDA*. [http://josen.env.go.jp/en/pdf/environmental\\_remediation\\_1810.pdf](http://josen.env.go.jp/en/pdf/environmental_remediation_1810.pdf)

<sup>24</sup> *Ibid.*, 15

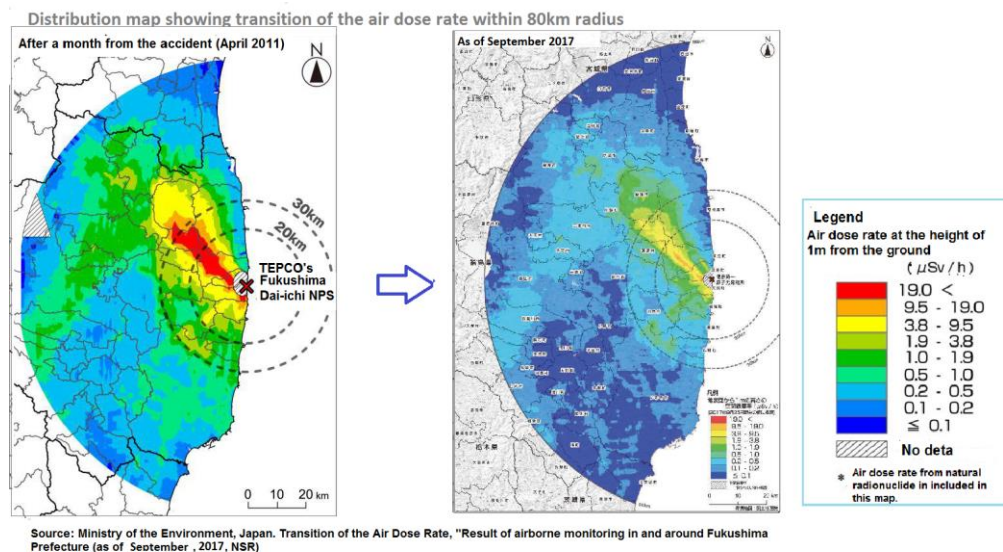
<sup>25</sup> Ministry of the Environment, Japan. *Hodo Happyo Shiryo "Housha-sei busshitsu osen taisho tokusochiho-ni motodoku osenjokyo jutten chosa chiiki-no shitei-no kaijo-ni tsuite (Heisei 29nen 3gatsu 17nichi). Sankou2: koremade-ni osenjokyo jutten chosa chiiki-no shitei-wo kaijo shita shichoson (Heisei 29nen 3gatsu 17nichi jiten).*

<sup>26</sup> *Id.*



### Transition of the Air Dose Rate

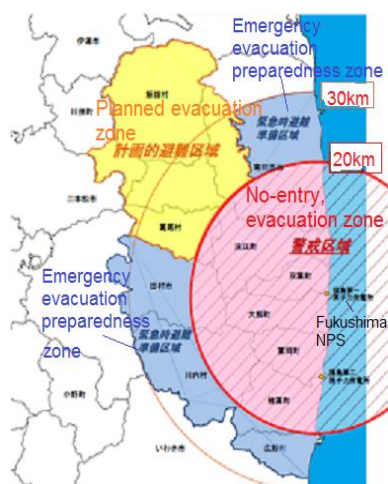
According to the result of airborne monitoring in and around Fukushima Prefecture (as of September 2017, NSR), the air dose rate has been decreased 74 % compared to the rate in November 5, 2011<sup>27</sup>. The transition of air dose rate shows decreasing of the air dose.



### Status of the Areas to which Evacuation Order have been issued

The evacuation orders were issued for the aim to protect residents' lives from physical dangers immediately after the Nuclear Power Plant accident on 11 March 2011. When the amount of the emitted radioactive materials was predicted, the central government issued instructions for the designation of evacuation zones to the governor of Fukushima Prefecture on 22 April 2011. The designation of evacuation zones as follows:

- No-entry and evacuation zone: Entries are prohibited. Within 20 km radius from the Fukushima Daiichi Nuclear Power Station.



Status of the evacuation orders (as of 22 April 2011), Fukushima prefecture April 2017

- Planned evacuation zone: Residents are requested to evacuate in a planned manner to another location<sup>28</sup>. Cumulative dose could reach 20 mSv in the period of one year following the accident. Outside of 20 km radius from the Fukushima Daiichi Nuclear Power Station.
- Emergency evacuation preparation zone: Preparation should be made for the residents to take shelter indoors or evacuate by their own means in the event of an emergency. Within 20-30 km radius from the Nuclear Power Station.<sup>29</sup>

On 30 September 2011, the designation of emergency evacuation preparation zone was lifted as the safety was confirmed by the result of assessment of the amount of radiation air dose rate and the nuclear power reactor condition<sup>30</sup>.

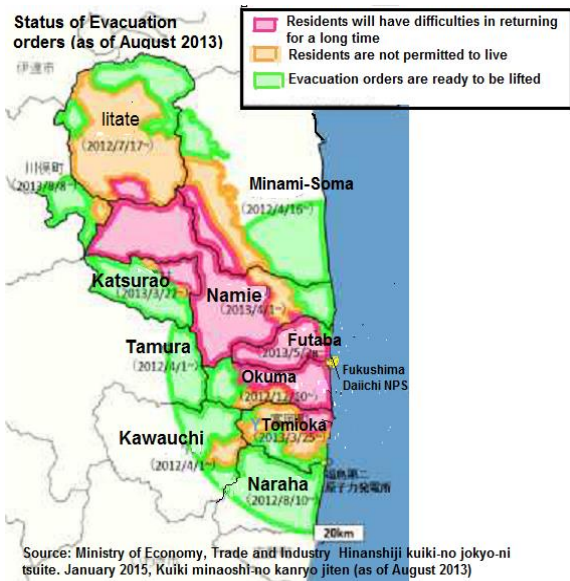
Accordingly, both "planned evacuation zone" and "no-entry and evacuation zone" were reorganized into three categories of areas according to the annual cumulative dose on 1 April 2012 as follows:

<sup>27</sup> Ministry of the Environment, Japan. *Fuhyo no fussyoku ni mukete, 2018 nen 4 gatsu. Transition of the Air Dose Rate, "Result of airborne monitoring in and around Fukushima Prefecture (as of September, 2017, NSR)"*

<sup>28</sup> Press briefing at the Prime Minister's Office for member of the foreign press, 22 April 2011

<sup>29</sup> *Id.*

<sup>30</sup> Ministry of Economy, Trade and Industry Nuclear Emergency Response Headquarter. *Kinkyuji hinan junbi kuiki-no kaijo-ni tsuite, Heisei 23nen 9gatsu 30nichi.*

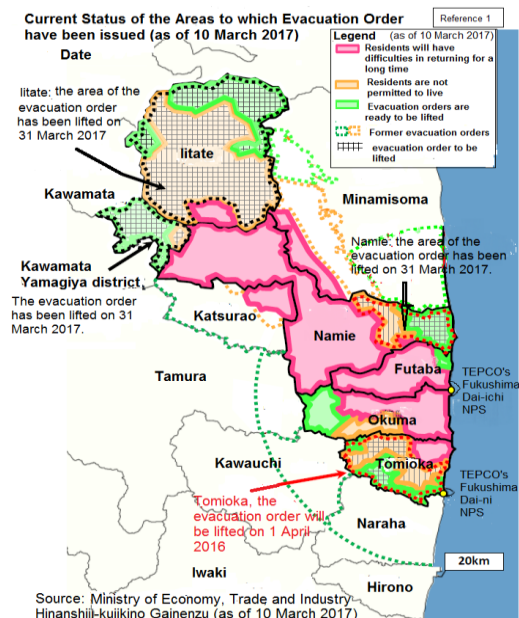


- Areas where Returning is Difficult (ARD): annual cumulative dose could reach more than 50 mSv, and there are some possibilities that annual cumulative dose could not decrease less than 20 mSv in five years.
- Residents are not permitted to live: annual cumulative dose could reach more than 20 mSv. Temporary staying and entries for rehabilitation are permitted.
- Evacuation orders are ready to be lifted: annual cumulative dose could not reach more than 20 mSv. Temporary staying for evacuees and operation of a part of business, hospitals, welfare facilities are permitted<sup>31</sup>.

Since April 2014, the central government has gradually lifted in the following nine municipalities the evacuation orders except ARD:

- Tamura City on 1<sup>st</sup> April 2014<sup>32</sup>,
- Kawauchi Village on 1<sup>st</sup> October 2014<sup>33</sup>.
- Naraha Town on 5<sup>th</sup> September 2015,<sup>34</sup>
- Katsurao Village (partial lifting) on 12<sup>th</sup> June 2016<sup>35</sup>,
- Hagi and Kainotsuka-chiku of Kawauchi Village on 14<sup>th</sup> June 2016<sup>36</sup>,
- Minami-Soma City (partial lifting) on 12<sup>th</sup> July 2016,<sup>37</sup>
- Yamagiya district of Kawamata Town on 31 March 2017,<sup>38</sup>
- Iitate Village and Namie Town (partial lifting) on 31 March 2017<sup>39</sup>,
- Tomioka Town (partial lifting) on 1 April 2017<sup>40</sup>

Although, there are still two towns, Futaba and Okuma, where the inhabitancy has been restricted since December 2011<sup>41</sup>. In both towns, 96 % of the area of the town was designated as ARD. Reconstruction projects in the ARD were started in early FY 2017.



<sup>31</sup> Ministry of Economy, Trade and Industry, Nuclear Emergency Response Headquarters. *Keikaikuiki, hinanshijikuiki-to-no minaoshi-ni tsuite, Heisei24nen 3gatsu 30nichi*.

<sup>32</sup> Ministry of Economy, Trade and Industry, Nuclear Emergency Response Headquarters. *Tamurashi-ni okeru hinanshijikuiki-no kaijo-ni tsuite, Heisei26nen 3gatsu 10ka*.

<sup>33</sup> Ministry of Economy, Trade and Industry, Nuclear Emergency Response Headquarters. *Kawauchi-mura-no hinanshiji-kuikino kaijo-ni tsuite, Heisei26nen 9gatsu 12nichi*. Evacuation order was lifted for limited to the Former Areas to which evacuation orders are ready to lift.

<sup>34</sup> Ministry of Economy, Trade and Industry, Nuclear Emergency Response Headquarters. *Naraha-cho-ni okeru hinanshijikuiki-no kaijo-ni tsuite (Heisei27nen 7gatsu 6ka)*.

<sup>35</sup> Ministry of Economy, Trade and Industry, Nuclear Emergency Response Headquarters. *Katsurao-mura, Kawauchi-mura-no hinanshijikuiki-no kaijo-ni tsuite (Heisei28nen 5gatsu 19nichi)*, *Katsurao-mura, Kawauchi-mura, Minami-soma-shi-ni okeru hinanshijikuiki-no kaijo-ni tsuite (Heisei28nen 5gatsu 31nichi)*.

<sup>36</sup> *Id.* The evacuation order was lifted on Hagi and Kainotsuka-chiku where was reorganized from the area "Residents are not permitted to live" (20msv/y-50msv/y) into the area "Evacuation orders are ready to be lifted" (-20msv/y).

<sup>37</sup> *Ibid.*,44

<sup>38</sup> Ministry of Economy, Trade and Industry, Nuclear Emergency Response Headquarters. *Kawamata-cho-ni okeru hinanshiji-kuiki-no kaijo-ni tsuite (Heisei28nen 10gatsu 28nichi)*. Temporary staying in Kawamata has been implemented since 31 August 2015.

<sup>39</sup> Ministry of Economy, Trade and Industry, Nuclear Emergency Response Headquarters. *Iitate-mura-ni okeru hinanshiji-kuiki-no kaijo-ni tsuite (Heisei28nen 6gatsu 17nichi)*, *Namie-cho-ni okeru hinanshiji-kuiki-no kaijo-ni tsuite (Heisei29nen 3gatsu 10ka)*.

<sup>40</sup> Ministry of Economy, Trade and Industry, Nuclear Emergency Response Headquarters. *Tomioka-cho-ni okeru hinanshiji-kuiki-no kaijo-ni tsuite (Heisei29nen 3gatsu 10ka)*.

