

## Think Globally and Act Locally: With the global humanitarian support, make full use of local community's power

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### Introduction

From the onset of the Great East Japan Earthquake and Disaster, it was obvious that Japan had learned valuable lessons from the past natural disasters, such as Hanshin Awaji Great Earthquake<sup>1</sup> and Chuetsu Earthquake. The examples of such lessons were seen in the immediate relief efforts by the Self-Defense Force, as well as in some programs such as the relocation of survivors grouped by their original community units, instead of by individuals and families.

On the other hand, during the past 16 years since the Hanshin Awaji Great Earthquake in 1995, the world has seen numerous natural disasters, such as those in Turkey, India, Iran, Indian Ocean, Pakistan, China and Haiti, just to count the ones with the death toll of more than 10,000. Lessons were also learned from these disasters which led to some new guidelines to be drafted and applied in the disasters that followed.

Japan supported these countries by sending Japan Disaster Relief Team and Self Defense Force, while many Japanese non-governmental organizations also participated in the relief efforts, such as Japan Platform. It is worth reviewing at this point of time, if we were able to make good use of the wisdom and experiences gained from such past support activities, in the recent East Japan Disaster.

### The Concept of Build Back Better

In 2008, as part of the Humanitarian Support

Research Team under the Ministry of Education, Culture, Sports, Science and Technology, I reviewed the case of Indonesia after the Indian Ocean Tsunami disaster.<sup>2</sup> In Aceh, 100,000 permanent residential houses had been built within the three and a half years after the disaster hit the region. The scale and the intensity of this reconstruction effort are probably unparalleled in the history of disaster recovery assistance.

In a village that was built with the support of Taiwanese Buddhist group, I met a woman who had lost all her family in the disaster, but had met her future spouse in the shelter for the displaced, and later got married. When I met her, she had a 2 year old child in her arms. I was impressed with the strong resilience in this mother, building a new family after such traumatic experience. The newly constructed village already flourished with thick green, new shops, and even stylish cafes on the main street. Such scene did not exist before the disaster, and this was literally 'a new life' for the villagers.

The disaster emergency assistance is not only an effort to revive the life as it was before the disaster, but it also includes establishing new infrastructures according to the actual needs. Four months after the Indian Ocean Tsunami disaster, the Government of Indonesia established Agency for Reconstruction of Aceh and Nias (BRR) with the limited term of four years. 'To let the Tsunami victims' souls rest in peace, we are determined to build back better.' The tsunami was no exception in this regard, with evidence that women, children, and the elderly

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**Table 1** The population of the affected municipalities (as of October 2009)

Municipality	Total population	Under 15 years (%)	65 and over (%)
Miyako	56,842	12.7%	30.0%
Ofunato	41,172	12.3%	30.6%
Kamaishi	39,969	11.5%	34.7%
Rikuzentakata	23,405	11.9%	34.2%
Yamada	18,957	12.7%	31.4%
Otsuchi	15,590	12.1%	32.1%

suffered the most severe losses. The financial resources, international focus, and openness to political and policy reform that often characterize a post-crisis period should allow us to build back better and break out of inequitable development patterns in a sustained way.<sup>3</sup>

We often hear about the Post-traumatic Stress Disorder (PTSD) after a disaster, but recently there has been a new notion of 'Post-traumatic Growth (PTG)' that has drawn much attention.<sup>4</sup> The concept refers to the positive change people demonstrate after going through traumatic incidents such as a large scale disaster. A research targeting the disaster survivors has found out that through cooperating and helping each other after the disaster, the survivors have built new relationships with their peers and have become more caring towards others. After going through much grief and distress, in the process of rebuilding livelihood, some have found new career paths and began to work proactively towards their new goals. We have found hopes in these survivors, who not only exhibit resilience to survive through the trauma, but further grow and progress into the new stage in their respective lives.

### The Local Power That Inspired the Relief Workers

From the Disaster Medicine point of view, I have noted the following characteristics of this disaster.

- 1) The disaster struck aging societies. In many of the municipalities that were affected by the disaster, the proportion of population over age 65 exceeded 30% (Table 1).
- 2) The disaster was caused mainly by the tsunami,

rather than the earthquake itself. Therefore the affected areas were located along the same contour lines, just like in other past tsunami disasters.

- 3) The physical effect of the nuclear power plant accident, as well as the social effect caused by the long-term evacuation from the surrounding communities, is yet to be determined. We are obliged to examine its long-term consequences, as a responsible member of the global community.

During the disaster assistance, the affected areas and nearby regions responded immediately after the disaster to reach the people in need. The Self-Defense Force and the Japan Disaster Medical Assistance Team (DMAT) also acted promptly. Well organized, uninterrupted support from various municipalities nationwide was highly valuable.

We need to note that there was a major issue of not meeting the international standards with regard to the provision of water and hygiene, food and nutrition, as well as living environment in the shelters. The Sphere Project, which sets internationally recognized minimum standards in humanitarian response, defines its standards such as one toilet per 20 outpatients at clinic or hospital, 7.5 to 15 liters of water per person per day, and 2,100 kcals nutritional intake including 53 g of protein.<sup>5</sup> Some standards may not be applicable (in this case, some areas had limited habitable land), however, even at two months after the disaster, some problems persisted, such as shortages of toilets in shelters, and meals tend to contain mostly carbohydrates, and shelters that met the international standards were very few.

