

# Japan: Earthquake and Tsunami

48 Month Report  
Glide no. EQ-2011-000028-JPN  
18 December 2015



Period covered by this report: 11 March 2011 – 31 March 2015



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## EXECUTIVE SUMMARY

Four years after the Great East Japan Earthquake and the Tsunami of 11 March 2011, there are still about 220,000 people who are displaced from their homes, living in temporary housing, apartments provided by the municipalities or at relatives' homes. Among them, approximately 80,000 people are still living in prefabricated temporary homes.

In Fukushima Prefecture, which was affected by the nuclear power plant accident in addition to the earthquake and the tsunami, there are still approximately 110,000 displaced people. 70 per cent of these individuals have been evacuated to the outer regions of the prefecture. Anxiety born of uncertainty about their future weighs heavily on their minds.

As of March 2015, the Japanese Red Cross Society (JRCS) has received approximately 457 billion Japanese Yen (JPY) both from abroad as well as domestically. This includes approximately 60 billion JPY in donations from more than 100 Partner National Societies (PNS), which has been used to support the JRCS's relief and recovery operation. 40 billion JPY was donated by the State of Kuwait, and distributed to the three most damaged prefectures, Iwate, Miyagi and Fukushima. By the end of March 2015, approximately 90 per cent of the donations, around 100 billion JPY, from the PNS and the State of Kuwait had been spent.

The remaining 357 billion JPY was allocated to the "Gienkin" scheme as cash grants and distributed to the affected people.

During 2014 (from April 2014 to March 2015), many projects have made steady progress (please refer to "HIGHLIGHTS OF PROGRESS OF THE PROGRAMME" below), especially new projects related to disaster preparedness and disaster response. These projects focus on capacity building in communities and reaching the younger generations. Projects such as rehabilitation of physical infrastructure including health institutions and public housing have been mostly completed. Recovery activities have now shifted to "soft" measures, such as psychosocial support and capacity building on disaster management. The population in the area is still in need of support.

The JRCS will continue its recovery and rehabilitation activities for another three years. For Fukushima Prefecture the JRCS will continue for another six years.

## HIGHLIGHTS OF PROGRESS IN 2014

During 2014 (covering from April 2014 to March 2015), the main progress of each programme is high-lighted below. As to the progress of each programme, please see "PROGRESS TO DATE" from page 25.

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

#### **4.2.1 "Guidelines for Red Cross Activities during Nuclear Disaster"**

The JRCS started to develop the guidelines in 2013 after gathering experiences from relief activities related to the Fukushima Daiichi Nuclear Power Plant accident caused by the Great East Japan Earthquake. The guidelines are not only for internal use but also as a reference for other Red Cross and Red Crescent Societies and for other humanitarian organizations around the world in dealing with possible nuclear disasters in the future.

In order to ensure that the guidelines would be practical, targeted and highly effective, opinions from both inside and outside the JRCS were taken into account. A guideline committee was established and held four meetings. The twenty-three-page guidelines consist of eight chapters were finalized by 31 March 2015.

#### **4.2.2 Third Red Cross Nuclear Disaster Seminar**

A series of the Red Cross Nuclear Disaster Seminars continues from 2013, and the Third Seminar was held on 3 October 2014, co-hosted by the Red Cross College of Nursing. Health assistance in Fukushima was delivered mainly by JRCS nurses. A report on their activities titled "JRCS Health Assistance Program for Namie" was presented at the seminar. The seminar was attended by around 200 participants.

#### **4.2.3 Digital Archives**

Through the Red Cross Nuclear Disaster Resource Centre ("the NDRC") Digital Archives, the JRCS continues to disseminate information on nuclear disasters and the situation in the affected areas. During 2014, the NDRC posted 1,006 information pieces on the Digital Archives as well as 301 portal links. In addition, five special pieces have been released to the public to help them understand the contents of the archives.

#### **4.2.4 The Third Reference Group Meeting on Nuclear and Radiological Emergency Preparedness**

The JRCS and the IFRC co-hosted the Third Reference Group Meeting on Nuclear and Radiological Emergency Preparedness in Fukushima from 27 to 30 October 2014. About 40 participants from 16 National Societies, ICRC, and IFRC attended the meeting. Participants were able to improve their understanding of the damages caused by the nuclear disaster in Fukushima, as well as the progress of reconstruction and related challenges for nuclear emergency preparedness.

#### **4.2.5 Residents Symposium for Fukushima Reconstruction 2015**

The Residents Symposium for Fukushima Reconstruction 2015 was held on 15 March 2015, as one of the public forums of the Third UN World Conference on Disaster Risk Reduction (14 - 18 March 2015 in Sendai). Twenty-three participants from the National Societies participated in the symposium. The JRCS invited two keynote speakers from IFRC, Mr. Walter Cotte, Under Secretary General of the IFRC, and Mr. Martin Krottmayer, Senior Officer in the Nuclear and Radiological Accidents Preparedness Programme Services Division.

On 17 March 2015, the JRCS signed "Joint Declaration regarding Revitalization and Disaster Preparedness" with Fukushima Prefecture. Based on this joint declaration, the JRCS will continue to provide assistance to Fukushima residents in collaboration with the prefecture.

#### **4.2.6 JRCS First and Second Nuclear Disaster Response Basic Training Sessions**

The JRCS organized two sessions of "Nuclear Disaster Response Basic Training" during 2014 based on the lessons learned from the GEJET. The training sessions were held at the JRCS Headquarters in November 2014 and February 2015 for JRC chapter staff, physicians, nurses, radiological

technicians and administrative staff to teach them about the importance of nuclear emergency preparedness.

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

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

The Disaster Medical Training Centre, which houses the JRC Ishinomaki School of Nursing, was completed in March 2015 at JRCS Ishinomaki Hospital in Miyagi Prefecture. The centre will be operational from May 2015. The construction of the expanded annex building for which JRCS also supports will be completed in July 2015.

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

Construction of the public hospital and social welfare centre in Minamisanriku Town is scheduled to be completed in fall 2015.

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

Fukushima Red Cross Hospital is now in the initial design phase, and its construction is scheduled to start in 2016 and to finish by 2018.

#### **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 JRC chapters in the most affected areas of Iwate, Miyagi and Fukushima Prefectures. Beneficiaries who otherwise tend to stay at home alone were invited to participate in Nordic-style walking, tea parties, health and social classes and health consultation. Psychosocial support activities now focus on meeting new needs of beneficiaries who need to build new communities due to merger and abolishment of temporary housing. The people who are still living in the temporary homes are mostly elderly individuals who have difficulties moving and adapting to new environments.

During 2014, 121 events with 1,344 participants were held in Iwate, and 5 events with 84 participants were held in Fukushima. Four hundred fifty-two people took part in 33 events in Miyagi.

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

A total of 980 housing units are planned to be built in Otsuchi Town, as disaster recovery public housing for the area. The JRCS provides part of the financing for 730 units, which will be under the management of Otsuchi Town. By the end of 2013, 125 housing units were completed, and during 2014 the number increased to 161 with the completion of the Ogaguchi 2-Chome Municipal Housing and Masanai Municipal Housing. Construction of the housing will be completed by 2017.

##### **6.8 Construction of Community Centres**

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

### **6.9 Nordic-style Walking**

The JRC Iwate and Fukushima Chapters started this project after the disaster to relieve the stress and to solve lack of exercise among the beneficiaries living in the temporary housing. Compared to the beginning of the project, elderly groups are becoming more active participants, and time-length and walking distance of the activities were adjusted in order to better meet the athletic abilities of the elderly. These activities are still very popular among residents of temporary housing. During 2014, 121 events with 1,344 participants were held in Iwate and 5 events with 84 participants were held in Fukushima.

### **6.10 Health and Social Classes**

Various activities such as RC First Aid classes, soup kitchens, tea parties, and handicraft courses have been organized in Fukushima and Miyagi Prefectures. In Iwate Prefecture, this project finished in 2013. In Miyagi Prefecture, RC First Aid Classes were held 113 times with 4,771 participants during 2014. In Fukushima Prefecture, 170 such activities with 5,311 participants were implemented.

### **6.11 Health Consultation Project for the Evacuees from Namie Town**

Due to the high level of radiation, original residents of Namie Town have been relocated to Iwaki City in Fukushima. This project started in October 2012 in coordination with the municipality, the JRCS, and Japanese Red Cross College of Nursing. Its purpose was to check the health, psychological and social status of the evacuees through door-to-door visits. By December 2014, the survey team had visited 4,970 evacuees (2,272 households). The team is now paying a third round of visits to evacuees. Four years after the disaster, some evacuees are trying to settle down in their new environment, while others still have a strong wish to return to Namie Town. Since Namie Town has not established temporary housing in Iwaki City, the evacuees from Namie have scattered to reside in rental houses provided by the municipality. As a result, some Namie people have difficulties integrating into their host community and tend to stay at home. For those people, the visits by the survey team have significant meaning and are something they look forward to.

## **Programme 7: Social Welfare Support**

### **7.5 Construction of Social Welfare Centre in Kesenuma, Miyagi**

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

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

### **8.3 Nursery Schools and After-School Clubs, Iwate**

Under this project, the JRCS has supported reconstruction of three 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 After-School Club for Toyomane District was completed in March 2015 and started operating in April 2015. This is the second reconstructed after-school club. All the nursery schools and after-school clubs are now fully operational. By 2014, all projects related to reconstruction of educational institutions for children completed.

### **8.13 Red Cross Youth and Volunteer Project**

Various activities managed by the local chapters and the Red Cross volunteers in the three most affected prefectures of Iwate, Miyagi, Fukushima have been carried out. During 2014, the following activities were implemented: two international youth exchange programmes with 20 participating youths; three summer camps with 168 youths; four Red Cross volunteer meetings with 289 participants; a musical concert attended by 321 people; one art workshop with 45 children participating. In addition, in Fukushima 36 events such as musical concerts, movie appreciation activities and plays attracted 5,900 youths.

### **8.16 Other Activities**

A vocational experience programme for students was carried out at JRC Morioka Hospital in Iwate, with 88 students participating.

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

### **10.2 Development of Disaster Response Capacity, Tools and Facilities**

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.

### **10.3 Disaster Preparedness Training**

This project started in 2014 with the purpose of strengthening domestic disaster response capacities by providing education on disaster preparedness and risk reduction to people in the community. Activities of the programme are aimed at nurturing the spirit of self-reliance and cooperation among community members in preparation for long-predicted mega disasters like the GEJET. In 2014, two pilot programmes were implemented. The first programme took place in October 2014 in Osaka with 36 participants from the community, and the second one in January 2015 in Morioka with 20 participants. The analysis of comparison of the questionnaires answered by the participants before and after taking the programme shows the positive impact on the participants in terms of effectiveness and validity of the programme.

### **10.4 Mobilization of Youth Volunteers for Disaster Management**

This is a new project started in 2014. Mobilization of youth volunteers is one of the important initiatives in the GEJET recovery activities. It is anticipated that memories of the disaster will soon be fading, and it has now become necessary to recruit youth volunteers to identify current needs in the affected area. In order to do so, during 2014, 25 youth volunteers visited Iwate to collect knowledge on the situation four years after the disaster and support vitalizing the people of the affected areas.

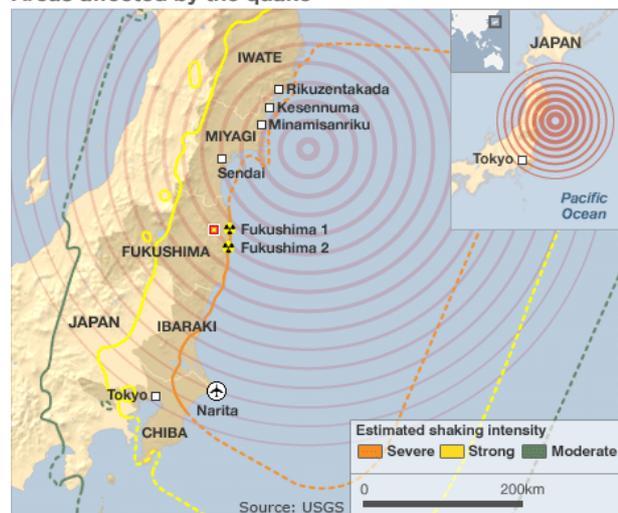
### **10.5 Preparedness Education Programme for Junior Red Cross/Red Cross Youth**

This is a new project that 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 for saving their lives in times of disaster. This project aims to teach elementary, junior high and high school students preparedness skills that will protect themselves during disasters. The programme also aims to build better understanding and awareness of importance of preparedness among the families of students and the communities they belong to. During 2014, the text book, "*Mamoru Inochi, Hiromeru Bosai (Protecting Lives, Preparing for Disasters)*," was compiled in Japanese. The text books were distributed for free to all elementary, junior high and high schools in Japan, and can be used as a part of the regular curriculum. The text book will be translated into English in 2015.