<sup>41</sup> *Ibid.*,53

In May 2017, the government revised the policy “For Accelerating the Reconstruction of Fukushima from the Nuclear Disaster”<sup>42</sup>. It has enabled the establishment of reconstruction stranglehold in ARD. By coordinating with responsible ministries, decontamination works, restoration of infrastructure, and resumption of services necessary for daily life are proceeded in an integrated manner. Municipalities holding the area designated as ARD including Futaba, Okuma, Namie, Tomioka, Iitate, and Katsurao Town, submitted their plans of establishment of the reconstruction strangleholds in ARD. All of them were approved by the central government by May 2018.<sup>43</sup>

For instance, in Futaba Town, consolidating the environment for returning home has been proceeded since the reconstruction plan approved by the government in September 2017.

- In spring, 2020, the evacuation order will be lifted for the area where “Evacuation orders are ready to be lifted” (It constitutes 4 per cent of the town) and in a part of the area near Futaba train station. As Joban JR line will be operational from 2020, the lifting the evacuation order is expected to promote both workers and visitors to move around actively in the town.
- In spring, 2022, the evacuation order will be lifted for the area of Futaba Town reconstruction stranglehold in ARD. The inhabitancy will be started.

As of 31 March 2018, 6,042 residents of Futaba Town have been evacuated to all over the country including 3,830 within Fukushima Prefecture, and 2,211 outside Fukushima Prefecture<sup>44</sup>.

In Okuma Town, approximately 96% area of the town including major its functions was designated the ARD in December 2012, and the town assembly subsequently adopted a 5-year no return policy.<sup>45</sup> Okuma Town developed Okawara district designated as “Residents are not permitted to live” as the radiation dose was comparatively low according to “The vision for making Okuma Town” established in 2013.

As for ARD, there was no full-scale decontamination plan for almost five years. It was not until August 2015 when the previous decontamination work started in ARD.<sup>46</sup> Following the approval of Okuma Town’s Special reconstruction plan by the central government, the decontamination work was implemented in the center of the town including Shimonokami district in November 2017.

As of 1 March 2018, 10,500 residents of Okuma Town have been evacuated to all over the country including 7,960 residents within Fukushima Prefecture, and 2,540 residents outside Fukushima.

### **The returning of evacuees in Fukushima after the evacuation orders were lifted as of 31 March 2018**

Returning of residents have been proceeding in the municipalities where the evacuation orders have been lifted.

For instance, in Tamura City, 4 years have passed since the evacuation order was lifted on 1 April 2014. As of 31 March, 2018, 3,310 people (90.9 %) returned to their home town, and 333 people (10%) are still not. Among the evacuees, 136 people stay in Tamura City, 143 people are within Fukushima Prefecture, and 54 people stay outside Fukushima. It seems that returning of the residents is proceeding well in Tamura City<sup>47</sup>.

While in Naraha Town where 2.5 years have passed since the evacuation order was lifted in September 2015, only 2,929 people (41.5%) returned to Naraha Town as of 31 March 2018. The number of the returned increased after the lease term of temporary housings by the government was expired on 31 March 2017.<sup>48</sup>

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<sup>42</sup> Ministry of Economy, Trade and Industry, Nuclear Emergency Response Headquarters. *Genshiryoku saigai-karano Fukushima fukko-no kasoku-nimukete (Heisei25nen 12gatsu 20 ka) (For accelerating the reconstruction of Fukushima from the nuclear disaster, as of 20 December 2013)*.

<sup>43</sup> Reconstruction Agency. *The Process and Prospects for Reconstruction, March 2017, Tokutei fukko saisei kyotenkuiki fukko saisei keikaku*.

<sup>44</sup> Futaba Town, *Hinanjokyo (Heisei30nen 3gatsu 31nichi)*. <https://www.town.fukushima-futaba.lg.jp/5955.htm>

<sup>45</sup> Okuma town. *Reconstruction Information*, <https://www.town.okuma.fukushima.jp/site/fukkou/1905.html>  
<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.

<sup>46</sup> *Ibid.*, 52

<sup>47</sup> Tamura City. *Tamura shimin-no hinanjokyo doko chosa houkoku (Tamura City, Situation of evacuees)*, March 2018.

<sup>48</sup> Naraha town. *Naraha-cho-nai kyojusya shukeihyo, Heisei 30nen 3gatsu 31nichi*.

The elementary and junior high schools restarted in April 2017 and Naraha municipal office provided students with school lunches, school bus and transport fees to promote their return. However, as of 31 March 2018, only 116 students (11 % of students registered in Naraha Town before GEJET<sup>49</sup>) returned to schools in Naraha Town. The other 749 students, including 658 students evacuating within Fukushima Prefecture and 91 students outside Fukushima, still remain at schools where they are evacuating<sup>50</sup>.

In Namie Town, its population was about 20,000 before GEJET. As of February 2018, 516 people returned to Namie Town and 20,620 people including 2,764 children are still evacuating.

According to the survey to families who have their population registries in Namie town conducted by the Reconstruction Agency, Fukushima Prefectural government and Namie town in 2017, 49.5% of the people answered “they will not return to the town”, and 13.5% said “they will return to the town”.

Among those who answered, “they will return to the town”, 40% answered “part of the family members will return”, and 26% did “all the family members will return”.<sup>51</sup> As the elementary and junior high schools will resume in 2018, it is expected that some of families with children will return to the town.

As of 1 October, 2017, there are 18,054 children evacuated including 10,080 children (55.8%) within Fukushima and 7,974 children (44.1%) outside Fukushima.<sup>52</sup> The municipalities in Fukushima are making efforts to promote their return to home towns.

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<sup>49</sup> Fukushima minpo. *Gnenburi jimotode saikai Kodaka, and Naraha-no shochugakko*, 7 April 2017.

<sup>50</sup> Fukushima Prefecture, Higashinihon daishinsai ni kakaru kodomo-no hinanshasu shirabe (2018nen 4gatsu 1nichi).

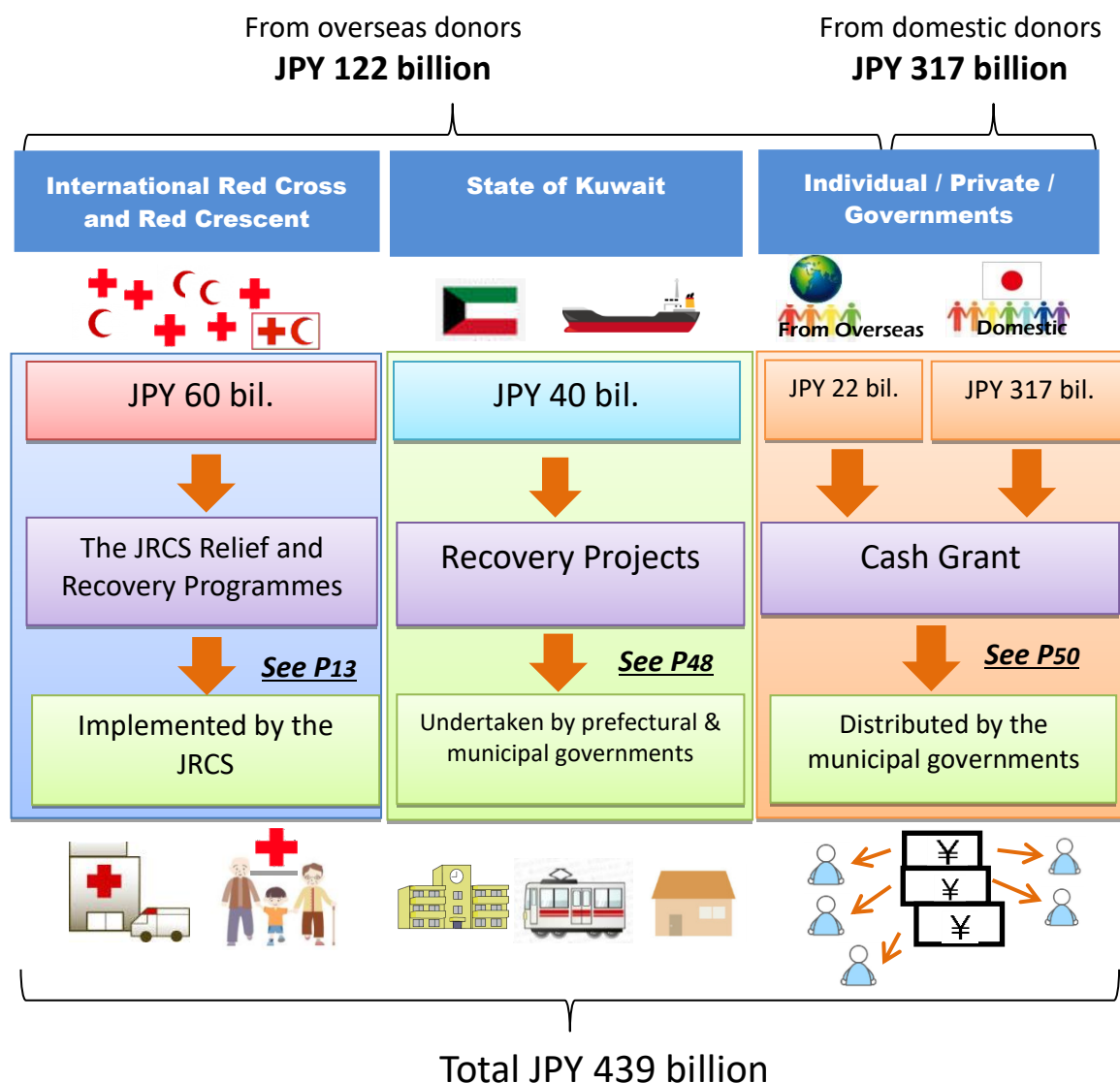
<sup>51</sup> Reconstruction Agency, Fukushima Prefectural Government, Namie Town, *Namie machi Jumin iko chosa hokokusho* (Heisei 30nen 3gatsu).

<sup>52</sup> *Ibid.*, 53.

## USE OF FUNDS

By 31 March 2018, the JRCS received JPY 439 billion including JPY 122 billion from overseas, and they were allocated into the following four categories:

1. JPY 60 billion: Received from Partner National Societies (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 governments<sup>53</sup> in support of recovery projects on which they took the lead (see the page 51-52 for details).
3. JPY 22 billion: Received from foreign governments, embassies, corporates and individuals, JPY 22 billion were allocated for the Cash Grant Scheme(see the page 56-57 for details).
4. JPY 317 billion: Received from domestic donors (i.e. individuals, corporates, and other institutions), these were also allocated for the Cash Grant Scheme.



<sup>53</sup> The three most GEJET affected prefectural governments are Iwate, Miyagi and Fukushima.



While JRCS provided relief activities by utilizing donations from abroad, it also conducted emergency relief activities to the affected people based on the Disaster Relief Act in Japan. As these latter relief activities were subsidized by the government, they were not included in this report.