The most extraordinary scenes observed in the affected area were how the affected people themselves participated in the relief efforts. Just one week after the disaster struck the region, there were high school students who were the survivors of the same disaster themselves, were working with the slogan 'You are not alone' to help the other survivors. Many of the emergency relief experts from abroad were surprised to see that Japanese children were spontaneously participating in the relief efforts. In Minami-Sanriku Town, a physician who was a survivor himself and had his own clinic swept away by the Tsunami, was seeing patients at a shelter since immediately after the disaster. In Kesenuma City, a physician who was originally from the affected area, had

led a medical team from the university where he currently works and was working continuously in the shelter, the school building where he had graduated from.

It was rather unfortunate that the restrictive legislations often became the obstacles for these eager local volunteers. Similar issues were present in other disasters worldwide in the past. The area size affected by Great East Japan Earthquake and Disaster was quite enormous that there are certain diversity in terms of socio-economic status as well as the level of devastation. Swift and bold deregulations are often required in order to enable innovative and intensive recovery planning. Time-bound special districts can be demarcated where regulations are loosened for specific projects. Such flexible planning is critical to respond to the evolving needs, while closely monitoring and assessing the situation.

### **The Cooperative Work Among the Local People and Outsiders**

In every emergency humanitarian assistance around the world, we would see many kinds of collaborative teamwork among the people who otherwise would have never met each other, the local residents and the outsiders. In many parts of the affected area after the Great East Japan Earthquake and Disaster, such teams were established spontaneously.

DMAT teams were the first to arrive at the site, but it was notable that medical support kept flowing in even after the emergency stage was over. Japan Medical Association, Japanese Red Cross Society, Japan Primary Care Association and other national level organizations, as well as municipalities and private hospitals continued to extend their support. 'To see so many physicians in this area is unprecedented. We generally have a problem of shortage of medical services' said one local physician.

The first time I saw the 'counterpart support scheme' was at the Bam Earthquake site in Iran in 2003. The scheme was also applied in the Sichuan Earthquake in China in 2008, and it became widely known for its effectiveness. One province would be responsible to support one prefecture, and this system worked well in both occasions, as one administrative unit would only

have to support a unit that is one level below its own. In case of Japan, one prefecture or a big city designated by ordinance could support one municipality. A similar scheme has been set up in Iwate Prefecture and the Union of Kansai Governments. It would be beneficial to expand this kind of support system, so the affected municipalities will have a counterpart they could consistently consult with and depend on.

### **Children Are the Future**

After the Great East Japan Earthquake and Disaster, Japan received tremendous support from overseas. The Ministry of Foreign Affairs reported that 126 countries, regions and organizations have donated over JPY 17.5 billion (208.3 million USD)\*<sup>2</sup> (as of November 2011). For example, Turkey has sent a rescue team, with a comment, "We have not forgotten the support Japan has rendered to us at the time of earthquake in Turkey in 1999." Mongolian government announced that each civil servant will make a donation worth of his or her one day's pay. The list of donated goods includes 3 million tea bags from Sri Lanka and 60,000 tuna cans from Tunisia. Each donation and support represents the country and people's heartfelt wishes for Japan.

I still remember the words of one school principal who lost many students and staffs in the Bam Earthquake in Iran. "So many people from abroad have worked for Bam, to support us. I would like to sincerely thank everyone for their sympathy and solidarity."

This time, we would like to thank for all the sympathy and solidarity shown by people around the world. At the same time, I would like to remind ourselves that Japan, at times of such a level of disaster, could become a recipient country of support and donations. We will need to take note of this fact, while we engage in the international cooperation.

Before this disaster, Japan Platform, which consists of NGOs working in international cooperation, Nippon Keidanren and Ministry of Foreign Affairs had agreed not only to work in the field of conflict and natural disasters overseas, but also to take action for the in-country disasters. This agreement facilitated them to undertake immediate action after the disaster struck

\*2 US dollar/JPY exchange rate: US\$1=84 yen.

this time in the East Japan.

In this globalized world, people and countries are all mutually connected. It is a matter of course that Japan would provide emergency support internationally, and would also be, at times, in a position to receive such support. We will need to reconsider our international cooperation in this new context of mutually supportive global environment. In returning the kindness we received, we should not express our gratitude by the amount of ODA support, but we should really consider how we could express our sincere appreciation for the sympathy and solidarity we received.

Common to the humanitarian assistance programs in overseas, such as in Afghanistan, Timor Leste and Aceh in Indonesia, was the presence

of children as the symbol of recovery of the society. Everyone saw hope in children who are the future of the affected communities.

As mentioned earlier, the affected area of the Great East Japan Earthquake and Disaster is an ageing society. It is the very reason why I hope that children, who were born and brought up in these communities, will be the center of the recovery planning. If we focus extensively on disaster prevention and reconstruction of industries, I am afraid the end result is a community that is not so attractive for young people and children. I sincerely hope for the recovery process to entail a harmonious society where different age groups of children, young people and old people all coexist.

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