## CONTEXT

On 11 March 2011 at 02.46 PM, Japan was struck by a magnitude 9.0 earthquake<sup>1</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. A total of 15,891 people were confirmed dead and 2,584 are still missing<sup>2</sup>. Failed reactors in the Fukushima Daiichi Nuclear Power Plant<sup>3</sup> caused significant radioactive emissions, turning the event into the first triple disaster ever recorded in human history.

Areas affected by the quake



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

Today, four years after the disaster, an estimated 225,000 people, including 118,000 from Fukushima<sup>4</sup>, are displaced and their future remains unpredictable. While the number has decreased from 344,000 in March 2012, the pace of return is slow due to considerable delays in the construction of permanent homes<sup>5</sup>. In the meantime, the majority of the displaced are living in temporary housing, which includes some 89,000 people still living in prefabricated housing meant for short-term accommodation. The situation is particularly complex for those from Fukushima, where decontamination of land and housing are still ongoing. While the Government relaxed the evacuation policy in October 2014 to facilitate the return of ex-residents and reconstruction of the once-abandoned towns, a substantial number of those displaced from Fukushima express their fears of returning.

As of September 2014, a total of 3,139 cases had been registered as “disaster-related deaths<sup>6</sup>” in the three most affected prefectures, which represents an increase of 277 people since September 2013. Two hundred twenty-one people, representing 80 per cent of the 277 new cases, were registered in Fukushima. Fukushima holds the highest total number of “disaster-related deaths”, in all 1,793 cases. Fukushima is the only prefecture where the disaster-related fatalities outnumber the direct disaster deaths, highlighting the prolonged impact of the nuclear disaster on the survivors.

<sup>1</sup> The epicentre is 130 kilometres from Japan’s northeast Pacific coast.

<sup>2</sup> Figures are as of 10 March 2015.

<sup>3</sup> On 12 April 2011, the government declared the crippled Fukushima nuclear plant as a level 7 accidents on the International Nuclear and Radiological Event Scale (INES), equivalent to that of the 1986 Chernobyl crisis.

<sup>4</sup> Figures are as of 11 March 2015. Of 118,000 people, approximately 47,000 people are displaced to other prefectures.

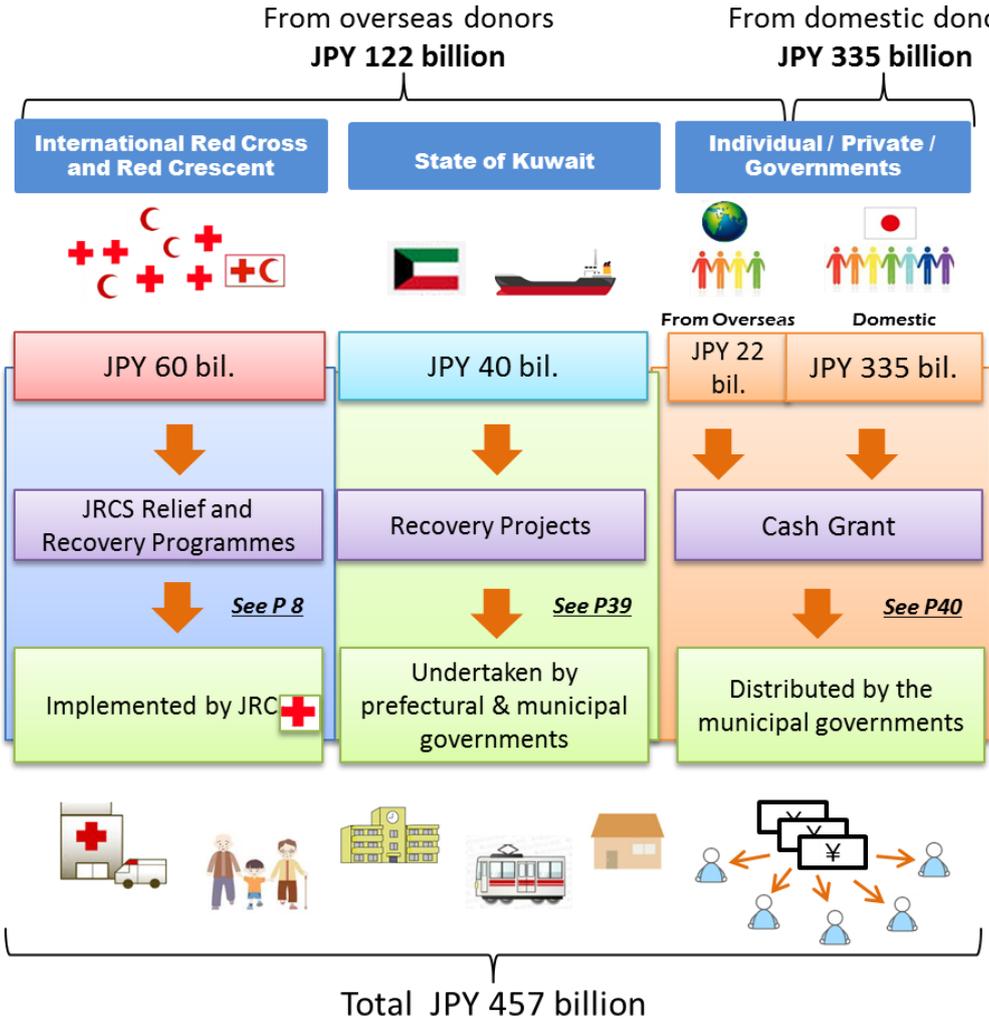
<sup>5</sup> As of December 2014, in Miyagi and Iwate, 4,933 units were completed which represents only 16 per cent of the total planned unit (29,941 units). The Government took legal measures so that to simplify land acquisition and expropriation proceedings which have been long remained as obstacles of swift reconstruction.

<sup>6</sup> *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.

## USE OF FUNDS

By 31 March 2015, JRCS has received JPY 457 billion including JPY 122 billion from overseas, and they were allocated into the following four categories:

1. JPY 60 billion: Received from PNSs of the International Red Cross and Red Crescent Movement, and allocated for the JRCS Relief and Recovery Programme. At present 100 PNS have contributed to the GEJET Operation (see the following section 4 for details).
2. JPY 40 billion: Received from the State of Kuwait in the form of crude oil donation and disbursed through JRCS to the three most affected prefectural governments in support of recovery projects on which they took the lead.
3. JPY 22 billion: Received from foreign governments, embassies, corporates and individuals, JPY 22 billion were allocated for the Cash Grant Scheme.
4. JPY 335 billion: Received from domestic donors (i.e. individuals, corporates, and other institutions), these were also allocated for the Cash Grant Scheme.



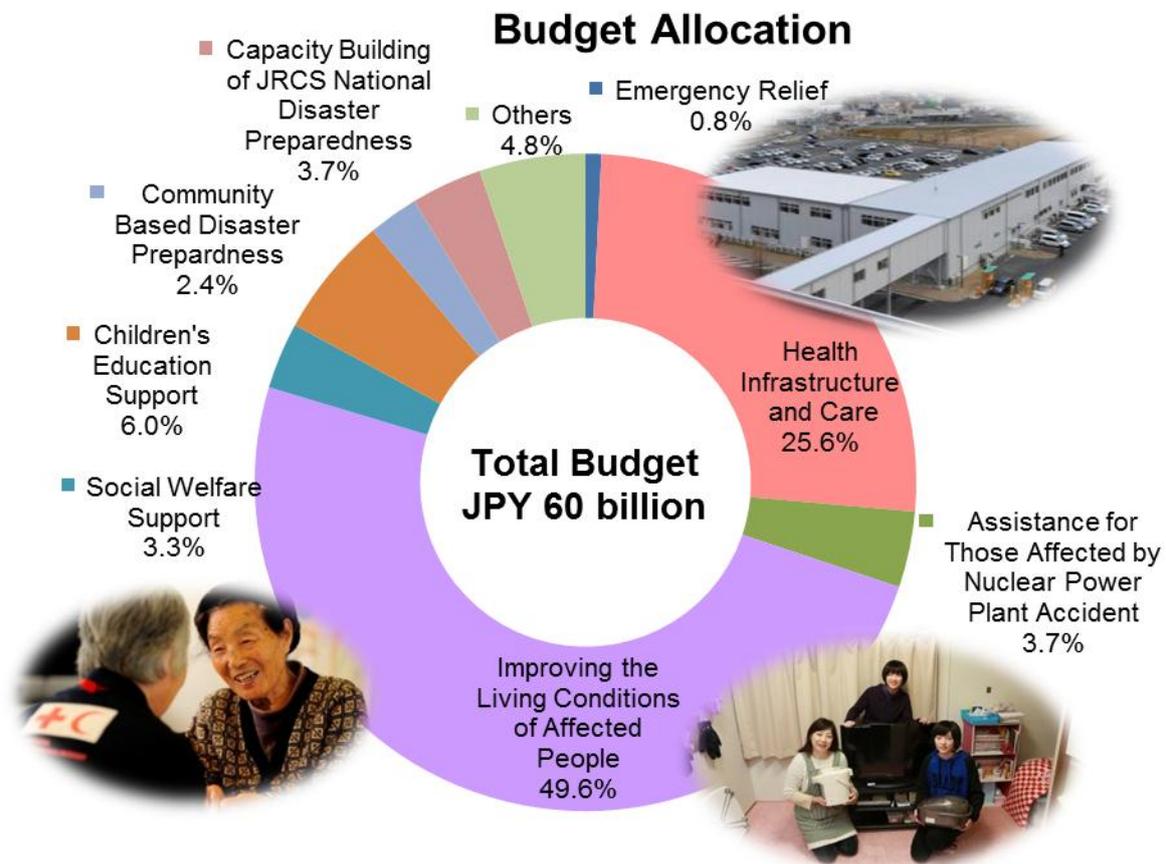
## PLAN OF ACTION (PoA)

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 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, 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 JRCS National Disaster Preparedness (Programme 10)