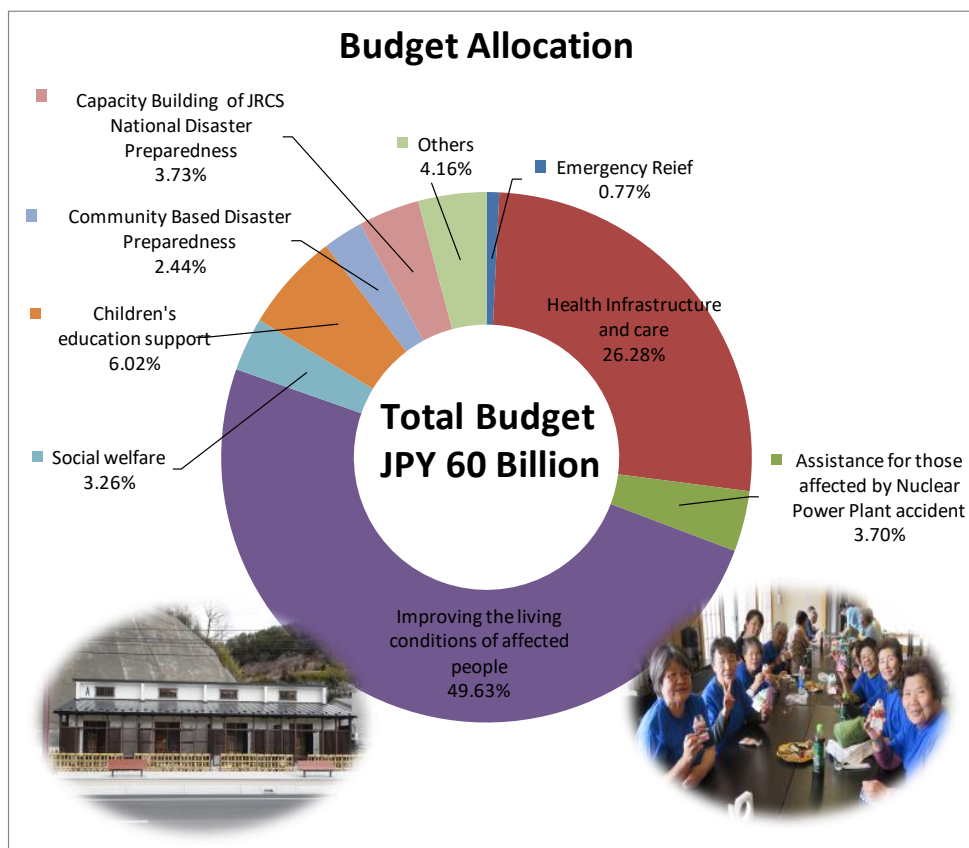
## PLAN OF ACTION (PoA)

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)



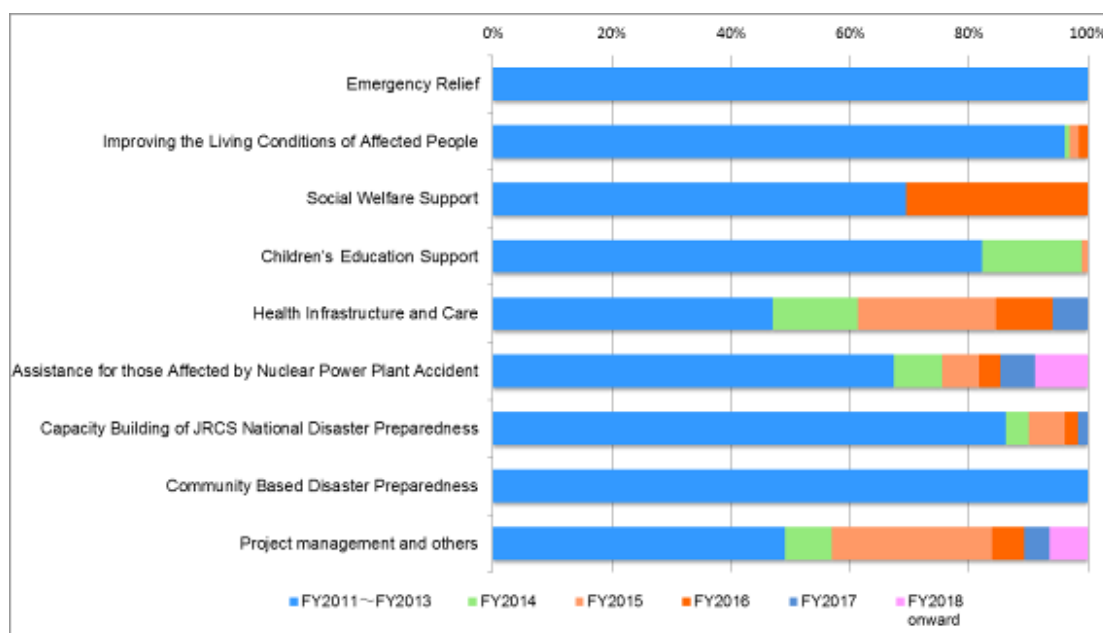
## Plan of Action and Budget Allocation

Japanese Yen (JPY) in thousand

Program		[Status] CMPL: Completed / OG: Ongoing / NEW: New			
Project					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	993,296
		4-(3)	CMPL	Provision of food radiation measuring equipment	222,626
5	Rehabilitation of health infrastructure	5-(1)	CMPL	Construction of a temporary night-time emergency medical centre (Ishinomaki)	108,950
		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)	4,301,430
		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	Installation of electric appliances and other items at large-scale evacuation centres and temporary housing	326,707
		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	37,181
		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)	CMPL	Construction of community centres	170,085
		6-(9)	OG	Nordic style walking as physical exercise	24,353
		6-(10)	OG	Health and Social Class	127,936
		6-(11)	CMPL	Home visits for evacuee's health care (Iwaki, Fukushima)	77,966
		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	116,181
		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)	CMPL	Social welfare centre (Kesenuma, 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	980,767
		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	192,629
		8-(14)	CMPL	Establishment of "Children's World"	63,899
		8-(15)	CMPL	"Dream Blossom" Project	2,817
		8-(16)	OG	Miscellaneous	15,964
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	115,582
		10-(3)	CMPL	Mobilization of Youth Volunteers for disaster management	12,949
		10-(4)	OG	Disaster Preparedness Education Program for Junior Red Cross/Red Cross Youth	56,985
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.	248,047
13	Project management and support	13-(1)	N/A	HR, consultancy, audit, evaluation, support by IFRC	2,094,448
TOTAL					60,148,339

## OVERVIEW OF RELIEF AND RECOVERY OPERATION

As of March 31, 2018 a total of JPY 57.2 billion or 95.1 per cent of the 60.14 billion budgets had been spent leaving JPY 2.94 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 youth activities (under Children's Education) was completed in 2017, and psychosocial support (under Improving the Living Conditions) will be continued until 2018 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 33 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.

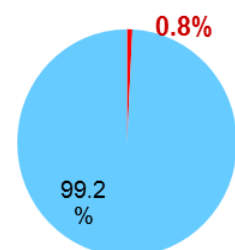
The funds were urgently allocated for deployment and activities carried out by medical/PSP teams, provision of relief items, and support to the JRCS chapters to facilitate warehousing/dispatch of relief supplies.

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 mobilized. 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 mobilizing 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 463 million  
Balance: JPY 0 million

as of March 2018

## 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.

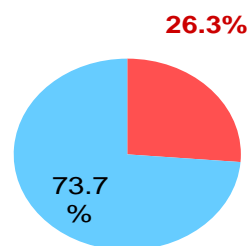
Immediately following the disaster, the risk of pneumonia infection rose significantly due to the harsh living conditions and unusually cold weather. The elderly was particularly susceptible as many had to endure overcrowded indoor camp settings and numerous transfers during evacuation. The JRCS thus launched a vaccination campaign in the three most disaster 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 have been reinforcing. 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 strengthened its emergency ward capacity by adding 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. With increased demand for services and the need to strengthen its capacity in disaster response, a new JRC Fukushima hospital is under construction to a new location nearby.

To date, one health facility was rehabilitated, and five health facilities and one social welfare facility were constructed. The construction of Fukushima Red Cross Hospital has started in October 2016 and will be completed around August in 2018.

### Budget Allocation



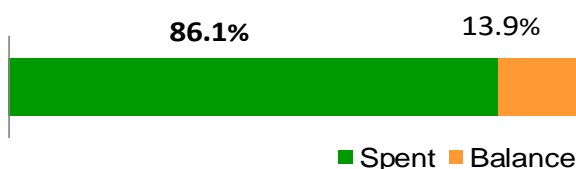
Budget :JPY 15.8 billion

Pneumonia vaccination for elderly	437,856 people
Provision of air purifiers	4 machines
Constructed or Rehabilitated health facilities	6 facilities
Construction of health facilities ongoing	1 facility
Constructed a social welfare facility	1 facility



Construction site of the Fukushima Red Cross Hospital. It will be completed in August 2018. ©JRCS

### Expenditure on Health Infrastructure and Care



Budget: JPY 15.8 billion  
Spent: JPY 13.6 billion  
Balance: JPY 2.2 billion

As of March 2018



## 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 (NDRC).

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.

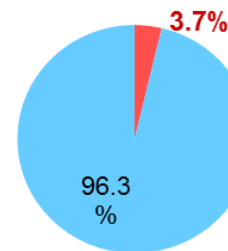
Under this project, 73 items of medical equipment were also procured for Fukushima Medical University Hospital to meet the needs of an increasing number of patients requiring medical check-ups, and 109 units of food radiation measuring equipment were provided in Fukushima and Miyagi to address the unease 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 2015<sup>54</sup>.

During the development process of the guidelines, the Committee identified 11 challenges which need to continue to be considered. For example, in correspond to the challenge, "Necessary arrangement to secure the security and health of the staff and family in the nuclear disaster affected area", the "Guidance for security management of staff in the affected area under nuclear disaster" and a booklet on "how to protect health of you and your family under nuclear disaster" were produced and distributed in March 2016.

In order to correspond to the challenge, "Realization of the Guidelines content", 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. In 2017, JRCS held the Nuclear Disaster Response Basic Training Sessions in its three operational blocks on 3 and 16 June 2017 and 24 January 2018, and conducted groupworks to establish relief activities plans per the municipal evacuation order with the assumption that a nuclear power station accident happened within or nearby each block area.

### Budget Allocation



Budget : JPY 2.2 billion

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



Radiation dosimeter training of JRCS Nuclear Disaster Response Basic Training Session in 2017. ©JRCS



原子力災害時に  
あなたとあなたの家族の健康を守るために

私達は、平時だけでなく、災害時に被災者の救護や  
救護を行う使命があります。  
しかし、いざ原子力災害となると「なんとなく恐  
い」と不安に感じることがあるかもしれません。  
原子力災害時にも安心して活動し、健康に暮らして  
いくために、知っておくべき安心できる放射線に関  
する基礎知識を、いつでも持ち歩けるポケットサイ  
ズにまとめました。  
放射線について正しく理解し、正しく身を守りま  
しょう。

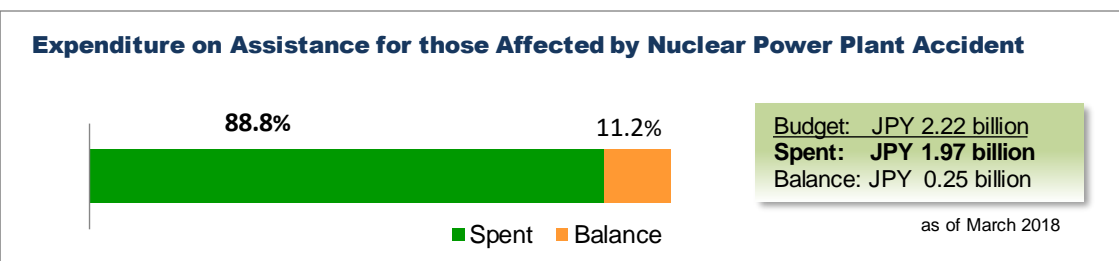
日本赤十字社 日本赤十字会 日本赤十字看護協会

1

Booklet on "how to protect health of you and your family under nuclear disaster" was created and distributed in March 2016. ©JRCS

<sup>54</sup> 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

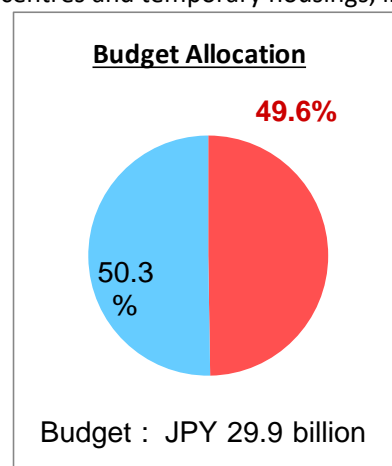
In 2017, Radiation Emergency Medical Care Advisors Meeting was held twice in July and December 2017 where they discussed: how to dispatch JRCS support staff to the affected Red Cross Hospitals, to prepare necessary systems for accepting patients from Red Cross Hospitals in the UPZ (Urgent Protective action planning Zone) area, and to produce a manual on communication with the affected people.



### 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, im-proving 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 kits<sup>55</sup>; 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 29.8billion (equivalent to 49.6 per cent of the total GEJET budget) followed involving the distribution of a set of six essential electric house-hold appliances.<sup>56</sup> 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 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	447 units
Community centres constructed	3 facilities

<sup>55</sup> 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.

<sup>56</sup> 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 community building and assistance to those who required special attention. In addition to three community centres in Miyagi, 447 out of the total 702 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 have been completed.

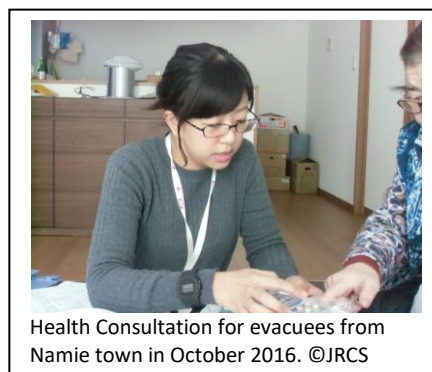


Psychosocial support is provided in combination with events like Nordic-style walking, tea parties and health and social classes to encourage participation of intended beneficiaries who may otherwise tend to stay home by themselves. The main focus for the programme has shifted to psychosocial support 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. There are still needs for psychosocial care for them, and it will likely be required for some years to come.