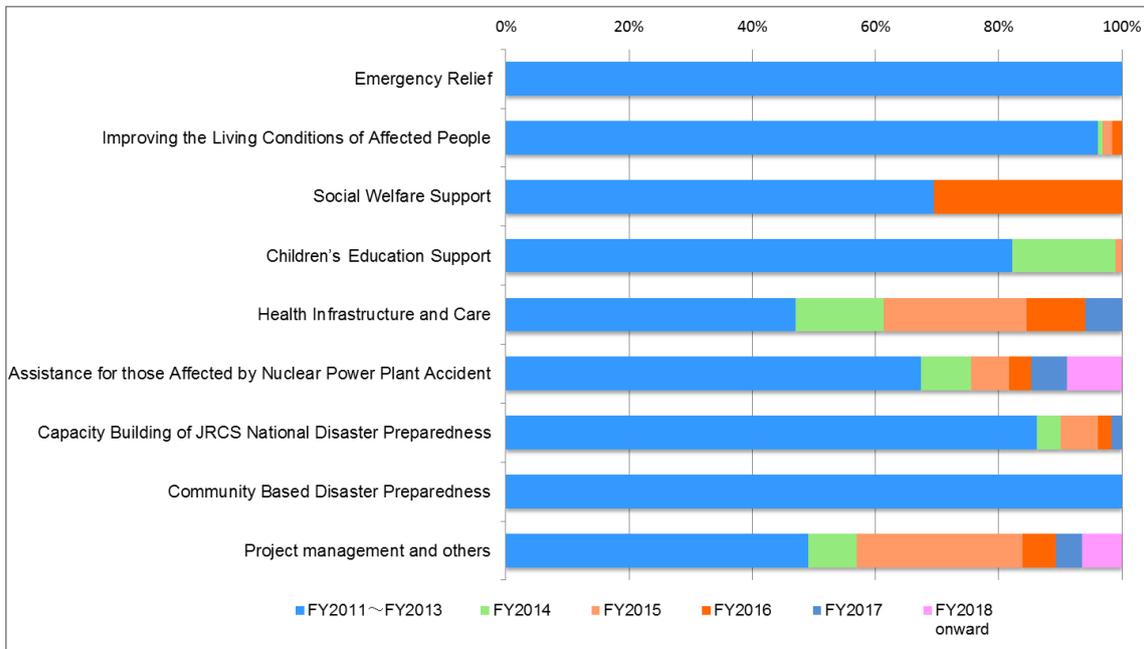
## Plan of Action and Budget Allocation

Japanese Yen (JPY) in thousand

Program		[Status] CMPL: Completed / OG: Ongoing / NEW: New			Budget
No.	Name	No.	Status	Name	Budget
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	997,065
		4-(3)	CMPL	Provision of food radiation measuring equipment	222,626
		5-(1)	CMPL	Construction of a temporary night-time emergency medical centre (Ishinomaki)	108,950
5	Rehabilitation of health infrastructure	5-(2)	CMPL	Construction of a temporary hospital for secondary medical care (Ishinomaki)	715,160
		5-(3)	CMPL	Construction of a temporary hospitals as a secondary medical care (Minamisanriku)	600,220
		5-(4)	OG	Strengthening the disaster/emergency medical capacity of Ishinomaki RC Hospital and reconstruction of RC nursing school and emergency health training centre (Ishinomaki)	4,300,168
		5-(5)	CMPL	Construction of a hospital (Motoyoshi)	153,235
		5-(6)	CMPL	Rehabilitation of Community Medical Center (Onagawa)	1,888,181
		5-(7)	OG	Shizugawa permanent public hospital (Minamisanriku)	1,600,770
		5-(8)	OG	Social Welfare Care centre (Minamisanriku, Miyagi)	620,000
		5-(9)	OG	Construction of Fukushima Red Cross Hospital (Fukushima)	1,803,411
		6	Improving the living conditions of affected people in evacuation centres and temporary housing	6-(1)	CMPL
6-(2)	CMPL			Distribution of summer amenity items, drinking water, temporary showers, water taps, etc.	119,309
6-(3)	CMPL			Distribution of winter amenity items	97,762
6-(4)	CMPL			Community bus operations support	39,379
6-(5)	OG			Psychosocial support	26,049
6-(6)	CMPL			Distribution of six electric household appliances sets	26,968,223
6-(7)	OG			Public housing and community centres (Otsuchi, Iwate)	1,448,773
6-(8)	OG			Construction of community centres	170,285
6-(9)	OG			Nordic style walking as physical exercise	19,581
6-(10)	OG			Health and Social Class	50,458
6-(11)	OG			Home visits for evacuee's health care (Iwaki, Fukushima)	104,797
6-(12)	CMPL			Psychosocial support centre for children and youth in Iwate Medical University Hospital	137,155
6-(13)	CMPL			Mobile dental care services for elderly and physically challenged persons	56,350
6-(14)	OG			Miscellaneous	90,593
6-(15)	OG			Cash Grant Scheme	172,738
7	Social welfare support	7-(1)	CMPL	Distribution of medical/nursing beds	163,863
		7-(2)	CMPL	Distribution of items for group homes for the elderly	101,756
		7-(3)	CMPL	Provision of vehicles for social welfare institutions	687,383
		7-(4)	CMPL	Services of caretakers for the elderly	1,855
		7-(5)	OG	Social welfare centre (Kesennuma, Miyagi)	600,114
		7-(6)	CMPL	Public housing for the elderly (Shinchi, Fukushima)	300,100
		7-(7)	CMPL	Public housing for the elderly (Soma, Fukushima)	100,958
		7-(8)	CMPL	Support for social welfare centres	5,458
8	Children's education support	8-(1)	CMPL	Provision of items for school kitchen centres	292,219
		8-(2)	CMPL	Provision of goods for gymnasiums	9,065
		8-(3)	CMPL	Nursery schools and after-school clubs	980,761
		8-(4)	CMPL	Construction of after-class centre (Ofunato, Iwate)	24,033
		8-(5)	CMPL	Health and safety support	3,333
		8-(6)	CMPL	School bus operations support	202,170
		8-(7)	CMPL	Provision of school items	48,792
		8-(8)	CMPL	Training outfits for football teams	39,055
		8-(9)	CMPL	Provision of items for school clinics	23,495
		8-(10)	CMPL	Organisation of indoor playground (Smile Parks)	362,230
		8-(11)	CMPL	Summer Camps	1,103,285
		8-(12)	CMPL	Prefabricated school gymnasiums	289,289
		8-(13)	OG	Red Cross Youth and Volunteer Project	155,199
		8-(14)	CMPL	Establishment of "Children's World"	68,225
		8-(15)	CMPL	"Dream Blossom" Project	2,817
		8-(16)	OG	Miscellaneous	13,984
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	2,090,283
		10-(2)	NEW	Disaster Preparedness Training	101,390
		10-(3)	NEW	Mobilization of Youth Volunteers for disaster management	35,205
		10-(4)	NEW	Disaster Preparedness Education Program for Junior Red Cross/Red Cross Youth	22,929
11	Other Projects	11-(1)	CMPL	AED and other necessities for volunteer centres	16,487
12	Project under formulation	12-(1)	N/A	Future potential programmed.	1,102,608
13	Project management and support	13-(1)	N/A	HR, consultancy, audit, evaluation, support by IFRC	1,793,480
<b>TOTAL</b>					<b>60,155,841</b>

## OVERVIEW OF RELIEF AND RECOVERY OPERATION

As of March 2015, a total of JPY 50.5 billion or 83.9 per cent of the 60.2 billion budget had been spent leaving JPY 9.7 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 2017. Although small in scale, projects such as psychosocial support (under Improving the Living Conditions) and youth activities (under Children's Education) will be continued until 2017 to address the persistent needs of affected populations. Nuclear-related activities will be extended until 2020 by the JRCS Nuclear Disaster Resource Centre (<http://ndrc.jrc.or.jp/?lang=en>).

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

## PROGRAMME GOAL AND ACHIEVEMENTS

### Emergency Relief (Programme 1 and 2)

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

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 JRCS chapters to facilitate warehousing/dispatch of relief supplies.

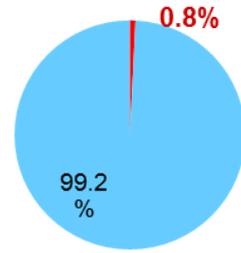
JRCS deployed 896 medical teams to the affected prefectures. Out of these, 55, including 22 Disaster Medical Assistance Teams (DMAT), were deployed within the first 24 hours. The JRCS network of 92 Red Cross hospitals provided

sites to receive patients. Fourteen out of 20 domestic Emergency Response Units (dERU) were mobilised. More than 87,000 patients were treated in the most affected prefectures. Additionally, more than 14,000 people received psychosocial support.

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

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 460 million  
Balance: JPY 3 million

as of March 2015

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

## Health Infrastructure and Care (Programme 3 and 5)

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

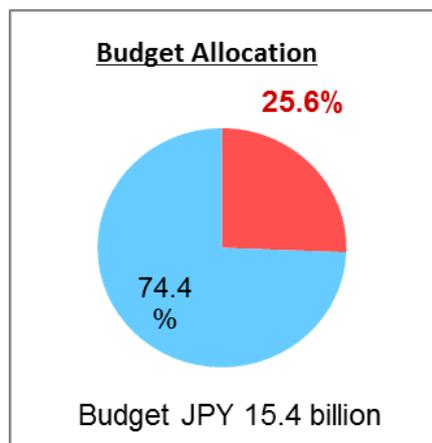
The funds were allocated to a pneumonia vaccination campaign for the elderly, improvement of service delivery for a prefectural hospital in Iwate, and strengthening community health care service in Miyagi and Fukushima through rehabilitation and (re)construction of temporary and permanent health care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

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

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

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

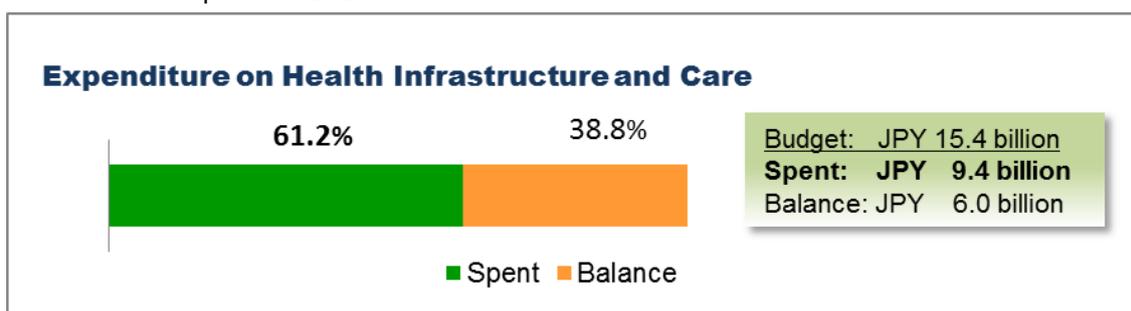
To date, three temporary facilities have been built in Miyagi to provide secondary medical and night-time emergency care. Two permanent facilities, Onagawa Community Medical Centre and Motoyoshi Hospital, were also been rehabilitated and constructed to date with the help of JRCS, and these two facilities together can serve more than 105,000 in-patients and out-patients annually. Work is also underway on an additional two facilities, Minamisanriku Hospital and Social Welfare Care Centre, which will operate in tandem with each other to better serve the community. The work will be completed in 2015.



Pneumonia vaccination for elderly	437,856 people
Provision of air purifiers	4 machines
Constructed or Rehabilitated health facilities	5 facilities
Construction of health facilities ongoing	3 facilities
Construction of a social welfare facility ongoing	1 facility



Disaster Medical Training Centre at JRC Ishinomaki Hospital was completed in March 2015. ©JRCS



## 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.

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.

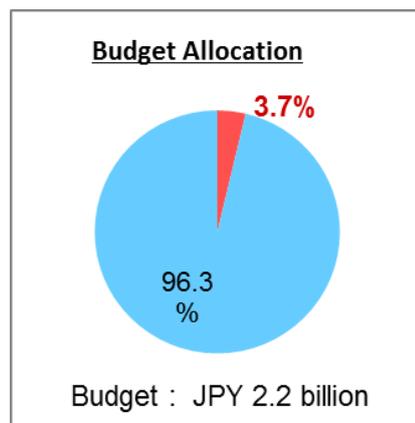
Under this project, 73 items of medical equipment were also procured for Fukushima Medical University Hospital to meet the needs of an increasing number of patients requiring medical check-ups, and 109 units of food radiation measuring equipment were provided in Fukushima and Miyagi to address the unease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

Established in October 2013, the Red Cross Nuclear Disaster Resource Centre marked its 1<sup>st</sup> anniversary in 2014 and organized various seminars and sessions. As a part of dissemination activities, continued from last year, the Third Red Cross Nuclear Disaster Seminar entitled "Health Assistance for Nuclear-Disaster Affected People" was co-hosted with the JRC College of Nursing in October 2014. Also, for JRCS relief team members to learn basic knowledge about radiation and radiation emergency medical care arrangements, the first and the second Nuclear Disaster Response Basic Training Sessions were held in November 2014 and February 2015.



Third Red Cross Nuclear Disaster Seminar was held at the JRC College of Nursing in October 2014. ©JRCS

"Guidelines for Red Cross Activities during Nuclear Disasters" has been developed since 2013, and the guidelines were established in March 2015.



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

### Expenditure on Assistance for those Affected by Nuclear Power Plant Accident



Budget: JPY 2.2 billion  
Spent: JPY 1.6 billion  
Balance: JPY 0.6 billion

as of March 2015

## Improving the Living Conditions of Affected People (Programme 6)

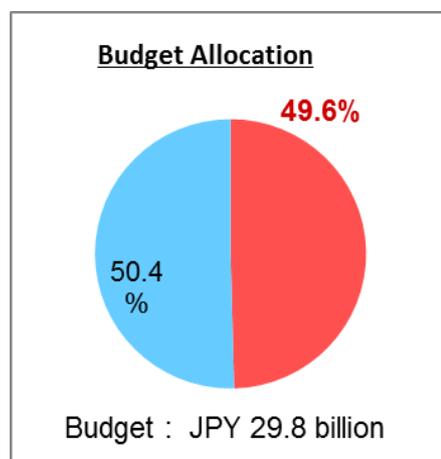
The disaster sent large numbers of people fleeing to evacuation centres and temporary housings, in what was expected to be a prolonged displacement. Therefore, improving the living conditions of evacuees has consistently been a major concern of the local authorities. By complimenting the efforts of the 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>7</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.