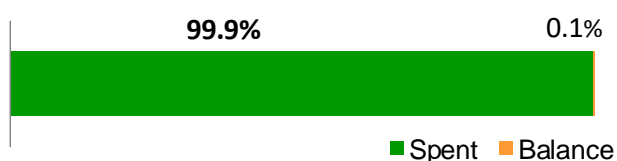
Health Consultation project for evacuees from Namie town in Fukushima started in October 2012 and completed in March 2017. In 2016, the JRCS health care survey team had visited 2,707 evacuees (1,137 households) from Namie town. Five years have passed since GEJET. While there are, still evacuees waiting for a visit by the JRCS health care survey team, increasing number of evacuees decline the consultation as their works and life become stable.

Simultaneously, the Namie dispensary provides health consultation to the evacuees and organizes a “mother salon” to provide child rearing and development advice and daily general concerns. In September 2016, “The third report on Health Consultation Project for the evacuees from Namie town evacuating in Iwaki city in Fukushima” covering the period from October 2014 to October 2015 was prepared in collaboration to JRC College of Nursing.

As of 31 March, 2018, 20,620 evacuees from Namie town still evacuate in Fukushima (14,343 evacuees, nearly 70 percent) and other prefectures (6,277 evacuees, 30 percent). Among those evacuate in Fukushima, 3,244 people stay in Iwaki city, 2,812 people stay in Fukushima city and 2,066 people in Minamisoma city<sup>57</sup>. Although an evacuation order was lifted for the “area being ready for the removal of the evacuation order”, and “a residency-restricted area” except for “a difficult-to-return area” on 31 March 2017, the population of Namie town is 516 as of the end of February 2018<sup>58</sup>. The returning of the evacuees to their home town is not proceeding as expected.<sup>59</sup>



### Expenditure on Improving Living Condition of Affected People



Budget: JPY 29.9 billion  
Spent: JPY 29.8 billion  
Balance: JPY 0.1 billion

as of March 2018

<sup>57</sup> Namie Town Homepage. *Situation of the evacuation of the population of the Namie town*, 31 March 2018.  
<https://www.town.namie.fukushima.jp/site/shinsai/18337.html#>

<sup>58</sup> Namie Town, *Namie (Heisei 30nen 4gatsu, No.627)*

<sup>59</sup> Nuclear Emergency Response Headquarters (Genshiryoku saigai taisaku honbu). *Namiecho・Tomioakacho ni okeru hinanshij kuiki no kaijyo ni tsuitei*, 10 March 2017

## 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.

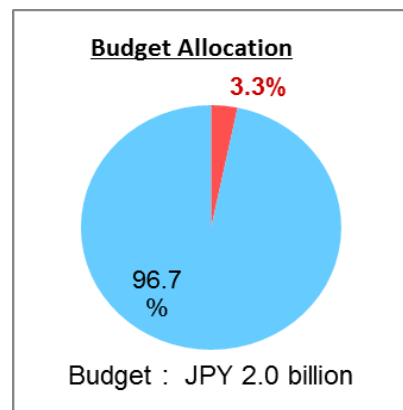
A significant amount of funds was allocated for the provision of emergency care to the elderly; strengthening service delivery through provision of items to social welfare institutions; and construction of social welfare facilities and housings for the elderly.

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.

To date, all the projects in this programme have been completed. The last project is rebuilding a Kesennuma Social Welfare centre in Miyagi. The JRCS has supported to rebuild the social welfare centre. The construction work was completed in December 2016, and its operation started in April 2017.

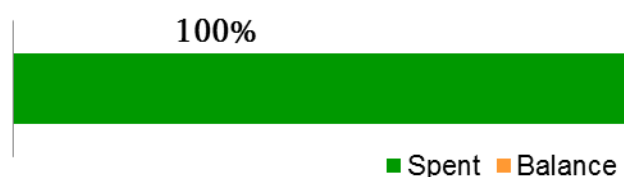


Caretakers for evacuation centres dispatched	67 staff
Nursing Beds distributed	959 beds
Group-home (home for the elderly) items distributed	2,239 items
Vehicles for social welfare institutions provided	338 vehicles
Elderly housing constructed	5 facilities
Social welfare centre constructed	1 facility



Construction of Kesennuma Social Welfare Centre "Yasuragi" has been completed in December 2016.  
©JRCS

## Expenditure on Social Welfare Support



Budget: JPY 2.0 billion  
Spent: JPY 2.0 billion  
Balance: JPY 0 billion

as of March 2018

## Children's Education Support (Programme 8)

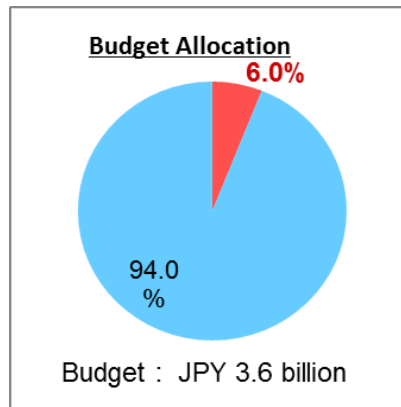
Apart from the elderly, the most vulnerable segment of the survivors was undoubtedly children and youth who lost the space and opportunity for education and social activities following the disaster. The concerns of local governments were addressed through the projects which envisioned the creation of 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 6,000 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 2017, one camp was organized with 100 participants. JRCS Fukushima Chapter conducted 24 Psychosocial Support activities for the school children and the Youth in Fukushima with 1,829 participants.

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 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 2017, overseas study tours to Thailand and Philippines were organized with 120 participants.

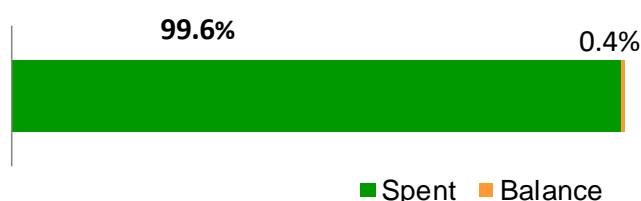


School kitchen items provided	8,933 items
School operations supported and buses donated	14 operations 18 buses
School clinic items provided	1,799 items
Training outfits for children distributed	3,655 items
Participants of smile parks	53,538 children
Summer camps held	1time, 100 children
Electric blackboards 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

## Expenditure on Children's Education Support



Budget: JPY 3.653 billion  
Spent: JPY 3.637 billion  
Balance: JPY 0.016 billion

as of March 2018

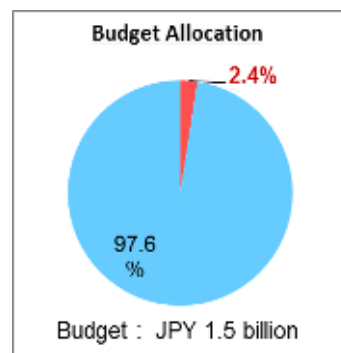


## Community Based Disaster Preparedness (Programme 9)

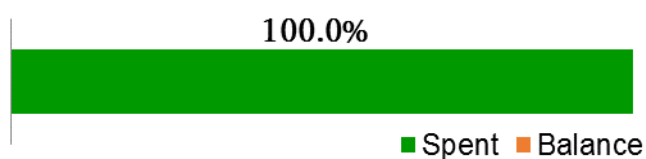
Strengthening the capacity of municipalities in the affected areas is vital to complement the on-the-ground work of the JRCS in times of emergency.

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



Budget: JPY 1.5 billion  
Spent: JPY 1.5 billion  
Balance: JPY 0 billion

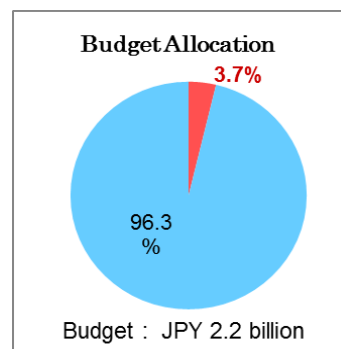
as of March 2018

## 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.



Disaster Preparedness Training, which aims at promoting awareness, relevant knowledge and skills in the community, and the training for instructors for Disaster Preparedness Training Programme was held with total 82 participants in 2017. JRCS Disaster Preparedness Seminar was held 576 times in 41 Chapters with 28,487 participants.

In the Disaster Preparedness Education Program for Junior Red Cross/Red Cross Youth, the targeted groups are students in junior and senior high schools.

The text book, “Mamoru Inochi Hiomeru Bosai (Junior Red Cross Disaster Preparedness Education Program)” was compiled and published in 2014. 40,000 copies were reprinted in July 2016. So far, 105,000 copies have been delivered to all 36,000 schools including elementary, junior high and high schools through the board of educations by the JRCS Chapters in each prefecture.

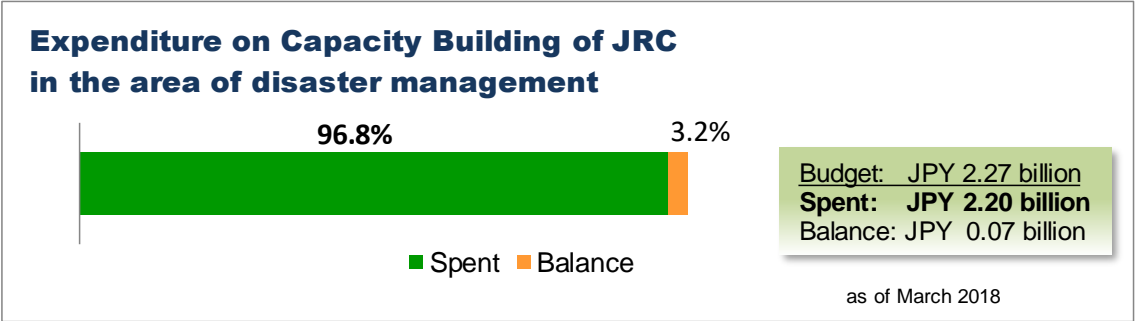


DIG Training for the preparedness pilot programmes © JRCS

According to the report of a survey conducted on 4,000 randomly selected schools, from primary schools to senior high schools in nationwide in January 2017, it was found out that the number of schools that have already used the text book at schools was decreased from 26% to 22%, although 97% of them found it as useful.

Furthermore, Disaster Preparedness Educational material “Find out risks for disaster preparedness” for preschool children was completed in 2017.

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” since 2013 and implemented the recovery support and regional disaster preparedness activities and completed the activities in FY 2015.



## THE PARTNERSHIP MEETING ON THE GREAT EAST JAPAN EARTHQUAKE AND TSUNAMI 2018

The noteworthy event for coordination and partnership during the reporting period was the Partnership Meeting on The Great East Japan Earthquake and Tsunami 2018 in February in Japan.

The Partnership Meeting on the Great East Japan Earthquake and Tsunami 2018 was held by Japanese Red Cross Society from 26 to 28 February 2018 with about 50 participants from 23 Red Cross and Red Crescent Societies as well as from the IFRC.

The aim was to share lessons learned from the recovery program implemented for seven years after the GEJET, as well as to discuss how to strengthen the resilience of the society to the disasters with the Red Cross and Red Crescent partners.

At the end of the meeting, the message from the JRCS through collaboration with the Movement partners for the Great East Japan Earthquake and Tsunami of 11 March 2011 (GEJET) was released (please refer to the page 30).

Participants also made a field trip to Tohoku region including Iwate, Miyagi, and Fukushima by visiting the Governor of Iwate, Onagawa Community Medical Center, Okawa primary school site in Miyagi, Katsurao village disaster recovery public housing, Fukushima Prefectural Centre for Environmental Creation and concluded the trip with a review session of the three-day meeting and field visit. At the end of the Meeting, the following message was released by the Japanese Red Cross Society.

### **Message from the Japanese Red Cross Society through collaboration with the Movement partners for the Great East Japan Earthquake and Tsunami of 11 March 2011 (GEJET)**

The Japanese Red Cross Society (JRCS) has learned very much from running the operation of this unprecedented disaster that was undertaken with an excellent cooperation and assistance from the Red Cross and Red Crescent partners worldwide. It hopes to share some of the key learnings with them, particularly in the following areas.

1. Given ever-increasing major disasters worldwide, National Societies are urged to act beyond emergency response and have themselves well-prepared in the form of promoting disaster preparedness education and any other initiatives which can be introduced through the One Billion Coalition for Resilience led by the International Federation of Red Cross and Red Crescent Societies (IFRC). It is critically important that the Red Cross Red Crescent enhances its holistic engagement in the integrated disaster management cycle by enhancing disaster preparedness, prevention, risk reduction as well as recovery, thus achieving “Build Back Better.”
2. Under the recovery operation, working together better with relevant stakeholders, including authorities/municipalities and community volunteers, is vitally important, and as is bringing affected populations to whom we hold ourselves accountable to the forefront of the design and implementation of our action. National Societies need to understand the recovery framework and its related activities of their own countries, and make clearer the division of roles and responsibilities, including for those of the public authorities as well as Red Cross Red Crescent volunteers.
3. Given that needs during the recovery phase are so diverse among affected areas and regions as compared with those of a response phase, National Societies are advised to establish the mechanism of receiving international support and assistance with due organizational flexibility, coping with the potential of a rapid and huge expansion in the recovery programme.
4. The outcome and issues of the JRCS GEJET recovery operation be summarized and shared,

applying learnings to the enhancement of policies and procedures for the future recovery programming.

5. The JRCS, based upon valued learnings from the GEJET, will contribute to work out global standards in the recovery operation in close cooperation with the Movement partners. The global standards will assist the IFRC and its member National Societies to make clearer their roles and responsibilities for recovery.
6. We believe that our efforts should lead to enhancement of “resilience”, that is, communities’ coping capacity to recover from disasters. It is therefore important to review issues to achieve resilience during the recovery phase in the mid-to long-term thinking and make the most optimal use of those learnings in pursuit of protecting lives, health and well-being of the affected people.



Partnership Meeting on the Great East Japan Earthquake and Tsunami 2018 ©JRCS



Field trip to Tohoku and review session in Fukushima in February 2018. ©JRCS

## 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.

### 1. Independent Evaluation Report

#### 1.1.1 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*

*The JRCS and the IFRC evaluated the first six months of the relief and recovery operation in order to learn lessons and improve the mechanisms for managing large scale disaster response in high income countries.*

[http://www.ifrc.org/docs/Evaluations/Evaluations\\_per\\_cent202012/AsiaPacific/JPTsunamiEarthquake12\\_report.pdf](http://www.ifrc.org/docs/Evaluations/Evaluations_per_cent202012/AsiaPacific/JPTsunamiEarthquake12_report.pdf)

#### 1.1.2 JRCS's response to the Recommendations of IFRC on the Independent Evaluation Report (Relief)

The JRCS was presented with some issues and recommendations through the assessment by the IFRC and third parties regarding recovery support using international donations. Based on the assessment, JRCS has been improving how to perform future activities of the Red Cross. JRCS has worked out its policy based on those recommendations.

JRCS will continue its relief activities in line with the recommendations and the policy, as well as share them with each country's Red Cross and Red Crescent Society.

Following are JRCS's response to the recommendations of IFRC:

<b>1. Relations with Government and Other Organisations</b>	
<b>Recommendation 1</b>	<b>JRCS's response to the Recommendation 1</b>
That JRCS take a lead to develop a framework for cooperation with the appropriate government authorities at central and local levels, NGOs and other relevant organisations to better share information, understand each other's plans and foster coordination of activities in the future.	JRCS will enhance cooperative relations with government agencies, such as Health, Labour and Welfare Ministry, Japan Coast Guard, and Fire and Disaster Management Agency at ordinary times through implementation of joint exercises to strengthen the effectiveness of the existing agreements on relief activities after large scale disasters. JRCS will also develop close ties with NGOs and cooperate with other related institutions which procure and transport relief goods, accordingly.
<b>Recommendation 2</b>	<b>JRCS's response to the Recommendation 2</b>
That national societies continuously nurture a close working relationship with the	JRCS acknowledges the importance of building face-to-face relationships at all levels of the Cabinet Office and



disaster management authorities at all levels to enable effective and efficient liaison when large scale disasters strike, and decision-making bodies come under heavy pressure.	other related institutions as part of the preparedness for large scale disasters in the future.
<b>2. Contingency Planning</b>	
<b>Recommendation 3</b>	<b>JRCS's response to the Recommendation 3</b>
That JRCS develop a contingency plan for large scale disasters after considering the following issues:	As lessons learned from GEJET, JRCS will establish a flexible disaster response system, enhance DM capacity, and draw up a response plan maximizing resources available from the Red Cross network for a possible large-scale disaster in the future.
<ul style="list-style-type: none"> <li>(1) the relationship with Government of Japan (GoJ) in implementing the disaster management plan (see recommendation 1)</li> <li>(2) a strategy to scale up and meet abnormally large needs in the case of mega disasters and/or when two or more chapters are seriously affected (see Recommendation section 4, Evaluation report)</li> <li>(3) the possible role of JRCS health institutions, such as hospitals, in providing a forward disaster management coordination centre in large scale disasters</li> <li>(4) the need for capacity in making assessments, including in situations where municipalities are rendered dysfunctional (see recommendation 5)</li> <li>(5) JRCS role and responsibility in case of large-scale industrial accidents (see recommendation 8)</li> <li>(6) the need for a JRCS recovery policy (see recommendation 14)</li> <li>(7) a strategy for the most effective deployment of human resources within the Society, including those with practical experience and expertise in overseas large-scale disasters and those familiar with Movement policies and standards (see recommendation 18)</li> <li>(8) the need to strengthen the corps of JRCS trained volunteers to give added outreach to the communities and provide surge capacity to deliver emergency relief services (see recommendation 13)</li> </ul>	<ul style="list-style-type: none"> <li>(1) Develop further relationships with GoJ, NGOs and private corporate sector</li> <li>(2) Develop operational centers in the affected area along with the development of human resources for management of the relief activities.</li> <li>(3) Establish the operational hubs as well as logistic base in or nearby an affected area.</li> <li>(4) Strengthen capacity for proactive information gathering by the staff members and volunteers.</li> <li>(5) Develop JRCS response policy, appropriate equipment, operational procedures and the training system in response to nuclear radiation disaster.</li> <li>(6) Review expected roles of JRCS from the public perspective in the recovery operation and develop a policy as well as scope of activities for future recovery operations.</li> <li>(7) Review the operational linkage among NHQ, chapters, and hospitals and enhance effective use of experienced human resources not only from domestic domain but also from the international emergency relief as well as from the RCRC Movement.</li> <li>(8) Examine the roles and scope of activities of JRCS volunteers and volunteer centers, including management of such centers.</li> <li>(9) Review effective use of the global response tools from RCRC Movement at a time of large-scale disasters (including Wat-San ERU which was proven to be effective during GEJET).</li> </ul>

<p>(9) the basis on which additional resources (e.g. funds, international tools, supplies and personnel) may be mobilized from within the Movement (see section 5)</p> <p>(10) stronger coordination with the government, NGOs, the private sector and other organisations (see recommendation1)</p>	
<b>Recommendation 4</b>	<b>JRCS's response to the Recommendation 4</b>
<p>That national societies undertake adequate contingency planning for large scale disasters, including arrangements to access resources and assistance from within the Movement, to respond to events which, while highly unlikely, may have catastrophic effects in their country.</p>	<p>In GEJET operation' JRCS immediately requested a support of communication delegate from the IFRC as per the existing contingency plan for a large-scale disaster. The scale of GEJET, however, was far bigger than expected, as the needs of the affected people were enormous. As a result, a traditional relief activity of JRCS turned to be not sufficient enough to address unmet needs that existed in wide range for a long period. Learning the lessons from the operation, JRCS will review its contingency plan to be flexible enough to cope with various disaster scenarios, thus maximizing effective use of external support from the RCRC Movement. (e.g. relief goods, equipment, specialized delegate and ERUs).</p>
<b>3. Assessment</b>	
<b>Recommendation 5</b>	<b>JRCS's response to the Recommendation 5</b>
<p>That JRCS build capacity within its domestic disaster response personnel to conduct assessments on the basis of IFRC developed methodologies in order to better target assistance and reach the most vulnerable. Trained assessment teams should be available to be deployed at short notice to help municipality authorities assess the needs of their communities, especially in areas where JRCS can deliver services. JRCS should also review its volunteer base at municipal level and consider more systematic training and organisation for disaster intervention.</p>	<p>JRCS normally gets disaster information from the affected municipality authorities. In case of GEJET, local authorities became dysfunctional. JRCS recognizes the need to boost its own capacity to assess the situation in order to meet the various needs of the affected people. JRCS will strengthen human resource development for effective use of volunteers, JRCS overseas experienced staff, and chapter staff to carry out its own needs assessment and information gathering in affected area.</p>
<b>Recommendation 10</b>	<b>JRCS's response to the Recommendation 10</b>
<p>That the Movement continuously reviews and updates its restoring family links (RFL) and tracing services to take advantage of evolving technology and the social media.</p>	<p>In GEJET the tracing services provided by social media, such as Google were remarkable. Incorporating rapidly growing interface technology such as Facebook is considered important. JRCS needs to clarify</p>

	its role and organizational competence in the area of RFL in natural disasters.
<b>Recommendation 11</b>	<b>JRCS's response to the Recommendation 11:</b>
That JRCS undertake investigations to establish needs and the feasibility of providing long-term, volunteer delivered PSS programming in support of individuals and communities affected by the GEJET as part of the recovery programme.	Roles and activities of Psychosocial Support Programme (PSP) were not fully understood internally or externally. JRCS needs to reaffirm its roles and activities of PSP and clarify its position in disaster relief activities, as well as the possibility to increase the number of PSP staff and volunteers.
<b>Recommendation 12</b>	<b>JRCS's response to the Recommendation 12</b>
That national societies both plan to send and to receive trained PSP personnel to support their expatriate communities when large scale disasters strike, given the presence of many different nationalities in most high-income countries. The deployment of such personnel must depend upon usual travel protocols being respected including the agreement of the host national society.	Many foreign workers and permanent residents married to Japanese were also affected by the GEJET. International Organization for Migration (IOM) provided PSP support to these people and JRCS did not target foreigners in particular. After the nuclear accident in Fukushima, many foreigners returned to their home country, but some remained in Japan. For those remaining who had limited access to information, may have needed PSP support by compatriots. In fact, JRCS dispatched PSP team during Christchurch EQ operation in New Zealand (2011) to support family members of Japanese victims. In future, JRCS will continue to regard PSP as a priority activity to meet the needs both of foreigners in Japan and Japanese abroad.
<b>Recommendation 13</b>	<b>JRCS's response to the Recommendation 13</b>
That JRCS strengthen and diversify its trained volunteer base and have effective systems in place for their efficient mobilization and deployment. As well, effective systems should be developed to manage a surge in the recruitment of new volunteers in times of disaster.	JRCS reaffirms the important roles of DM volunteers in disaster relief and will examine effective ways of establishment and management of volunteer centers.
<b>Recommendation 14</b>	<b>JRCS's response to the Recommendation 14</b>
That JRCS develops a national recovery policy and a plan to build relevant capacity as part of its disaster management strategy.	The JRCS placed high priority in supporting the life of survivors from the emergency to recovery phase in GEJET operation. However, due to the lack of a coherently elaborated vision as well as past experience in the domestic recovery activities, JRCS could not sufficiently develop projects in a structured manner in the early stages. In light of GEJET experience (and the recommendations from the IFRC

	evaluation), JRCS developed a vision and a policy that demonstrate the goals and direction as well as priority activity areas for the recovery programme in March 2012. JRCS is committed to enhance its capacity to address long term needs after a large disaster, including nuclear accident, in the future.
<b>Recommendation 18</b>	<b>JRCS's response to the Recommendation 18</b>
That national societies in high income countries consider how best to organize access to relevant experience and knowledge about international disaster management best practice available within their national societies and plan to deploy their human resources accordingly in the emergency phase of domestic large-scale disasters.	JRCS will examine the way of utilizing RC network not only for domestic relief operation in cooperation within the JRCS HQ, branches and hospitals etc., but also utilizing human resources deployed for international relief operation.
<b>Recommendation 19</b>	<b>JRCS's response to the Recommendation 19</b>
That national societies, including JRCS, prioritize the importance of having and building capacity and competence in communicating critical post disaster information via the internet and social media.	Recognising the effectiveness of the social media, JRCS will utilize the tools (e.g. website, Facebook, twitter etc.,) to communicate with the affected population more effectively.
<b>Recommendation 20</b>	<b>JRCS's response to the Recommendation 20</b>
That national societies and IFRC plan for the placement of an IFRC representative and technical delegates, as needed, in times of large-scale disasters in high income countries when there is widespread Movement support. The placement of an IFRC representative is for coordination and experienced technical delegates with substantive consultative skills should be made available as needed and integrated into the host national society structure. The delegates assigned need to respect and work with colleagues according to the host national society's established standard operating procedures.	Immediately after 3.11, the JRCS requested the IFRC Secretariat to send an IFRC representative (liaison) and communication delegate and decided to receive high level support/liaison mission. The communication delegate was integrated into the JRCS. In case of receiving a large amount of donation from overseas after a large-scale disaster, the placement of an IFRC representative should be the norm regardless whether an Emergency Appeal being issued or not. Furthermore, when a large amount of donation is collected from overseas, it is necessary to define the role/mandate of the IFRC Secretariat in assisting: Operating National Society to ensure accountability to donors, even without Emergency Appeal.