Electric appliances and furniture considered essential, such as TV sets, vacuum cleaners, washing machines, book shelves, tables and chairs, were provided to the evacuation centres. They were later delivered to the temporary housing in which well-equipped public space was needed to build a sense of community.

A huge operation with JPY 26.8 billion (equivalent to 45 per cent of the total GEJET budget) followed involving the distribution of a set of six essential electric household appliances<sup>8</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.

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.



Furniture and electric appliances for evacuation centres and community centres provided	38,005 items
Summer amenity provided	202,546 kits
Winter amenity items distributed	137,438 items
Medical information reassurance kits provided	57,720 sets
Electric household appliances sets distributed	133,183 sets
Community bus operations supported	3 routes in 2 towns
Items for mobile dental care services distributed	11 sets of equipment , 5 vehicles
Public household units constructed	161
Community centres constructed	2 facilities



Electronic appliances sets carried into a temporary housing in Iwate Pref. ©JRCS

<sup>7</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>8</sup> It is comprised of a washing machine, a refrigerator, a TV set, a rice-cooker, a microwave and a hot water kettle.

In addition to two community centres in Miyagi and Fukushima, a psychosocial support centre for children “Iwate Children’s Care Centre” located in Iwate Medical University Hospital and 161 out of the total 730 disaster recovery public housing units have been completed to date in Iwate. Bus services were also provided in Miyagi and Fukushima to facilitate the mobility of people in temporary housings located far from the social services and commodities in town. The services were later handed over to the public bus service operators.



Completed disaster recovery public housing units in Iwate Prefecture. © JRCS

Nowadays, most of the projects besides construction of the disaster recovery public housing and the community centres have been completed. The main focus for the programme has been shifted to psychosocial support for those who are still residing in temporary housings. Psychosocial support is being provided in combination with events like Nordic-style walking, tea parties and health and social classes, so as to encourage participation of intended beneficiaries who may otherwise tend to stay home by themselves. The role of psychosocial support has been changing to meet the needs of the beneficiaries who need to rebuild their new communities due to merger and abolishment of temporary housings. Also, the residents who are still residing in temporary housings are mostly elderly who have more difficulties moving and adjusting to new places and environments. Although the number of temporary homes and residents has decreased, there are still needs for psychosocial care for them, and psychosocial support will likely be required for some years to come.



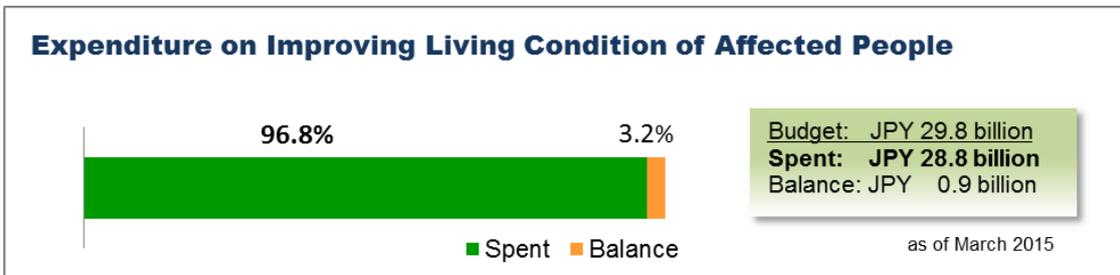
Bus service connects the temporary housing and the city in Minamisanriku, Miyagi. ©JRCS



Participants enjoy Nordic Walking in the beautiful nature. © JRCS



The residents at the temporary homes get together for tea party. © JRCS



## 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.

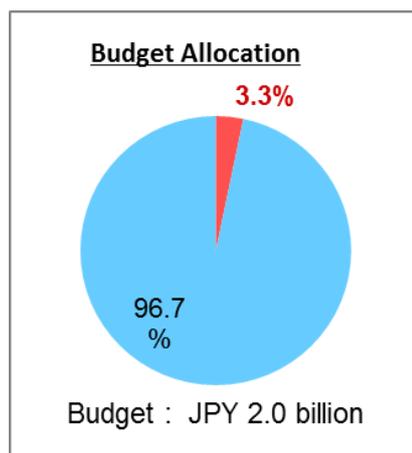
A significant amount of funds was allocated for the provision of emergency care to the elderly; strengthening service delivery through provision of items to social welfare institutions; and construction of social welfare facilities and housings for the elderly.

To meet the urgent needs of special care for the elderly, 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, 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. JRCS donated vehicles, furniture, fixtures, and nursing beds to hundreds of these welfare institutions in order to help them to resume their operations and services for needy elderly and physically challenged persons.

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

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

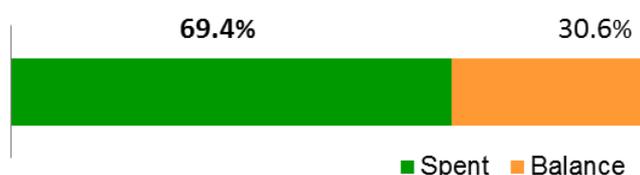


Caretakers for evacuation centres dispatched	67 staff
Nursing Beds distributed	959 beds
Group-home (home for the elderly) items distributed	2,239 items
Vehicles for social welfare institutions provided	338 vehicles
Elderly housing constructed	5 facilities
Construction of social welfare centre ongoing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



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

## Expenditure on Social Welfare Support



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

as of March 2015

## Children's Education Support (Programme 8)

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

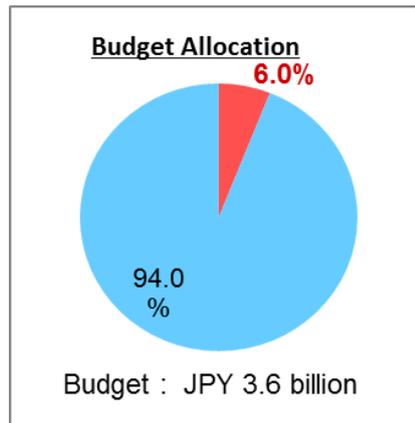
The funds were allocated to cover three areas; events involving learning and socializing opportunities; provision of items and/or equipment; and establishment of facilities.

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

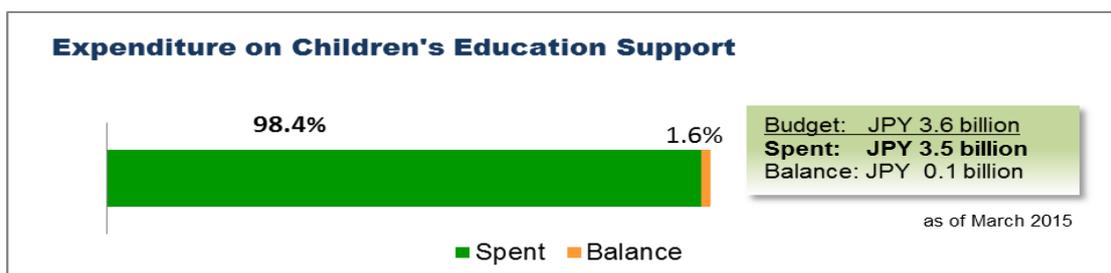
The summer camp project, which took nearly 5,800 children from the disaster-hit prefectures to Hokkaido, was the largest project of this programme. The camp aimed at providing children with time and space to release stress from the numerous changes brought about by the disaster. Children learned first aid and experienced various outdoor activities, with additional content of educational perspectives being provided through workshops on environmental issues, international understanding, dietary education, etc. Twenty sessions of the camp were organized in total in 2012 and 2013.

Another significant initiative was a mobile indoor playground "Smile Park" in Fukushima. It provided a safe space where parents could let their children play without being anxious about radiation. Given the high demand, the operation of this temporary playground was extended to two years, and until the closure in December 2013, it drew 53,538 children.

To date, most of the projects have been completed, and the Red Cross Youth and Volunteer Project is the only project which is ongoing. This project has been organized by the JRC Iwate, Miyagi, and Fukushima Chapters, which provide opportunities for the younger children to release stress by participating in various activities such as overseas study tours, musical concerts and essay competitions.



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	20 times, 5,788 children
Electric blackboards provided	16 boards
Prefabricated gymnasiums constructed	3 facilities
Nursery schools, kindergarten and after-school clubs constructed	7 facilities

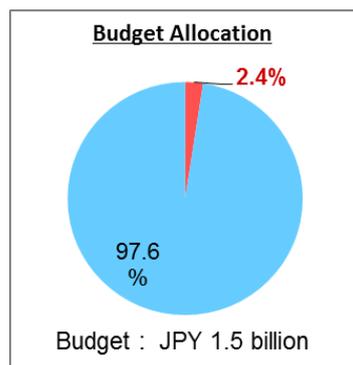


## Community Based Disaster Preparedness (Programme 9)

Strengthening the capacity of municipalities in the affected areas is vital to complement the on-the-ground work of 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 either washed away, damaged or exhausted during the disaster, leaving an urgent need for replenishment.

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



### Expenditure on Community Based Disaster Preparedness



## Capacity Building of JRCS National Disaster Preparedness (Programme 10)

JRCS is working systematically to strengthen its capacity to respond to any future emergency. In parallel with assisting municipalities in increasing their preparedness, 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.

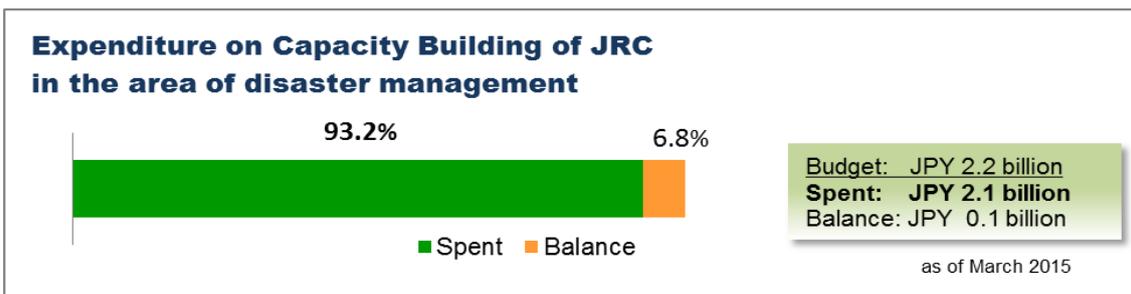


Under this programme, three new projects were added; Disaster Preparedness Training, Mobilization of Youth Volunteers for Disaster Management, and Disaster Preparedness Education Program for Junior Red Cross/Red Cross Youth. The projects focus on strengthening preparedness against disasters among the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

Under the Disaster Preparedness Training, which aims at promoting awareness, relevant knowledge and skills in the community, two pilot projects were implemented in Osaka and Iwate in October 2014 and January 2015 respectively with a total of 56 participants.

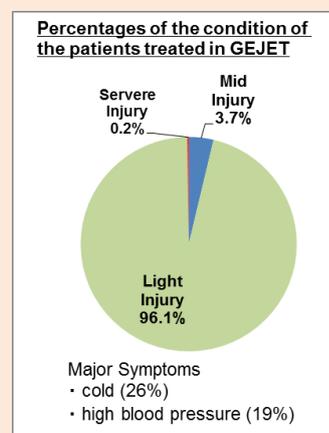
In order to promote more active participation of Youth Volunteers in supportive activities for the recovery programmes, the JRCs set a new policy aimed at mobilizing youth volunteers to take greater part in disaster management. In 2014, 34 youth volunteers participated in a tour to visit the affected area in Iwate prefecture.

In the Disaster Preparedness Education Program for Junior Red Cross/Red Cross Youth, the targeted groups were students in junior and senior high schools. During 2014, the text book, “Mamoru Inochi Hiromeru Bosai (Junior Red Cross Disaster Preparedness Education Program)” was compiled and published. The text books will be distributed to junior and high schools in Japan for free in order to attain the goal of promoting disaster preparedness education in the school environment.