### 1.2.1 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*

*Two years after the first independent evaluation of the emergency interventions, another evaluation was conducted by JRCs and IFRC to provide JRCs, IFRC, National Societies and other organisations that had contributed funds and expertise to the recovery programme with an independent, external assessment focused on recovery and rehabilitation interventions.*

[http://www.jrc.or.jp/vcms\\_lf/JPTsunamiEarthquakeEvaluationSEP2013.pdf](http://www.jrc.or.jp/vcms_lf/JPTsunamiEarthquakeEvaluationSEP2013.pdf)

### 1.2.2 JRCs's response to the Recommendations of IFRC on the Independent Evaluation Report (Recovery)

*The JRCs has been striving to follow the various recommendations which have been made. Four years after the independent evaluation of the recovery interventions, the Partnership Meeting on the Great East Japan Earthquake and Tsunami 2018 was held by Japanese Red Cross Society from 26 to 28 February 2018. At the end of the Meeting, the responding message was released by the Japanese Red Cross Society (see the page 24-25 for details). Following are the recommendations of IFRC:*

<b>Recommendation 1 : Recovery: a strategic choice</b>
<ul style="list-style-type: none"><li>● Recovery is an integral part of the process that helps individuals in communities to rebuild their lives shattered by disaster, and as such should be part of the Red Cross' extended mandate;</li><li>● As recommended in the first evaluation, JRCs should take a formal policy decision to include recovery as an area of operations. Recovery should be clearly defined on the basis of the guidelines developed by the IFRC. It should be managed and integrated in the organisational structure in the same manner as all activities in disaster response and relief;</li><li>● The spectrum of activities falling under recovery has to be defined, and should include needs assessment, planning and programming, and monitoring. Tools should be developed, including Standard Operating Procedures and training, to prepare staff for the tasks related to the society's recovery responsibility;</li></ul>
<b>Recommendation 2 : Raise the profile of JRCs</b>
<ul style="list-style-type: none"><li>● As a result of the high visibility it gained in Japan with this disaster, JRCs should devote time and resources to develop its image as an innovative, forward-looking, relevant and effective organisation. The profile of the National Society should be revamped as an organisation closer to the community;</li><li>● Bridges should be built between JRCs and the media, at national and prefecture level, as well as with other entities that have to become part of JRCs' network of supporters, in the private and public sector. An assessment of potential partners should be conducted as soon as possible, building on the Society's current visibility;</li><li>● JRCs should continue to build the in-house capacity of its public relations team to proactively manage the image of the JRCs.</li></ul>
<b>Recommendation 3: Accountability to beneficiaries: standards and principles</b>
<ul style="list-style-type: none"><li>● Being accountable to those we support has long been a principle of Red Cross</li></ul>



Red Crescent work and is strongly embodied in the Code of Conduct. A model accountability framework should be developed, adhering to accountability principles:

- a. Transparency
- b. Participation
- c. Monitoring and evaluation
- d. Complaints and response

- People need information as much as water, food, medicine and shelter. Beneficiary communication, a component of beneficiary accountability, aims to save and improve lives through the provision of timely, relevant and accurate information, and to support an environment of transparency and accountability through the creation of feedback mechanisms;
- Communicating with, involving and listening to people means providing a better service to them. There is a duty to be accountable to beneficiaries and

**Steps to improve Accountability to beneficiaries** could include the following:

- Develop a short guidance document on accountability to beneficiaries and what forms it could take in JRCS relief and 'peace-time' programming (3 page summary and 10 slide Power Point); JRCS should not wait for IFRC to develop the on-line training
- Consider partnering with JPF, and JANIC to develop national guidelines
- Disseminate orientation in AtB to all staff
- Designate staff from domestic relief, international and public relations to work together to develop a short 'menu of activities' to help operationalize each of the four areas related to AtB, in line with JRCS capacity and service delivery
- The menu of activities should be included in staff orientation, disaster relief and other SOPs; international delegates should also be briefed on AtB and how to support NS in ensuring they are applied
- Provide training to all Chapters using the orientation material and the menu of activities; the Nursing Department may want to further contextualise the material for their line of work and provide orientation to teams across the network
- The Disaster Relief and Social Welfare Department should ensure that reviews on progress and quality of AtB work are included in their post-action reviews

to make a deliberate effort to communicate with, listen to and respond to their concerns. People have a right to *know about* and *have a voice in* actions that affect them;

- JRCS should work to increase organisational awareness and application of minimum standards in beneficiary accountability. Accountability to Beneficiaries (AtB) should apply to JRCS service delivery both in domestic and international operations;
- JRCS should disseminate among its staff internationally accepted standards (e.g. Sphere, the Listening Project, Humanitarian Accountability Project, etc.) and apply them in the future disaster response;
- IFRC should support JRCS in developing a strategy and practical steps for the implementation of these activities;
- While JRCS did apply the Fundamental Principles and other major standards regarding disaster relief in responding to this disaster, opportunities exist to increase awareness and ensure that staff know and enact key principles and

<p>standards in their daily work;</p> <ul style="list-style-type: none"> <li>● JRCS should review how key principles and standards such as the Fundamental Principles, gender policy, Principles and Rules in Disaster Relief and Sphere are currently incorporated in mandatory training and orientations for all departments;</li> </ul>
<p><b>Recommendation 4: Partnership</b></p> <ul style="list-style-type: none"> <li>● To enhance effectiveness of JRCS response to disasters, JRCS should engage into concrete partnership with key stakeholders in the private and public sectors;</li> <li>● JRCS should disseminate the organisation's mission, mandate and strategic direction to prefectures and municipalities governments, including the Council of Social Welfare to clarify JRCS role in disaster;</li> <li>● Awareness rising should be conducted with key corporate players and NGOs; and JRCS should enter into a memorandum of understanding (MoU) with them, agreeing on their respective activation in the coming years.</li> </ul> <div data-bbox="762 600 1279 801" style="border: 1px solid black; background-color: #d9ead3; padding: 5px;"> <p><i>Engaging with corporate partners can build on current agreements with NGOs/NPOs, government agencies such as social welfare departments at prefecture and municipal levels and the Council of Social Welfare.</i></p> </div>
<p><b>Recommendation 5: Role in community and volunteers</b></p> <ul style="list-style-type: none"> <li>● In line with the International Federations' strategic aims of Strategy 2020, that include <i>inter alia</i> the strengthening of recovery from disasters and crises through building stronger National Societies, JRCS needs to better profile itself, determining its role as a community-based organisation, and building and enhancing its organisational structures at all levels to ensure that the role of volunteers is commensurate with the community focus;</li> <li>● Learning from this disaster's experience, JRCS could develop a more rational approach to needs assessment that would allow volunteers (including Red Cross youth and specialised corporate volunteers) to respond to a broad spectrum of basic complementary social welfare needs;</li> <li>● JRCS HQ should support Iwate, Miyagi and Fukushima Chapters to identify and share with other chapters their experiences and lessons in community-based services and in working through volunteers;</li> <li>● IFRC should provide JRCS with information on peer support from other NS with experience in this type of services and promote the cooperation among sister societies. IFRC should support JRCS with the adaptation of material for services and training of volunteers in this field.</li> </ul> <div data-bbox="671 1115 1279 1429" style="border: 1px solid black; background-color: #d9ead3; padding: 5px;"> <p>JRCS can get involved in daily life of vulnerable people by providing support services through community based volunteers. This will help to:</p> <ul style="list-style-type: none"> <li>• Develop interventions that prevent and/or alleviate the factors responsible for discrimination, stigmatisation and social exclusion, and</li> <li>• Ensure fuller integration of disadvantaged people into their communities</li> </ul> </div>
<p><b>Recommendation 6: Humanitarian preparedness for nuclear accidents</b></p> <ul style="list-style-type: none"> <li>● This was noted in the MRP of the first evaluation. Efforts in this area must continue for the International Federation as a whole, including National Societies along with JRCS:</li> </ul>

- IFRC, jointly with ICRC, should formulate guidance for the Movement to address the humanitarian consequences of a nuclear disaster;
- IFRC, as and when required by JRCS, should contribute to the Nuclear Information Centre to be launched in 2013;
- JRCS, with the support of IFRC, should organise an international exchange programme targeting medical personnel and volunteers on long-term community-based PSP, for NS to exchange expertise and develop programmes in this area;
- IFRC should look into ways to maintain the position of Sr. Officer for Nuclear Preparedness beyond the initial year; there is a concern that one year is insufficient to build capacity and interest in this area. The organisation should undertake efforts to ensure funding for such a position for at least three years and not burden the incumbent with that responsibility.

**Recommendation 8: Alignment of synergies between domestic and international departments**

- To balance the secretariat's support to international departments of National Societies with domestic service delivery departments (particularly in high-income countries), the evaluation recommends that:
- The secretariat maintains the regular international learning workshops for NS domestic disaster management teams, so that NS domestic specialists and technical staff mutually benefit from the experience of other NS, in particular in the area of "relief to recovery", noting that IFRC's strength should also be based on the domestic resources of National Societies and not only in the network of international departments;
- A mutual exchange process between domestic and international departments should be promoted, as well as "learning from others".

**● Recommendation 10: The OCAC process**

- The extensive experience of JRCS after this large disaster could serve as a model for many other societies. Joining the OCAC process will validate the self-assessment of JRCS preparedness for the future and will contribute to the secretariat's promotion of this tool among other National Societies, to increase their preparedness and disaster response capacity.
- The OCAC strategy (IFRC Organisational Capacity Assessment Certification) will help JRCS address many of the recommendations from this evaluation.

The **OCAC** is a tool that enables National Societies to assess their own capacity and performance to help determine the best approaches for self-development and ensure they are a well-functioning organisation, providing relevant services for its public and target populations.

The overall OCAC process combines an initial self-assessment followed by a focused corrective development effort to address the identified weaknesses (phase one), with a peer review cum corrective development effort (phase two) for those who succeed in passing the initial self-assessment before proposing successful candidates for acknowledgement ("certification") by the Board.

<ul style="list-style-type: none"> <li>● IFRC already supports JRCS in this respect. Discussions at senior level on the extension and timeline for this process are taking place, key material has been translated into Japanese and a focal person in A/P zone office has been designated. JRCS is committed to undertake the process, demonstrating that a well-functioning organisation, as is the case of this NS, strives to better contribute to the goals of Strategy 2020.</li> </ul>	<p><i>OCAC starts with the adoption of a set of five compound organisational capacity-dimensions that are essential for the successful functioning of any National Society. These are: the capacity to exist, the capacity to organise oneself, the capacity to relate to others and to mobilise resources, the capacity to perform, and the capacity to adapt and to grow.</i></p>
<p><b>● Recommendation 11: Develop Standard Operating Procedures</b></p> <ul style="list-style-type: none"> <li>● JRCS has learned and is still learning lessons through its recovery intervention following this disaster. Among others, one can highlight the lessons learned in operating a Recovery Task Force, which can contribute to the efficiency and effectiveness of future interventions in mega-disasters. For this purpose, JRCS should:</li> <li>● Develop Standard Operating Procedures (SOPs) for the functioning of a Task Force, including terms of reference;</li> <li>● Design tools such as templates and forms for the preparation and development of a plan of action, accountability framework, needs assessments, requests, proposals, procedures for approvals, etc.;</li> <li>● Develop progress control/monitoring tools for budgets, control of costs, chronograms /schedules.</li> </ul>	

## 2. JRCS Management Response to the Independent Evaluation Report

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.

## 3. Third-Party Evaluation Report

### 3.1 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](http://www.jrc.or.jp/vcms_lf/Third_Party_Evaluation_2011.pdf)

### 3.2 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](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 Shin Nihon LLC completed an audit of the GEJET international donations received until 31 March 2016. KPMG AZSA LLC completed an audit of the GEJET international donations received until 31 March 2017. 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](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](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](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](http://www.jrc.or.jp/eq-japan2011/pdf/2014_kyuenkin_auditors_report.pdf)

### Independent Auditor's Report for 2015

*Statement of Income and Expenditure of the Japanese Red Cross Society for the Great East Japan Earthquake and Tsunami International Donation from 1 April 2015 to 31 March 2016*

[http://www.jrc.or.jp/eq-japan2011/pdf/JRC\\_2015\\_Income\\_and\\_Expenditure\\_Statement.pdf](http://www.jrc.or.jp/eq-japan2011/pdf/JRC_2015_Income_and_Expenditure_Statement.pdf)

### Independent Auditor's Report for 2016

*Statement of Income and Expenditure of the Japanese Red Cross Society for the Great East Japan Earthquake and Tsunami International Donation from 1 April 2016 to 31 March 2017*

[http://www.jrc.or.jp/eq-japan2011/pdf/JRC\\_2016\\_Income\\_and\\_Expenditure\\_Statement.pdf](http://www.jrc.or.jp/eq-japan2011/pdf/JRC_2016_Income_and_Expenditure_Statement.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 RELATIONS

To mark the seven-year anniversary since the GEJET 11 March 2011, the JRCS launched a remembrance campaign with a Japanese slogan translated as “Forever remembered” from 1-31 March 2018

The campaign message for the 7<sup>th</sup> anniversary of the GEJET has focused on raising awareness on disaster preparedness among the general public so as not to let the lessons of GEJET fade away with the passage of time.

JRCS organized nationwide simultaneous GEJET events, strengthened internal and external collaboration in each region, and produced the seventh anniversary poster, panel, booklet, and badges. JRCS Chapters made efforts to promote awareness of disaster preparedness among the general public in collaboration with associations and companies in each region.

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

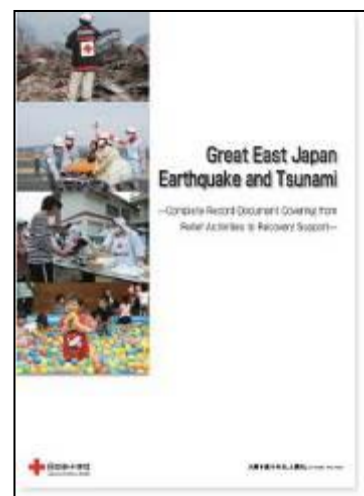
The digital version of “Great East Japan Earthquake and Tsunami – Complete Record Documents Covering from Relief Activities to Recovery Support –” has been released on the Red Cross Nuclear Disaster Resource Center Digital Archives. The record includes the JRCS activities and data regarding the disaster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

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



私たちは、忘れない。

JRCS Logo designed for the 7th anniversary since the GEJET. © JRCS



## PROGRESS TO DATE (until March 2018):<sup>60</sup>

### 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		Emergency Kit		Sleeping Set	
Prefectures delivered	Amount delivered	Prefectures delivered	Amount delivered	Prefectures delivered	Amount delivered
Iwate	1,000	Iwate	10,920	Iwate	5,000
Miyagi	88,490	Miyagi	16,398	Miyagi	6,000
Fukushima	16,020	Fukushima	1,500	Fukushima	1,500
Others	42,983	Others	9,619	Others	2,906
<b>TOTAL</b>	<b>148,493</b>	<b>TOTAL</b>	<b>38,437</b>	<b>TOTAL</b>	<b>15,406</b>

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 neighboring 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.

<sup>60</sup> 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 was 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:

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

#### **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 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 2017, the NDRC posted two special reports: "Chernobyl Humanitarian Assistance and Rehabilitation Programme" and "Home visits for evacuee's health care (Iwaki, Fukushima)".

#### 4.2.2 Radiation Emergency Medical Care Advisors Meeting

Radiation Emergency Medical Care Advisors 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 Advisors Meeting (FY 2017) was held on 6-7 July 2017 where they discussed vigorously: JRCS's plan for accepting patients from the affected area in Red Cross facilities across Japan, dispatching support staff to Red Cross facilities, how to make necessary preparation for evacuation, JRCS facilities indoors evacuation in a time of disaster, and constructing methods of the JRCS communication with affected people. Japanese Red Cross Fukui Hospital and Japanese Red Cross Nagahama Hospital gave a presentation individually about community initiatives for nuclear disaster medical response. They also shared their roles as Nuclear Disaster Core Hospitals.



JRCS First Radiation Emergency Medical Care Advisors Meeting was held in July 2016.  
©JRCS

The Second meeting (FY2017) was held on 18 to 19 December 2017 where they reviewed the training materials for Nuclear Disaster Response Basic Training Session according to the revision of the JRCS's guidelines and manual related to nuclear disasters, such as "Nuclear Disaster Guidelines for Preparedness, Response and Recovery" and "Manual for Relief Activities under Nuclear Disasters" and introduced a new lecture on how to incorporate the booklet "Communication with Affected People during a Nuclear Disaster".

#### 4.2.3 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 addressed for physicians, radiological technicians, nurses, administrative staff from the JRCS hospitals, and the JRCS chapter staff.

In the FY 2017, JRCS organized sessions in three block areas. The JRCS divides the country into 6 operational blocks. Conducting training at each block enables the JRCS to provide more regionally appropriate training by taking into consideration the location of a nuclear power station, JRCS Chapters and facilities in the region.



Nuclear Disaster Response Basic Training Session in Ishinomaki in June 2017. ©JRCS

First training session (FY 2017) for the 1<sup>st</sup> block was held at the Ishinomaki RC Hospital, Miyagi Prefecture on 3-4 June 2017. In cooperation with Miyagi Prefecture, the JRCS covered lectures on its community disaster preparedness plan, nuclear regional disaster preparedness plan and nuclear disaster medical care system in the training. 10 staff members of Republic of Korea National Red Cross participated in it as observer and visited the affected areas in Fukushima and the Onagawa Community Medical Center in Onagawa, Miyagi.

Second training session (FY 2017) for the 3<sup>rd</sup> block was held at the Fukui Chamber of Commerce and Industry on 16-17 June 2017. In cooperation with Fukui Prefecture, the JRCS covered lectures on its nuclear disaster preparedness



January 2018. ©JRCS

measures and nuclear disaster medical care system and the participants visited the affected area in Fukushima.

Third training session (FY 2017) for the 5<sup>th</sup> block was held in Matsue, Shimane Prefecture on 24 and 25 January 2018.

#### **4.2.4 Production of a Booklet “Communication with Affected People during a Nuclear Disaster”**

A booklet on “Communication with Affected People during a Nuclear Disaster” was developed out of the learning from the accident at the Fukushima Daiichi Nuclear Power Plant. It covers the methodology of relief activities, psychological status of affectees, and basic matters such as the principles in establishing communication with affectees.

### **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 pediatrics.

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

### **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





Minamisanriku Hospital was completed in October 2015. © JRCS

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 Kesennuma 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.

#### **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 finalized 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 Minamisanriku 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 city, 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. 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 these emerging medical needs. In order to fulfil this, construction of the new JRC Fukushima Hospital was planned in a new location nearby. Due to the modification of the basic design phase in order to reduce the cost of the construction project, construction has started in October 2016 and will be completed by August 2018. The hospital is planning to be operational around January 2019.



Fukushima Red Cross Hospital is under construction in December 2017. © JRCS

## 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

Seven years have been passed since the disaster; many beneficiaries moved out from the temporary prefabricated housings to the municipal and other housings. Although, they still look forward to participating in activities that have been promoting an interchange between residents in the affected area. Simultaneously, the staff from Iwate Chapter continue an individual visit to the residents in the temporary housing to inform their activities and listen to their current condition and problems. In 2017, 1,028 people participated in 69 events in Iwate, 552 people participated in 8 events in Fukushima.

#### 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. Above 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
<b>TOTAL</b>	<b>133,183</b>

#### 6.7 Disaster Recovery Public Housing (Otsuchi, Iwate)

##### Completed Housing Complexes

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 924 housing units are planned to be constructed in Otsuchi Town as the disaster recovery public housings for the area. Of these, 702 units will be under the management of Otsuchi Town, and partially financed by the JRCS. By the end of March 2018, 447 housing units were completed. Currently, Machikata Housings are under construction and completion of housing construction is projected around February 2019.

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 (2)	24	completed	Mar. 2016
Terano/Usuzawa (No.2)	11	completed	Jun. 2016
Namiita	3	completed	Jun. 2016
Machikata (Hon-machi)	8	completed	Mar. 2017
Machikata (Kami-machi)	4	completed	Mar. 2017
<b>Total</b>	<b>280</b>		

### **6.8 Construction of community centres (Kawauchi in Fukushima, Ishinomaki and Togura in Miyagi) -- COMPLETED**

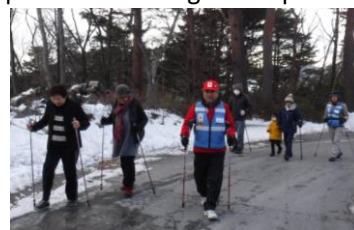
In order to provide the spaces where beneficiaries can get together and participate in various community activities, the JRCS supported construction of three community centres in Fukushima and Miyagi Prefectures. To date, all three community centres, Kawauchi Community Centre, Yoriiso Community Centre, and Togura Community Centre were completed in November 2011, March 2014 and August 2016 respectively.



Completion ceremony of Togura Community Centre was held in September 2016. © JRCS

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

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 to best suited for the elderly. While disaster recovery public housings have been constructed, many residents have been moving out. These activities are still popular among the residents of temporary housings. Also, former residents still wish to join them. During 2017, 69 events with 1,028 participants were held in Iwate and 8 events with 552 participants were held in Fukushima.



walking in January 2018 © 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 201 times with 7,815 participants during FY 2017. In Fukushima Prefecture, 234 of such activities with 5,993 participants were implemented.



### **6.11 Health consultation for the evacuees from Namie Town (Fukushima) -- COMPLETED**

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, and completed in March 2017. In total, a survey was conducted to 14,993 evacuees (6,697 households) with Namie infirmary staff by end of March 2017.

In September 2016, "The third report on Health Consultation Project for the evacuees from Namie town evacuating in Iwaki city in Fukushima" that covers the period from October 2014 to October 2015 was prepared in collaboration to JRC College of Nursing. Additionally, in March 2017, JRCS conducted a questionnaire survey to 22 nurses who were dispatched as the second and third health consultation survey team to the evacuees from October 2013 to September 2015, obtained the reply from 15 nurses (recovery rate 68 %) and compiled the result.

### **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 elderlies 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 organized during this reporting period. In 2017, 17 soup kitchens were used by 1,003 people in Iwate.

### **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 organizations 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 Kesennuma Social Welfare Centre (Kesennuma, Miyagi) -- COMPLETED**

Construction of the building was completed in December 2016. The Kesennuma city invited entries from the public in a prize contest for the best name of the Kesennuma Social Welfare Centre and selected it as "Yasuragi" (Comfort). The opening ceremony was held in April 2017. The newly-reconstructed social welfare centre in Kesennuma City 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.

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



In Shinci, 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. 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**



Midori Kindergarten completed in Sept. 2014. © JRCS

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.

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 needed 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 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 maximize 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 psychotherapists 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 gymnasias (Otsuchi and Ofunato in Iwate, Iitate in Fukushima) -- **COMPLETED**

Temporary gymnasias 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 2017, the following activities were implemented: two international youth exchange programmes with 120 youths' participation, one summer camp with 100 youths. In addition, in Fukushima, 24 events such as musical concerts, movie appreciation activities and plays attracted 1,829 youths. Also, 100-words essay competition was organized with 5,067 entries.

### 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.



Students enjoyed theatre performance in Fukushima in June 2016. © JRCS

### 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 2017, a work place experience programme for students was carried out at JRC Morioka Hospital in Iwate, where 91 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 several available items to accommodate their local needs.

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. 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.

### **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. Based on the facts, there is a need to strengthen domestic disaster response capacities and promote the nurturing spirit of self-reliance and cooperation among community members to “protect human life, health and dignity.” This is the mission of the JRCS. Additionally, a long-predicted mega disaster, like the earthquake whose hypocenter is directly below a 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 capable leaders to response to a disaster within the region. It started organising Red Cross disaster preparedness seminars nationwide in 2017. 576 seminars were conducted in 41 chapters with 28,487 participants. Furthermore, 82 facilitators were trained during the FY 2017.