### To survive a disaster: Community Based Disaster Preparedness Education

Despite the immediate dispatch of JRC medical teams to the GEJET affected area<sup>9</sup>, due to the impact of the disaster the majority of the people who died were instantly killed. Most of the patients treated by the JRC medical teams had minor injuries and survived (see the pie chart)<sup>10</sup>. In addition, the average number of patients per team in the first two days of operation was significantly fewer compared with previous earthquake disasters in Japan (see tables). This does not only highlight the substantial limit of medical teams in the face of a mega-disaster like GEJET, but underlines the great importance of survival skills as the principle measure of saving lives.



**Activities of JRCs Medical Relief Teams**

Disasters (date)	No. of MRT deployed	No. of Patients treated	Average No. of patients treated per 1 MRT
Hanshin-Awaji Greatquake (17 Jan. 1995)	981	38,359	3.9
Chuetsu EQ in Niigata (23 Oct. 2004)	164	11,994	73.1
GEJET (11 Mar. 2011)	896	87,445	97.6

Meanwhile, life-saving activities are usually jump-started by the community on the spot, and the GEJET was not an exception.

<sup>9</sup> In response to the GEJET, JRCs deployed 896 Medical Relief Teams during the first three months of the emergency phase, with 55 in the first 24 hours and 93 in the first 48 hours.

<sup>10</sup> In GEJET, over 90 per cent of the deaths were caused by tsunamis.

**Average No. of patients treated per 1 JRCS MRT 2 days after the EQs**

Disasters (date)	No. of MRT deployed	No. of Patients treated	Average No. of patients treated per 1 MRT
Hanshin-Awaji Greatquake (17 Jan. 1995)	60	3,791	63.2
Chuetsu EQ in Niigata (23 Oct. 2004)	7	757	108.1
GEJET (11 Mar. 2011)	93	1,214	13.1

JRCS, in anticipation of mega disasters equivalent to GEJET, has been multiplying its efforts in disaster preparedness through preparing for nuclear disasters, improving medical response coordination, hard component preparation and disaster preparedness education.

During the reporting period, JRCS accelerated its efforts on community based disaster preparedness education that aims at promoting awareness, relevant knowledge and skills among the target population, while at the same time creating a group of leaders who can, at the onset of disaster, efficiently and effectively spearhead the first response at the community level.

Two pilot projects were tested with the aim of rolling them out nationwide in a 15-year period, starting in 2016. The projects were based on one-day workshops with 56 participants. The first workshop was conducted in October 2014 in Osaka, not far from Kobe. Kobe was hit by the Hanshin-Awaji Great Quake in 1995 that killed more than 6,500 people. The second one was carried out in January 2015 in Iwate, one of the three prefectures most affected by GEJET. The disaster also claimed some 6,000 lives in Iwate, including more than 1,100 people that are still unaccounted for. Disaster Imagination Game (DIG) was used as a component of the curriculum.



Some additional pilot projects are now scheduled in 2015 during which the curriculum and the implementation structure will be defined. Given the limited capacity of JRCS branches, streamlining and standardization of collaboration with other agencies is among the keys to successful implementation.

**Core components of the pilot curriculum used in Osaka and Iwate**

1. Disaster Ethnography (100 minutes)
2. Disaster Imagination Game (120 minutes)
3. Rescue and First Aid Technical workshop using common/available tools (50 minutes)

## COORDINATION AND PARTNERSHIPS

Two noteworthy events that were important for coordination and partnership during the reporting period include the 3rd Reference Group Meeting on Nuclear and Radiological Disaster Preparedness, which JRCs co-hosted with IFRC in October 2014\*. External groups such as the International Atomic Energy Agency (IAEA), International Commission on Radiological Protection (ICRP) and representatives of the Japanese Diet, participated in the meeting, which served as a networking platform for participating National Societies, ICRC and IFRC. A draft IFRC Operational Guidelines for Nuclear Emergency Preparedness and Response was reviewed in detail and

the way forward was discussed by adopting concrete action points. The Guideline is to be presented at the General Assembly in 2015. As a part of the meeting, the participants had an opportunity to visit Fukushima to embrace the humanitarian consequences of the nuclear disaster.

\*[http://ndrc.irc.or.jp/3rgm/index\\_en.html](http://ndrc.irc.or.jp/3rgm/index_en.html)



Representatives from 47 national societies participated in the conference. © JRCs

This meeting drummed up to the 3rd UN World Conference on Disaster Risk Reduction (WCDDR) held in March 2015 in Sendai, Fukushima, in which Elhadj As Sy, Secretary General of IFRC moderated a working session on technological hazards. A total of 126 people representing 47 National Societies, ICRC and IFRC gathered for the five-day conference which drew an additional 187 state representatives from all over the world. National Societies, some even acting as panellists, actively participated in different working sessions which contributed substance to the Sendai Framework for Disaster Risk Reduction 2015-2030 adopted at the end of the conference. At the Conference, Tadateru Kono, President of IFRC, announced the “One Billion Coalition for Resilience” initiative as the voluntary institutional commitment towards the new Framework. Meanwhile, in conjunction with the conference, JRCs and Fukushima Prefectural Government signed the “Joint Declaration regarding Revitalization and Disaster Preparedness” to strengthen the cooperation in light of a prolonged process for recovery from the triple disaster.

### **Challenges of Nuclear Disaster Preparedness**

The Fukushima nuclear disaster added a new dimension to the future relief and recovery intervention of the Movement. In the past four years, constant efforts have been made in areas such as partnership building, knowledge management and operational guidelines for the nuclear emergency. An increased awareness on the issue among the Movement is demonstrated by the number of participating National Societies to the Reference Group Meeting on Nuclear and Radiological Disaster Preparedness, which reached 16 in the 3rd meeting held in Fukushima in October 2014. “The buy-in to the programme is, nevertheless, slower”, says Martin Krottmayer, IFRC Focal Point.

Prolonged and profound consequences of the nuclear disaster are still clearly seen in Fukushima, where Krottmayer was invited, along with Walter Cotte, Under Secretary General of IFRC, to address at the Residents Symposium for Fukushima Reconstruction 2015, organized in conjunction with the 3rd UN World Conference on Disaster Risk Reduction.

Asked about the “uniqueness” of challenges surrounding nuclear disaster preparedness, Krottmayer points out that the preparedness, due to the rareness of occurrence and despite the magnitude of potential consequences, does not go beyond a theoretical base.

At present, more than 30 countries operate more than 400 nuclear power plants. The consequences of nuclear emergencies will be grave, and potentially borderless. In his address, Cotte urged countries with nuclear power, their neighbouring states and the international community to prepare for the potential consequences of nuclear disasters.

## EVALUATION

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. 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, JRCS, jointly with IFRC, commissioned independent experts to carry out two evaluations; one for relief activities during the first six months of operation; and the other for recovery activities during the first two years of operation.

### **Independent Evaluation Report (Relief)**

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

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

### **Independent Evaluation Report (Recovery)**

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

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

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

### **JRCS Management Response to the Independent Evaluation Report**

[https://www.ifrc.org/docs/Evaluations/Evaluations\\_per\\_cent202012/AsiaPacific/JPEarthquakeTsunami12\\_management\\_per\\_cent20response.pdf](https://www.ifrc.org/docs/Evaluations/Evaluations_per_cent202012/AsiaPacific/JPEarthquakeTsunami12_management_per_cent20response.pdf)

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

### **Third-Party Evaluation Report for FY2011**

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

[http://www.jrc.or.jp/vcms\\_lf/Third\\_Party\\_Evaluation\\_2011.pdf](http://www.jrc.or.jp/vcms_lf/Third_Party_Evaluation_2011.pdf)

### **Third-Party Evaluation Report for FY2012**

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

[http://www.jrc.or.jp/vcms\\_lf/Third\\_Party\\_Evaluation\\_2012.pdf](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, JRCS adhered rigorously to international standards of auditing. Ernst and Young ShinNihon LLC completed an audit of the GEJET international donations received until 31 March 2014. 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

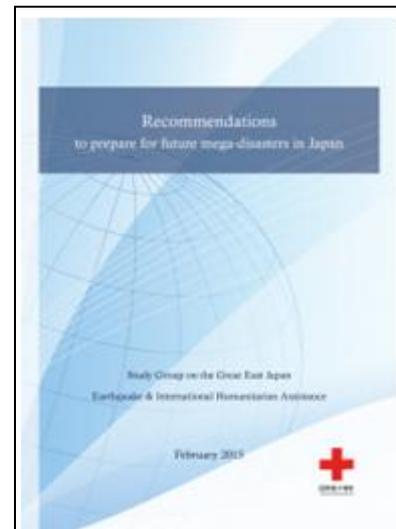
[http://www.jrc.or.jp/vcms/lf/2013\\_kyuenkin\\_auditors\\_report1.pdf](http://www.jrc.or.jp/vcms/lf/2013_kyuenkin_auditors_report1.pdf)

## 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 JRC 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. JRC, through JRC Institute for Humanitarian Studies, which acts as the secretariat of the Study Group, was actively involved in the paper's compilation. The Japanese version of the paper was published in March 2014.

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

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



## COMMUNICATION, MEDIA AND PUBLIC INFORMATION

With the Japanese slogan translated as "The way to recovery, we still need your collaboration," the fourth year GEJET communication has focused on revoking interest and awareness among the general public so as to maintain their spirit of collaboration for reconstruction programmes which continued throughout the year.

In the fourth anniversary poster, postcard, leaflet, commercial film and newspaper ads in two national papers and 16 local papers, JRC casted the 2014 Winter Olympics Gold Medallist, figure skater Yuzuru Hanyu, as the messenger. The 60-second commercial film has been aired more than 108,000 times in 80 *Aeon Theatres* throughout the country in collaboration with Aeon Entertainment Co, LTD, and 350,000 times in 4,000 *Joysound* karaoke shops in collaboration with Standard Information Co. Hanyu is from Sendai, Miyagi prefecture, one of the most



JRCS Logo for the brochures issued at the occasion of the 3rd anniversary. © JRC



The 4th anniversary leaflet with Yuzuru Hanyu as the JRCs messenger. © JRCs

affected areas, and he himself lived in temporary housing after evacuating from the damaged skate rink where he was practicing. In the last year, collaboration was extended with All Nippon Airways for various promotional opportunities that included advertisements on paper cups in domestic flights.

In conjunction with a set of public information materials (Key Message, Press Release, Facts and Figures, etc.) which were distributed through IFRC Newswire in March 2015, three DVDs were produced as an additional feature of the fourth anniversary. They were shared with PNSs and donors alike, and put on YouTube for wider viewership. They captured the progress in the affected areas through the eyes and voices of beneficiaries of health services, child care and youth activities. The film on youth involved filming in the Philippines, where JRCs has been operating to help victims of disasters such as the November 2014 Typhoon *Haiyan*. The videos can be accessed through the following links:

**Iwate Children’s Care Centre at Iwate Medical University Hospital:**  
<https://www.youtube.com/watch?v=L2dZvluftxk>

**A New Hospital in Minamisanriku:**  
<https://www.youtube.com/watch?v=XW34lwaB8AY>

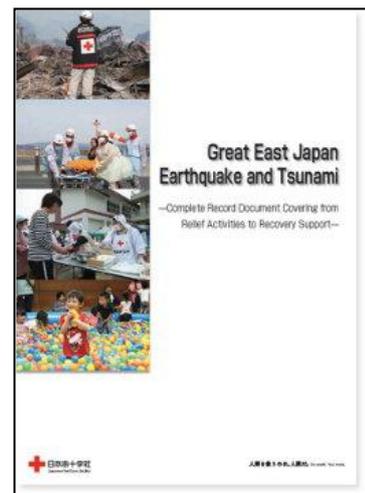
**Message from Fukushima to the World:**  
<https://www.youtube.com/watch?v=fzyuDrc2njw>

Updates have been published throughout the year through the JRCs homepage, Facebook, and monthly newsletter to keep the donors and other interested parties abreast of the latest progress. Tadateru Konoe, in his capacity as JRCs President and current President of IFRC, took an opportunity to provide an update of the progress of the GEJET operation to the international community. This included but was not limited to the opening speech at the 3<sup>rd</sup> Reference Group Meeting on Nuclear and Radiological Disaster Preparedness, which took place in Fukushima in October 2014.

<http://ndrc.jrc.or.jp/special/3rgm-speech/?lang=en>

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

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



## PROGRESS TO DATE (until March 2015):<sup>11</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, JRCs released emergency stocks from its national network of warehouses. The transport was facilitated by the logistic agencies with which JRCs had stand-by agreements. Over 148,000 blankets, 38,000 emergency kits and 15,000 sleeping sets were delivered and distributed to evacuees to alleviate their suffering. Stocks were later replenished and stored in the warehouses for future use, along with an additional 1,257 units of items that replaced stocks that had been either damaged or washed away from the warehouses in the three most affected prefectures.



**Blanket**

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



**Emergency Kit**

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



**Sleeping Set**

Prefectures delivered	Amount delivered
Iwate	5,000
Miyagi	6,000
Fukushima	1,500
Others	2,906
<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 neighbouring Ibaraki prefecture. Psychosocial support was also provided to 14,039 survivors. At the request of the Government, 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>11</sup> The completion of a project is recorded in the narrative report as the time when distributions, construction, and all related activities have ended, and does not necessarily represent the completion of all financial settlements

### **3. Regional Healthcare Support -- PROGRAMME COMPLETED**

#### **3.1 Pneumonia vaccination for the elderly -- COMPLETED**

After the disaster, the risk of infection rose dramatically due to poor living conditions and harsh weather. The elderly were particularly susceptible as many had to endure over-crowded camp living conditions and numerous transfers during evacuation. In response to reports of increased number of cases of infections 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 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 "Guidelines for Red Cross Activities during Nuclear Disaster"**

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

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

The Red Cross Nuclear Disaster Resource Center HP carries the guidelines in English at <http://ndrc.jrc.or.jp/infolib/cont/mst/G0000001nrcarchive/000/071/000071930.pdf>

#### 4.2.2 Third Red Cross Nuclear Disaster Seminar

Continued from 2013, the Third Red Cross Nuclear Disaster Seminar was held on 3 October 2014, co-hosted by the Red Cross College of Nursing. At the seminar, activities related to health assistance in Fukushima were conducted mainly by the JRCS nurses. Progress on the programme, “JRCS Health Assistance Program for Namie,” was reported. Approximately 200 people participated in the seminar.

#### 4.2.3 Digital archives

Through the Red Cross Nuclear Disaster Resource Centre (“the NDRC”) Digital Archives, the JRCS continues to disseminate information on nuclear disasters and the situation in the affected areas. During 2014, the NDRC posted 1,006 information pieces on the Digital Archives as well as 301 portal links. In addition, five special pieces have been released to the public to help them understand the contents of the archives.

#### 4.2.4 The Third Reference Group Meeting on Nuclear and Radiological Emergency Preparedness

The JRCS and the IFRC co-hosted the Third Reference Group Meeting on Nuclear and Radiological Emergency Preparedness in Fukushima from 27 to 30 October 2014. About 40 participants from 16 National Societies, ICRC and IFRC attended the meeting. Participants were able to improve their understanding of the damages caused by the nuclear disaster in Fukushima, as well as the progress of the reconstruction and related challenges for nuclear emergency preparedness.

#### 4.2.5 Residents Symposium for Fukushima Reconstruction 2015

The Residents Symposium for Fukushima Reconstruction 2015 was held on 15 March 2015, as one of the public forums of the Third UN World Conference on Disaster Risk Reduction (14 - 18 March 2015 in Sendai). Twenty-three members from the National Societies participated in the symposium. The JRCS invited two keynote speakers from IFRC to the symposium, Mr. Walter Cotte, Under Secretary General of the IFRC, and Mr. Martin Krottmayr, Senior Officer in the Nuclear and Radiological Accidents Preparedness Programme Services Division of the IFRC.



The Symposium filled with 380 participants around the world. © JRCS

On 17 March 2015, the JRCS signed the “Joint Declaration regarding Revitalization and Disaster Preparedness” with Fukushima Prefecture. Based on this joint declaration the JRCS will continue to provide assistance to Fukushima residents in collaboration with the Prefecture.

#### 4.2.6 JRCS First and Second Nuclear Disaster Response Basic Training Sessions

The JRCS organized two sessions of “Nuclear Disaster Response Basic Training” during the fiscal year based on the lessons learned from the GEJET. The training sessions were held at the JRCS Headquarters in November 2014 and February 2015 for the staff of JRC chapters, physicians, nurses, radiological technicians and administrative staff to teach them about the importance of nuclear emergency preparedness.



The Second Training Session was held on 20 Feb., 2015, with 85 participants. © JRCS

#### 4.3 Provision of food radiation measuring equipment -- COMPLETED

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

## **5. Rehabilitation of Health Infrastructure**

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

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

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

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

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

Minamisanriku, once with a population of 17,815, was left with 13,991 people after the disaster. This was caused by a high number of deaths and cases of missing persons as well as by migration to other parts of Japan. In April 2012, the temporary hospital for secondary medical care in Minamisanriku replaced the make-shift clinics in which the Israeli medical team had been providing medical services since immediately after the disaster. This building was used until the permanent city hospital was rebuilt (see below 5.7). The facility consists of nine out-patient departments including internal medicine, trauma, orthopaedics and paediatrics.

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

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. 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 planned to establish a Disaster Medical Training Centre for medical teams during disaster response, and to rebuild the destroyed Japanese Red Cross Ishinomaki School of Nursing in the same building. The Disaster Medical Training Centre was completed in March 2015 and started operations in May 2015. Construction of the annex is scheduled to continue until July 2015.

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

The severely damaged hospital in Motoyoshi area, which covers Kesenuma and Minamisanriku, used to treat 21,000 patients per year. JRCS supported part of the construction 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 damage by the tsunami.

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

Onagawa used have 10,000 inhabitants prior to the devastation, which took the lives of approximately seven per cent 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 providing 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 the general care department and 100 beds for the elderly healthcare facility.

### **5.7 Construction of Minamisanriku Hospital (formerly named “Shizugawa Public Hospital”) (Minamisanriku, Miyagi)**



Minamisanriku Hospital is expected to be completed in fall 2015. © JRCS

Shizugawa Public Hospital in Minamisanriku was the only public medical facility for a population of 15,000 until it was destroyed by the tsunami. Meanwhile, a temporary medical clinic built by JRCS provides secondary medical care for the people of the municipality (see above 5.3), and a basic construction plan to rehabilitate medical facilities was finalised by the municipality of Minamisanriku in March 2013. The plan aimed to build a permanent hospital resilient to future disasters with a quake-absorbing structure and emergency water and power supply systems. The expected capacity of the hospital was about 50,000 out-

patients and 31,000 in-patients per year. Construction of both the hospital and the health and social welfare centre (see below 5.8) has been making steady progress and will be completed in October 2015.

### **5.8 Construction of Health and Social Welfare Centre Minamisanriku (formerly named “Social Welfare Care Centre”) (Minamisanriku, Miyagi)**

In response to the request of the municipality of Minamisanriku, JRCS has been supporting the construction of a social welfare centre which was destroyed by the tsunami. The new centre will provide comprehensive social welfare services including support for child rearing, individual and maternal health promotion and management, nursing care, support for physically challenged persons and volunteer activities. It will be conjoined with the newly built Minamisanriku Hospital (see above 5.7), and the centre will play a key role in building a better social welfare system for the community. Construction of both the hospital and the health and social welfare centre has been making steady progress and will be completed in October 2015.

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

The nuclear disaster brought a substantial change in the context of medical service delivery in Fukushima. The evacuees and residents, especially in northern and central areas of the prefecture, were forced to live with anxieties over radiation exposure for a prolonged period. Under these circumstances, JRC Fukushima Chapter, upon receiving the request from the prefectural government, began providing radiation checks for Fukushima residents in collaboration with Fukushima Medical University. At the same time it was deemed necessary to reinforce the service delivery, especially for the people in the coastal area, and to enhance its capacity to respond to emerging medical needs. In order to fulfil these needs, construction of the new JRC Fukushima Hospital was planned in a new location. The JRC Fukushima Hospital is currently in the basic design phase, and construction is scheduled to start in 2016 and to be completed in 2018.

## **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 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 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 who 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**



A participant enjoys and relaxes while talking with a volunteer JRCS staff. © JRCS

Continued from 2013, various activities for psychosocial support, such as Nordic-style walking, tea parties, health and social classes and health consultation were organized and carried out by the JRC Chapters of Iwate, Miyagi and Fukushima prefectures, which were most badly affected areas. These activities encourage participation of beneficiaries who may otherwise stay home alone. Currently, the role of psychosocial support has been changing to meet the needs of beneficiaries who need to rebuild their new communities in the new environments due to merger and abolishment of temporary housings. Residents who still reside in the temporary homes are mostly elderly, and have more difficulty moving and adjusting to the new environments.

During 2014, 1,344 people participated in 121 events in Iwate, 452 people participated in 33 events in Miyagi, and 84 people participated in five events in Fukushima.

## Until the Second Hand Ticks Again in our Hearts

Since our hometown was devastated by the catastrophic tsunamis four years ago, reconstruction has been underway, and hints of recovery are now visible here and there. Yet our clocks in the towns — in schools, in the Municipality Office, at the harbour and in the railway stations — all have stopped. They still show the time of the disaster, and so does the clock in our hearts.

Many students who were affected do not speak with emotion or show their feelings. They do not talk much about how sad they feel, how challenging their situations are, how horrible it was to lose their childhood hometowns. The clock in their heart still shows the time of the disaster four years ago. While it is easy to imagine that they have not yet healed from their sorrow, it is not so simple to actually approach them and ask how they are.



Still standing as the symbol of Miyako city, the clock at the harbour of Fujiwara town shows the time when Tsunami hit the city. (c) Paul N. Tanaka

One of my concerns is that the lack of understanding among the general public may cause the needs of the victims to go unattended, and now, together with my students, I am actively seeking the best way to take on this challenge. As part of my workshops, I often take them to the site of the disaster and listen to their stories and experiences over the last four years. In the review session, participants are all expected to make a short report and present it to their fellow students. While it helps them to understand first-hand issues that survivors have to deal with, it also brings up unexpected emotional responses. For the survivors, it serves as the first opportunity to open up to their own feelings, and for others, it is a chance to listen to their peer's newly revealed sorrows. Both sides immediately become closer and are able to share their experiences.

There are two types of victims. The first type represents victims who were injured or actually suffered substantial and visible loss of property and/or person. The other type of victims suffered indirect losses, such as a devastated hometown, but due to the nature of these losses, they are considered invisible victims, or formally called "Unacknowledged Disaster Victims (UADV)".

Indeed, few among the participants in the workshop could hold back their tears as we reviewed the images of the tsunami engulfing their hometowns. By vividly re-experiencing and pouring out all of their long-suppressed feelings, those students became more open to share their experiences with increasing confidence. Quite often, those who are able to express their feelings belong to be the first group of victims, whose loss is generally acknowledged by the society. This underlines the serious need for psychosocial care for UADVs everywhere.

Recently, we have collaborated with the Social Welfare Council in our locality, and they share the same concerns. UADV psychosocial care has been identified as a priority, and we joined forces with local people with similar experiences to address the issue and to increase our visits and socialization activities. Our efforts shall continue until the second hand ticks once again in the hearts of every one of them. This is the supreme mission for the Red Cross Volunteer Corps that is the only student volunteer group which were affected and still active in the area devastated by the disaster.



completed, and during 2014 the number increased to 161 units as the Ogaguchi 2-Chome Municipal Housing and Masanai Municipal Housing were completed. Housing construction at other sites is scheduled to continue until 2017.

#### **Completed Housing Complexes**

Location	No. of housing units	Current Situation	Year of Completion
Ogaguchi 1-Chome	70	completed	Aug. 2013
Kirikiri	34	completed	Aug. 2013
Gensui	21	completed	Nov. 2013
Ogaguchi 2-Chome	23	completed	Sep. 2014
Masanai	13	completed	Dec. 2014
<b>Total</b>	<b>161</b>		

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

In order to provide the spaces where beneficiaries can get together and participate in various community activities, the JRCS has been supporting construction of three community centres in Fukushima and Miyagi Prefectures. To date, two community centres, Kawauchi Community Centre and Yoriiso Community Centre, were completed in November 2011 and March 2014 respectively. Construction of the last community centre in Togura, Miyagi Prefecture, will start in April 2015 and will be completed in March 2016.