### **10.3 Mobilization of Youth Volunteers for Disaster Management-- COMPLETED**

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.

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.

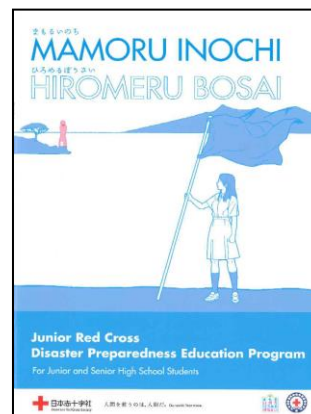
Five years has passed since the GEJET and memories of the disaster will soon be fading. It has now become a necessity for youth volunteers to visit the affected area to identify the current needs, to explore further activities and to implement the volunteer activities.

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



#### **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.



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 in total, 105,000 copies were distributed for free to schools including elementary, junior high and senior high schools in Japan by 2016. This can be used as a part of their regular curriculum.

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

For the further wide diffusion of the textbook, each Chapter organized the publicizing activities and disaster preparedness education seminars to the board of education and the school principals and explained its manner of utilization in the classroom and the group work method.

Since January 2016, JRCS has continued to carry out a questionnaire survey at 4,000 randomly selected schools including primary, junior high, and senior high schools nationwide each year. According to the result of the survey in January 2018, the percentage of schools utilizing the textbook has been decreased from 26 % to 22%, although 97% of them answered the textbook as useful.

In addition to the textbook, JRCS developed a new disaster preparedness educational material “*Bosai machigaisagashi kiken hakken (Find out risks for disaster preparedness)*” for preschool children who require a different educational approach from students elder than primary school ages. It was produced jointly with non-profit organization, Plus Arts, and completed after validating a prototype at 14 kindergartens and nursery schools across the country.

Also, based on the agreement on the cooperation for dissemination of preparedness education concluded with Japan Meteorological Agency in March 2014, JRCS organizes a disaster preparedness seminar in collaboration with the Japan Meteorological Agency in Chapters.

On 2-3 February 2018, JRCS participated in the large-scale earthquake preparedness awareness event in Tokyo sponsored by Japan Meteorological Agency and Cabinet Office, and introduced disaster preparedness educational material for children at kindergartens and nursery schools.

#### **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. This 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.

#### **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 2011<sup>61</sup>, 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 online<sup>62</sup>.

The JRCS compiled the 84-Month-Later Report to summarize its relief and recovery activities in the first seven years.

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<sup>61</sup> [http://ifrc.org/docs/Evaluations/Evaluations per cent202012/AsiaPacific/JPTsunamiEarthquake12\\_report.pdf](http://ifrc.org/docs/Evaluations/Evaluations%20per%202012/AsiaPacific/JPTsunamiEarthquake12_report.pdf)

<sup>62</sup> [http://www.jrc.or.jp/vcms/If/Third\\_Party\\_Evaluation\\_2012.pdf](http://www.jrc.or.jp/vcms/If/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)<sup>63</sup> 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 optimize 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 major outcomes of the projects in FY 2017 are listed below<sup>64</sup>:

Iwate (Budget: 8.4 billion / Spent: 7.7 billion (92.8 per cent) by March 2017)

Outcomes of the projects in 2016 :

- Sanriku Railway<sup>65</sup> regional recovery vitalization support: 1 station, “Tofugaurakaigan station”, was constructed.
- Livelihood support services for the affected: 1,205 households in 19 municipalities were supported.
- Promotion to introduce renewable energy sources: Solar power systems were installed at 290 houses.
- Subsidy for the recovery of the traditional local performing arts: 2 groups received support for restoring storehouses.
- Rehabilitation of affected small and medium-sized enterprises: 28 stores and warehouses in six coastal municipalities were constructed.

Miyagi (Budget: 16.2 billion / Spent: 9.8 billion (61.1 per cent) by March 2017)

Outcomes of the projects in 2016:

- “Kuwait Partnership Fund for Medical Education”: 30 new students received scholarship for Tohoku Medical and Pharmaceutical University.
- Subsidy for interest of loans for affected small and medium-sized enterprises: 2,322 cases received the subsidy.

Fukushima (Budget: 15.5 billion / Spent: 9.8 billion (63.5 per cent) by March 2017)

Major outcomes of the projects in 2016:

- Rehabilitation of J-Village: The design of the J-Village all-weather football training field in the J-village was completed in February 2017, and the construction started in March 2017.
- Support for subsidy for the interest on housing loans for 11 affected households.
- Support for resurgence of medical service system in Futaba Town: development of rules for opening a municipal healthcare centre and hiring the staff. Futaba Assistance Nursing Institute will be resumed in April 2017.
- Matching for transferring hospitalized psychiatric patients to other medical facilities: 7 patients were transferred to the hospitals in Fukushima.
- Promoting English education for nurturing global human resources at elementary school and junior high schools. 22 elementary and junior high schools in 8 municipalities in Futaba Town were designated as model school for promoting English education in May 2016.
- Support to the “Satellite Schools”: academic development, career education planning, school programs promoting sense of belonging and unity to the schools, employment assistance, and transportation service for junior high school students who apply for an entrance examination for a senior high school locating in different district.
- Support to step-by-step resumption of fisheries: supporting a fisheries cooperative association by providing the subsidy for employing 10 staff members to set up voluntary radioactive inspection system, providing fishery vocational training to local residents, and supporting the

<sup>63</sup> The rate is as of when the donation was made.

<sup>64</sup> Japanese Red Cross Society. Summary: Budget and expenditure of the recovery support project by utilizing Kuwait’s crude oil donation as of 31 March 2017, (the end of the fiscal year 2016).

<sup>65</sup> 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.

development of a manual for the safe production of green laver. A brief session on the manual was provided to fisheries companies by the Prefectural Office.

- Developing revitalization of Ampo persimmons' production area: subsidizing the expenses for introducing 12 drying machines and facilities, and the expenses for conducting 188 inspections to identify a processable district as well as 1055 inspections on the persimmon products and the unripen fruitage to identify highly contaminated production areas.
- Recovery of livestock industry in Fukushima: subsidization for Wagyu Registry Association, promoting revitalization of beef cattle production, supporting for revitalizing production areas of livestock in Fukushima, and emergency measures for livestock recovery.
- Recovery and new formation of horticulture regions in Fukushima: supporting for introducing a new technology and equipment necessary for resumption of horticulture in the area affected by the disaster, including the earthquake, the tsunami and the nuclear power plant accident:
- Staffing a specialist for reconstruction at the Chamber of commerce and industry in the evacuation areas.
- "Challenge Fukushima" strategic transmission of information project: "Challenge Fukushima" project disseminated appreciation for the support to Fukushima and willingness to take on the challenges towards the reconstruction in commemoration of the 6 years since GEJET.
- Promoting interaction among evacuees and host local communities at Recovery Public Housings: purchasing necessary items for interaction activities at 23 disaster public housings



Installation of solar panels systems in Iwate.  
©JRCS.



Restoration of a Sanriku Railway station in Iwate.  
©JRCS.



Rehabilitation of J-Village in Fukushima ©JRCS.

## CASH GRANT SCHEME

Under the National Disaster Management Plan of Japan<sup>66</sup>, 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 grants<sup>67</sup>.



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 others publicly-designated fundraising organizations, 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 prefectures<sup>68</sup>. 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 2019. As of 31 March 2018, JPY 340.1 billion has been received by the JRCS, of which JPY 22.48 billion was from overseas donations<sup>69</sup>. Cash donations made by PNSs after 30 September 2013 were also used as cash grants.

The greater portion of the cash donation was, as shown below, collected by the JRCS, reflecting its proximity to a wide cross-section of the public.

As of 31 March, 2018

Cash Donation	JPY	USD
<b>Total Donation received by the JRCS, the Central Community Chest of Japan and NHK</b>	<b>381.5 billion<sup>70</sup></b>	<b>approximately 3.39 billion</b>
[ in which total donation received by the JRCS <sup>71</sup> ]	340.1 billion <sup>72</sup> ]	[approximately 3.027 billion]
Status of Cash Distribution	JPY	USD
➡ Total amount transferred to 15 prefectures	381.2 billion	approximately 3.392 billion
➡ Total amount further transferred to Municipalities from 15 prefectures	376.0 billion	approximately 3.346 billion
➡ Total amount further distributed to Beneficiaries	371.5 billion	approximately 3.306 billion

*The donation list from foreign countries and territories appears from page 56 onwards.*

<sup>66</sup> The national Disaster Management Plan was created by the Central Disaster Management Council. The JRCS is a member of the Council.

<sup>67</sup> Almost 2.9 million times of cash grant transfers were recorded, coming from overseas and domestic donors.

<sup>68</sup> 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.

<sup>69</sup> See page 50-51 “Annex 1: Donation towards the GEJET Relief and Recovery Programmes from PNS and other organizations.”

<sup>70</sup> Government of Japan. Cabinet Office, Disaster Management. *Higashinihon Daishinsai-n-kakaru Nippon Sekijujisha-to Gienkin Haifu jokyō, Heisei 30nen 3gatsu 31nichi genzai.* (Status of distribution of cash grants for the Great East Japan Earthquake as of 31 March, 2018 ) [http://www.bousai.go.jp/2011daishinsai/pdf/gienkin\\_300331.pdf](http://www.bousai.go.jp/2011daishinsai/pdf/gienkin_300331.pdf)

<sup>71</sup> The total collected from national and international donor sources, excluding the funds donated by PNSs after 30 September 2013.

<sup>72</sup> JRCS. *Annual Report 2017-2018*

## 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.

## Contact Information

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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 2018
	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 (Flanders)	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
24	Red Cross Society of China	904,038,322
	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	446,934,713
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 Emirate	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*	854,302,995
TOTAL		60,148,338,796

\*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 2018		
	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	38,834,756
8	Armenia	41,423,278
9	Aruba	7,851
10	Australia	357,542,406
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	35,849,693
25	Botswana	10,637,677
26	Brazil	480,507,087
27	Brunei Darussalam	24,123,196
28	Bulgaria	4,028,399
29	Cambodia	34,640,450
30	Cameroon	316,933
31	Canada	237,106,713
32	Cayman Islands	2,517,498
33	Channel Islands (Guernsey)	1,850,660
34	Channel Islands (Jersey)	3,262,175
35	Chile	5,541,706
36	China	935,955,798
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	26,986,390
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	620,544,918
55	French Polynesia	193,593
56	Gabon	698,719
57	Georgia	4,125,159
58	Germany	266,147,434
59	Ghana	11,880,064
60	Gibraltar	2,466,115
61	Greece	42,002,989
62	Guam	44,806,525
63	Guatemala	15,912,328
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	3,904,370
69	Iceland	2,112
70	India	488,715,633
71	Indonesia	209,471,950
72	Iran, Islamic Republic of	2,010,568
73	Ireland	25,228,383
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	523,827,483
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	156,324,904
101	Monaco	10,787,457
102	Mongolia	299,521,171
103	Montenegro	330,182
104	Morocco	3,927,811
105	Mozambique	103,412
106	Myanmar	14,729,624
107	Nepal	1,316,370
108	Netherlands	99,580,351
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	1,076,757,808
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	47,646,033
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	182,572,486
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	318,800,325
142	Slovakia	13,512,849
143	Slovenia	22,597,570
144	Solomon Islands	2,148,868
145	South Africa	46,417,280
146	Spain	102,579,883
147	Sri Lanka	84,886,111
148	Sudan	9,202,923
149	Sweden	45,984,262
150	Switzerland	588,327,963
151	Syrian Arab Republic	56,683
152	Taiwan, Province of China	2,928,995,370
153	Tajikistan	276,437
154	Tanzania, United Republic of	1,490,250
155	Thailand	2,062,424,952
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	148,624,170
166	United Kingdom	815,832,811
167	United States	3,311,949,241
168	Uruguay	7,096,478
169	Uzbekistan	165,533
170	Vanuatu	240,822
171	Venezuela, Bolivarian Republic of	5,804,489
172	Viet Nam	790,575,931
173	Virgin Islands, British	13,873,255
174	Zambia	129,629
175	Zimbabwe	401,808
176	others	369,547,317
	<b>TOTAL</b>	<b>22,488,527,758</b>

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.