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

To address the lack of exercise and the need to reduce stress among beneficiaries residing in temporary housing, the JRC Iwate and Fukushima Chapters have been operating a Nordic-style walking program since the disaster occurred. Older age groups are becoming more prominent among the participants, so the programme has been modified in order to best suited for the elderly. These activities are still popular among the residents of temporary housings. During 2014, 121 events with 1,344 participants were held in Iwate and five events with 84 participants were held in Fukushima.



Participants enjoy walking in a beautiful sunny spring day. © 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, Red Cross First Aid Classes were held 113 times during 2014 and attended by 4,771 participants. In Fukushima Prefecture, activities like soup kitchens, handicraft courses, first aid classes and health exercise classes were organized and held 170 times with 5,311 participants.

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

Due to high radiation, former residents of Namie Town have been scattered across Iwaki City in Fukushima. This project started in October 2012 in coordination with the municipality, the JRCS and the JRC Nursing College with the purpose of checking the health, psychological and social status of the evacuees through home visits. By December 2014, the survey team visited 4,970 evacuees (2,272 households).

They are currently visiting the evacuees for the third time. Four years having passed since the disaster, some evacuees are settling down in their new environment, while others strongly wish to return to Namie Town. Since Namie Town has not established temporary housing in Iwaki City, the evacuees from Namie have scattered, living in the rental houses provided by the municipality; as a result some people from Namie Town have difficulties integrating into their host communities and tend to stay home alone. For these people the visits of consultation team have significant benefits and are something they look forward to.

### **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**

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

### **6.14 Miscellaneous**

Apart from the projects mentioned above, activities such as soup kitchens, music concerts and reunion parties were organised during the reporting period. During 2014, 22 soup kitchens were used by 2,050 people in Iwate, and activities like musical concerts, movie showings and tea parties were held 15 times in Fukushima attended by 8,155 people.

## **7. Social Welfare Support**

### **7.1 Distribution of medical/nursing beds -- COMPLETED**

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

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

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

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

### **7.3 Provision of vehicles for social welfare institutions -- COMPLETED**

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

### **7.4 Services of caretakers for the elderly -- COMPLETED**

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

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

New social welfare centre in Kesenuma will function as a community support centre for parents, elderly and physically challenged people, and will also serve as an initial meeting point for social workers in emergencies. Land development for the centre started in 2013 and was completed in March 2015. Construction of the buildings will start in June 2015, and is scheduled to be completed in December 2016 with operations starting in April 2017.

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

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

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

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

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

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

## **8. Children's Education Support**

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

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

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

In response to the request for school gymnastic materials from the Office of Education of Miyagi Prefecture in the autumn of 2011, 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)**

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



Midori Kindergarten completed in Sept. 2014. © JRCS

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 JRCS decided to support this reconstruction. By the end of July 2014, land development was completed, and construction followed immediately after and is scheduled to be completed in May 2015.

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

Due to changes in the circumstances of children and their families after the tsunami, the community in Ofunato was in need of an after-class centre. Since the disaster, after-class services had been organised 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 organised 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 JRCS, along with health and safety introduction sessions designed for the parents. In Rikuzentakata, 35 people participated in a "snow picnic" which took place on a ski slope. In December 2011, mobile movie shows were held in Iwate and Fukushima Prefectures in cooperation with a private company as part of their CSR project. A total of 236 children enjoyed the screening of a popular animated film, "The Clockwork Samurai." The children enjoyed games designed to raise flu awareness before the movie.

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

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

#### **8.7 Provision of school items -- COMPLETED**

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

### 8.8 Training outfits for school football teams -- COMPLETED

Donations raised by the former football player Hidetoshi Nakata through goodwill games in Singapore and Thailand were allocated for purchasing warm-up jackets for boys' and girls' soccer teams in junior schools, high school, as well as women's teams. These outfits were distributed by 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 Organisation of indoor playgrounds, "Smile Parks" (Fukushima) -- COMPLETED

The "Smile Parks" project, one of the largest mobile indoor playgrounds in Fukushima Prefecture, opened in February 2012 and enabled children to play safely in the environment where parents did not need to worry about exposure to radiation. The locations were selected to maximise participation by children and their parents, both among evacuees and host communities. The parks provided an outdoor running track, a ball pit, a ring toss game, climbing sessions, drawing and cultural classes, and sports trials. Since July 2013, educational programming and weekend performances from famous cartoon characters were incorporated as new features. Given the increased number of indoor playgrounds operated by municipalities or other agencies in Fukushima, the JRCS managed to phase out the project in December 2013. In two years of operation, Smile Parks received 86,584 people, including 53,538 children. Under this project, 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	Ses- sion	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
<b>Total number of visitors</b>				<b>53,538</b>	<b>33,046</b>	<b>86,584</b>

### 8.11 Summer Camps -- COMPLETED

The main objective of this project was to help children recover from the after-effects of the disaster and to provide them with opportunities to learn from each other for their personal growth. From July to August 2012, 11 summer camps were held with 3,451 children from every affected area, and 951 JRC volunteers participated. The needs of the children and the impact that the summer camps had on the children led the JRCS to initiate the second round of summer camps in the following year, with 2,337 children and 870 volunteers. Generous donations of goods and manpower came from 18 corporate partners. The volunteers for the camp were drawn from Red Cross volunteers, staff from private sector stakeholders, teachers, nurses, clinical psycho-therapists and travel agency staff as well as 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, JRCS chapters in the affected area plan to organise smaller-scale summer camps within the prefectures. The details are summarized below:

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

### **8.12 Prefabricated school gymnasia (Otsuchi and Ofunato in Iwate, Iitate in Fukushima) – COMPLETED**

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

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



Summer camps were organized by three JRC Chapters (Iwate, Miyagi and Fukushima) during 2014. © JRCS

Various activities led by local chapters and JRCS volunteers have been carried out in the three most affected prefectures. The activities include caring for the elderly and in-patients in the hospitals and psychosocial support events. During 2014, the following activities were implemented; two international youth exchange programmes with 20 youths participating, three summer camps with 168 youths participating, four Red Cross volunteer meetings with 289 people participating, a musical concert attended by 321 people and one art work-shop with 45 children participating. In Fukushima, 36 events such as musical concerts, movie shows and plays attracted 5,900 youths.

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

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

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

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

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

### 8.16 Miscellaneous

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



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

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.

During 2014, the vocational experience programme for students was carried out at JRC Morioka Hospital in Iwate Prefecture with participation of 88 students.

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

## 10. Capacity Building of JRCS National Disaster Preparedness

### 10.1 Development of disaster response capacity, tools and facilities -- **COMPLETED**

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

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

## 10.2 Development of Disaster Response Capacity, Tools and Facilities



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.

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

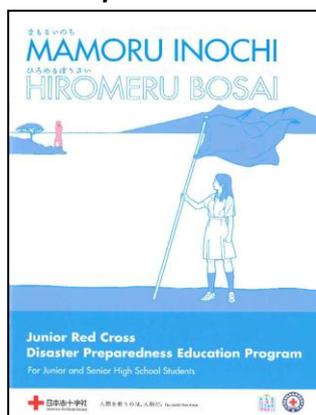
## 10.3 Disaster Preparedness Training

This project started in 2014 with the purpose of strengthening domestic disaster response capacities by providing education on disaster preparedness and risk reduction to people in the community. Activities of the programme are aimed at nurturing the spirit of self-reliance and cooperation among community members in preparation for long-predicted mega disasters like the GEJET. In 2014, two pilot programmes were implemented. The first took place in October 2014 in Osaka with 36 participants from the community, and the second in January 2015 in Morioka with 20 participants. The analysis of comparison of the questionnaires answered by the participants before and after taking the programme shows the positive impact on the participants in terms of effectiveness and validity of the programme. Please refer to the column, "To survive a disaster: Community Based Disaster Preparedness Education," on page 19 for the details.

## 10.4 Mobilization of Youth Volunteers for Disaster Management

This is a new project started in 2014. Mobilization of youth volunteers is one of the important initiatives in the GEJET recovery activities. It is anticipated that memories of the disaster will soon be fading, and it has now become necessary to recruit youth volunteers to identify current needs in the affected area. In order to do so, during 2014, 25 youth volunteers visited Iwate to collect knowledge on the situation four years after the disaster and support vitalizing the people of the affected areas.

## 10.5 Preparedness Education Programme for Junior Red Cross/Red Cross Youth



The text book was compiled and distributed for free to elementary, junior high and high schools in Japan. © JRCS

This is a new project that 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 for saving their lives in times of disaster. This project aims to teach elementary, junior high and high school students preparedness skills that will protect themselves during disasters. The programme also aims to build better understanding and awareness of importance of preparedness among the families of students and the communities they belong to. During 2014, the text book, "Mamoru Inochi, Hiromeru Bosai (Protecting Lives, Preparing for Disasters)," was compiled in Japanese. The text books were distributed for free to all elementary, junior high and high schools in Japan, and can be used as a part of the regular curriculum. The text book will be translated into English in 2015.

## 11. Other Projects -- PROGRAMME COMPLETED

### AED and other essential items for volunteer centres - - COMPLETED

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

## **12. Project Management and Support**

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

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

An evaluation of JRCS relief and recovery operations during the first two years was jointly commissioned by JRCS and IFRC from February to March 2013. This evaluation follows the effort in 2011<sup>12</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 JRCS Representative.

Japan Research Institute (JRI) has also completed an external evaluation on JRCS recovery programmes in fiscal year 2012. The report was submitted to JRCS and is now available online<sup>13</sup>.

JRCS compiled the 36-Month-Later Report to summarize its relief and recovery activities in the first three years.

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<sup>12</sup> [http://ifrc.org/docs/Evaluations/Evaluations\\_per\\_cent202012/AsiaPacific/JPTsunamiEarthquake12\\_report.pdf](http://ifrc.org/docs/Evaluations/Evaluations_per_cent202012/AsiaPacific/JPTsunamiEarthquake12_report.pdf)

<sup>13</sup> [http://www.jrc.or.jp/vcms\\_lf/Third\\_Party\\_Evaluation\\_2012.pdf](http://www.jrc.or.jp/vcms_lf/Third_Party_Evaluation_2012.pdf)

## SUPPORT FROM THE STATE OF KUWAIT

Five million barrels of crude oil valued at JPY 40 billion (approximately USD 520 million)<sup>14</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 optimise the funds disbursed from the sale of the oil. The JRC chapters in Iwate, Miyagi and Fukushima facilitated the establishment of an advisory panel comprised of members from the prefectural and municipality authorities, media, banks and enterprises which provided the prefectural governments with advice on the use of the funds. In January 2012, the following amounts were transferred: JPY 8.4 billion to Iwate, JPY 16.2 billion to Miyagi, and JPY 15.5 billion to Fukushima. The prefectures report to JRCS on the use of the funds every six months. The allocations, the expenditures of the funds and the projects in 2013 are listed below:

Iwate (Budget: 8.4 billion / Spent: 4.4 billion (52.4 per cent) by March 2014):

- Recovery of the regions along the Sanriku Railway<sup>15</sup> and the restoration of the trains and the stations
- Support for housing reconstruction
- Support for installation of solar power systems to affected houses
- Restoration of private schools
- Recovery of traditional local performing arts
- Financial support for the restoration of small-to medium-sized businesses

Miyagi (Budget: 16.2 billion / Spent: 4.3 billion (26.3 per cent) by March 2014):

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

Fukushima (Budget: 15.5 billion / Spent: 5.7 billion (37.1 per cent) by March 2014):

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

Thanks to the fund from the Kuwait, Sanriku Railway, which totals 107.6 km in length, resumed full operations on 5 April 2014 after three years of non-operation because of the disaster. Many residents residing along the railway welcomed its return as a symbol of hope for the recovery from the disaster.



Many people welcomed the return of Sanriku Railway ©JRCS

<sup>14</sup> The rate is as of when the donation was made.

<sup>15</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.

## CASH GRANT SCHEME

Under the National Disaster Management Plan of Japan<sup>16</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>17</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 other publicly-designated fundraising organisations, namely the Central Community Chest of Japan and the national broadcasting agency, NHK. This allowed the national society to start the cash transfer to the prefectures on 13 April 2011. Since April 2014, the JRCS is the sole organization that collects cash donation from the public.

Based on the decisions made by the Central Committee, JRCS transferred the funds to 15 prefectures<sup>18</sup>. Each prefecture established a prefectural Grant Disbursement Committee that set criteria for eligible recipients and the amounts to be distributed by the municipality authorities, who were in turn 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 2016. By 31 March 2015, JPY 335 billion has been received by JRCS, of which JPY 22.4 billion was from overseas. Cash donations made by PNSs after 30 September 2013 are also being used for cash grants.

While the lack of an allocation system at the prefectural and municipality levels and subsequent delays in the transfers in the initial phase undermined the reputation of the national society, 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 2015

Cash Donation	JPY	USD
<b>Total Donation received by JRCS, the Central Community Chest of Japan and NHK</b>	<b>376.0 billion</b>	<b>approximately 3.10 billion</b>
[ in which total donation received by JRCS <sup>19</sup> ]	[335.0 billion]	[approximately 2.76 billion]
Status of Cash Distribution	JPY	USD
➡ Total amount transferred to 15 prefectures	373.1 billion	approximately 3.08 billion
➡ Total amount further transferred to Municipalities from 15 prefectures	367.9 billion	approximately 3.04 billion
➡ Total amount further distributed to beneficiaries	364.2 billion	approximately 3.01 billion

The donation list from foreign countries and territories appears from page 48 onwards.

<sup>16</sup> The national Disaster Management Plan was created by the Central Disaster Management Council. JRCS is a member of the Council.

<sup>17</sup> Almost 2.9 million times of cash grant transfers were recorded, coming from overseas and domestic donors.

<sup>18</sup> Starting from 1 April 2014, the cash grants will be distributed only in 4 prefectures including Iwate, Miyagi, Fukushima and Ibaraki.

<sup>19</sup> The total collected from national and international donor sources, excluding the funds donated by PNSs after 30 September 2013.

## 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

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 organisations

		as of 31 March 2015
	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
	Red Cross Society of China	904,038,322
24	Red Cross Society of China, Hong Kong Branch	1,669,068,154
	Red Cross Society of China, Macau Branch	44,305,000
25	Colombian Red Cross Society	1,277,721
26	Cook Islands Red Cross	175,098
27	Costa Rican Red Cross	11,889,223
28	Croatian Red Cross	85,775,140
29	Cyprus Red Cross Society	5,618,812
30	Czech Red Cross	47,342,500
31	Danish Red Cross (Faroe Islands Red Cross)	681,500
32	Dominican Red Cross	335,291
33	Ecuadorian Red Cross	2,590,860
34	Estonia Red Cross	3,302,936
35	Finnish Red Cross	119,570,000
36	French Red Cross	1,850,669,146
37	Red Cross Society of Georgia	4,031,550
38	German Red Cross	3,335,437,740
39	Honduran Red Cross	367,398
40	Hungarian Red Cross	6,688,594
41	Icelandic Red Cross	19,113,287
42	Indonesian Red Cross Society Bali Chapter	79,118,244
43	Red Crescent Society of the Islamic Republic of Iran	7,653,000
44	Irish Red Cross Society	65,045,681
45	Italian Red Cross	389,027,862
46	Jamaica Red Cross	45,034
47	Red Cross Society of the Democratic People's Republic of Korea	8,090,000
48	The Republic of Korea National Red Cross	2,977,101,031
49	Lao Red Cross	636,563
50	Latvian Red Cross	18,391,430
51	Lithuanian Red Cross Society	12,205,182
52	Luxembourg Red Cross	23,705,000
53	The Red Cross of The Former Yugoslav Republic of Macedonia	1,529,982
54	Malaysian Red Crescent Society	370,787,362
55	Maldivian Red Crescent	2,718,135

	Organisation Name	JPY
56	Mexican Red Cross	72,535,786
57	Micronesia Red Cross	8,223,912
58	Red Cross of Monaco	5,156,582
59	Mongolian Red Cross Society	12,301,960
60	Red Cross of Montenegro	956,661
61	Myanmar Red Cross Society	4,309,161
62	Nepal Red Cross Society	3,580,216
63	The Netherlands Red Cross	752,925,547
64	New Zealand Red Cross	57,809,560
65	Nicaraguan Red Cross	200,527
66	Norwegian Red Cross	161,780,204
67	Pakistan Red Crescent Society	8,340,626
68	Palau Red Cross Society	2,428,894
69	The Palestine Red Crescent Society	840,563
70	Red Cross Society of Panama	1,092,949
71	Peruvian Red Cross	2,519,291
72	Philippine Red Cross	167,000,000
73	Polish Red Cross	12,420
74	Portuguese Red Cross	6,169,630
75	Qatar Red Crescent Society	67,526,838
76	Romanian Red Cross	11,443,454
77	The Russian Red Cross Society	163,836,124
78	Rwandan Red Cross	8,183,902
79	Salvadorean Red Cross Society	3,258,180
80	Samoa Red Cross Society	1,752,769
81	Red Cross of the Republic of San Marino	1,017,100
82	The Red Cross of Serbia	191,253,450
83	Singapore Red Cross Society	817,708,385
84	Slovak Red Cross	2,872,219
85	Slovenian Red Cross	19,304,221
86	South African Red Cross Society	10,829,000
87	Spanish Red Cross	416,304,782
88	The Sri Lanka Red Cross Society	395,169
89	Swedish Red Cross	51,600,000
90	Swiss Red Cross	1,999,210,672
91	Taiwan Red Cross Organization	7,027,360,958
92	The Thai Red Cross Society	748,707,214
93	Tonga Red Cross Society	11,534,778
94	Trinidad and Tobago Red Cross Society	5,999,459
95	Uganda Red Cross Society	108,047
96	Ukrainian Red Cross Society	7,100,000
97	Red Crescent Society of the United Arab Emirates	15,968,619
98	Uruguayan Red Cross	1,872,938
99	Vanuatu Red Cross Society	297,234
100	Vietnam Red Cross Society	608,584,747
101	Alwaleed Bin Talal Foundation	8,376,000
102	Embassy of Belgium	9,107,700
103	European Commission - DG ECHO	943,464,578
104	Irish Aid, Ireland	121,450,000
105	Japan-America Society of Hawaii	245,975,395
106	New Zealand Ministry of Finance and Trade	60,730,000
107	State of Kuwait	157,420,000
108	Stavros Niarchos Foundation	20,212,500
109	IFRC	4,902,319
110	IFRC at the UN Inc.	232,932,738
111	Others*	919,711,566
	<b>TOTAL</b>	<b>60,155,840,516</b>

\*Others include individuals, corporations and other organizations.

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

		as of 31 March 2015			
	Name of Country/Territory	Amount Received (in JPY)		Name of Country/Territory	Amount Received (in JPY)
1	Afghanistan	25,270,030	67	Hong Kong	720,757,877
2	Albania	8,935,198	68	Hungary	3,511,483
3	Algeria	835,100,000	69	Iceland	2,112
4	Andorra	4,340,809	70	India	488,677,806
5	Angola	877,320	71	Indonesia	209,465,045
6	Antigua and Barbuda	390,550	72	Iran, Islamic Republic of	2,010,568
7	Argentina	38,708,820	73	Ireland	24,987,995
8	Armenia	41,423,278	74	Isle of Man	39,508,310
9	Aruba	7,851	75	Israel	7,385,961
10	Australia	356,871,520	76	Italy	282,096,860
11	Austria	55,718,845	77	Jamaica	4,525,142
12	Azerbaijan	83,003,845	78	Jordan	10,298,029
13	Bahamas	2,307,597	79	Kazakhstan	112,353,468
14	Bahrain	567,729	80	Kenya	86,528,335
15	Bangladesh	163,023,870	81	Korea, Republic of	215,643,915
16	Barbados	403,503	82	Kuwait	110,164,707
17	Belarus	41,963,974	83	Kyrgyzstan	16,265,259
18	Belgium	107,572,308	84	Lao People's Democratic Republic	54,006,976
19	Belize	134,003	85	Latvia	3,969,423
20	Benin	20,000	86	Lebanon	5,776,963
21	Bermuda	1,124,260	87	Lithuania	12,986,891
22	Bhutan	11,911,942	88	Luxembourg	54,225,119
23	Bolivia, Plurinational State of	1,523,054	89	Macao	1,238,745
24	Bosnia and Herzegovina	35,759,341	90	Macedonia, the former Yugoslav Republic of	15,921,885
25	Botswana	10,624,818	91	Madagascar	150,542
26	Brazil	480,409,030	92	Malawi	973,630
27	Brunei Darussalam	24,123,196	93	Malaysia	523,254,560
28	Bulgaria	4,028,399	94	Maldives	2,897,521
29	Cambodia	34,628,423	95	Mali	5,344,108
30	Cameroon	316,933	96	Malta	2,652,655
31	Canada	236,264,679	97	Marshall Islands	2,759,538
32	Cayman Islands	2,517,498	98	Mauritania	1,057,156
33	Channel Islands	1,850,660	99	Mauritius	5,264,726
34	Channel Islands	3,262,175	100	Mexico	156,302,760
35	Chile	5,541,706	101	Monaco	10,787,457
36	China	924,650,695	102	Mongolia	299,521,171
37	Colombia	42,647,397	103	Montenegro	330,182
38	Congo, the Democratic Republic of the	178,898	104	Morocco	3,927,811
39	Costa Rica	1,961,208	105	Mozambique	97,696
40	Croatia	11,479,120	106	Myanmar	14,729,624
41	Cyprus	6,764,702	107	Nepal	1,316,370
42	Czech Republic	60,843,932	108	Netherlands	99,580,351
43	Denmark	44,792,012	109	New Caledonia	15,101,900
44	Dominican Republic	3,747,697	110	New Zealand	38,454,929
45	Ecuador	26,863,840	111	Nicaragua	5,998,811
46	Egypt	5,138,344	112	Niger	2,091,906
47	El Salvador	4,944,606	113	Nigeria	8,807,299
48	Estonia	272,929	114	Northern Mariana Islands	2,000
49	Ethiopia	215,317	115	Norway	53,533,996
50	Falkland Islands (Malvinas)	334,373	116	Oman	1,076,700,641
51	Faroe Islands	8,170	117	Pakistan	30,670,338
52	Fiji	1,007,298	118	Palau	2,428,894
53	Finland	5,326,581	119	Panama	38,481,959
54	France	619,979,560	120	Papua New Guinea	325,210,893
55	French Polynesia	193,593	121	Paraguay	12,684,483
56	Gabon	698,719	122	Peru	32,598,830
57	Georgia	4,125,159	123	Philippines	299,108,534
58	Germany	265,506,351	124	Poland	47,543,141
59	Ghana	11,880,064	125	Portugal	5,095,192
60	Gibraltar	2,466,115	126	Puerto Rico	2,000
61	Greece	42,002,989	127	Qatar	58,998,142
62	Guam	44,806,525	128	Republic of Kosovo	15,212
63	Guatemala	15,889,088	129	Réunion	23,577
64	Guinea	8,071	130	Romania	2,352,975
65	Guyana	410,338	131	Russian Federation	182,198,423
66	Honduras	2,686,323	132	Saint Kitts and Nevis	184,759
			133	Saint Lucia	1,917,057
			134	Saint Vincent and the Grenadines	240,658

	Name of Country/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	318,501,676
142	Slovakia	13,364,505
143	Slovenia	22,597,570
144	Solomon Islands	2,148,868
145	South Africa	46,417,280
146	Spain	102,183,025
147	Sri Lanka	84,886,111
148	Sudan	9,202,923
149	Sweden	45,966,793
150	Switzerland	587,469,684
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	2,061,535,423
156	Timor-Leste	7,577,700
157	Togo	15,422,985
158	Tonga	2,000
159	Trinidad and Tobago	7,904,179
160	Tunisia	3,595,656
161	Turkey	34,257,211
162	Tuvalu	1,525,570
163	Uganda	8,091
164	Ukraine	7,350,603
165	United Arab Emirates	148,360,924
166	United Kingdom	798,021,975
167	United States	3,243,801,798
168	Uruguay	7,096,478
169	Uzbekistan	165,533
170	Vanuatu	240,822
171	Venezuela, Bolivarian Republic of	5,804,489
172	Viet Nam	790,001,580
173	Virgin Islands, British	13,873,255
174	Zambia	129,629
175	Zimbabwe	401,808
176	Others	369,547,317
		22,382,638,319

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.