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Confronting “Dual Disasters”: Disaster Displacement in Japan during COVID-19

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Abstract

Japan has been an active proponent in promoting human security, as observed in its foreign policy agenda. In particular, human security has been embedded in its development cooperation charter and its activities and engagements. However, pivotal events like the 2011 Great East Japan Earthquake (GEJE) and the COVID-19 pandemic have encouraged the rethinking of human security as a relevant domestic concern for Japan.

Before the COVID-19 pandemic, there were attempts to understand the value of human security among various Japanese stakeholders and gauge Japan's human security and the existing insecurities at the prefectural level. The advent of the pandemic re-emphasized these insecurities, highlighting the existence of diverse, vulnerable groups/communities and those who have long been marginalized, even in a developed country like Japan.

This working report examines how the COVID-19 pandemic has exposed the human insecurities of vulnerable groups/communities in Japan. By providing a descriptive review of Japan's COVID-19 situation, it identifies the protection mechanisms initiated, along with the people who remain vulnerable, and the empowerment initiatives put in place. It pays special attention to those groups who confront the dual disasters of disaster displacement and pandemic. This preliminary report reveals how the pandemic has exposed the intersectionality of people's vulnerabilities during compounded crises. The often-neglected concerns of vulnerable groups have been

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reactivated, raising community awareness of the challenges and the shortcomings of protection strategies during the pandemic. The presentation of the COVID-19 situation in Japan has confirmed the universality of human insecurities and the importance of a human security approach in the local context.

Keywords: human security (Japan), protection and empowerment, COVID-19, disaster displacement, dual disasters.

1. Japan and Human Security

It has been twenty-seven years since introducing the term "human security" to the United Nations' lexicon through the 1994 Human Development Report. Over the years, the phrase has served as a valid justification for different stakeholders' diverse scholarly pursuits, diplomatic agendas, and operational principles. Throughout the development of the concept, Japan has cemented its role as an active proponent in its dissemination. Japan's conceptualization of human security runs congruent to the United Nations' commonly accepted understanding of the term, emphasizing people's freedom from fear and freedom from want, with an equal opportunity to enjoy all their rights and fully develop their human potential (UNGA 2012). Japan's human security narrative reflects its attempt to realize a 'global' projection of norms and values, with human security as a significant policy concept in the nation's search for a more proactive international role (Kurusu 2013).

In a derivative of this global norm diffusion, Japan has integrated human security into its mandate for development assistance through its ODA Charter of 2003 (JICA 2010). This is a significant development agenda designed to protect those who are vulnerable from critical and pervasive threats; and has been used as an effective tool to understand and approach global challenges, supporting developing countries in facing and overcoming their insecurities. While this discussion of Japan's role in the development of human security merits a separate writing piece, this brief paper intends to establish that Japan has played an active role in the diffusion and practice of human security.

Human security has been a valuable pair of spectacles to recognize and understand the threats to people's survival, life, and dignity and, after that, devise effective ways to respond to these threats. However, the Japanese human security lens somehow suffers from *hyperopia* – wherein the concept is clearly identified from afar and yet unclear when observed more closely. Thinking of

human security as synonymous with development agendas encourages the exclusivity of human security, vulnerability, resilience, and empowerment discourses as relevant only to people in less developed countries (Bacon and Hobson 2014). Equating human security solely to development contradicts the universality of human security and excludes donors/developed countries from all the vulnerabilities. Given this, is the human security approach relevant to the Japanese context?

Japan has been facing many social risks in recent years, often overlooked and perhaps scarcely explored directly using the lens of human security. Before the pandemic, there were already attempts to seek the value of human security from among various Japanese stakeholders; and these revealed that human security risks such as aging, disasters, the plight of the homeless, and the wealth gap exist in the country (Kurusu 2016). Nonetheless, while human security continues as a vital instrument in Japan's foreign policy agenda (Tanke 2021; Kamidohzono, Gómez, and Mine 2016), recent critical events have reactivated the rethinking of human security as a relevant domestic theme. When a large-scale and compounded crisis like the 2011 Great East Japan Earthquake (GEJE) occurs, it re-emphasizes that the human security approach should be applied in the local context (Mine and Gómez 2013; Bacon and Hobson 2014).

There have also been efforts to gauge Japan's human security and identify the existing insecurities from the prefectural level. The recent publication "SDG and Japan: Human Security Indicators for Leaving No One Behind" adapted a human security approach to measuring the implementation of sustainable development goals, identifying three overarching human security challenges (poverty, inequality, and discrimination) that overlap and cascade, affecting diverse communities and groups of people (Takasu and JICA 2020). This confirms that human security challenges exist in Japan, substantiating the universality of the concept vis-à-vis Japan's vulnerability to different threats. Parallel to the 2011 GEJE, the COVID-19 pandemic becomes another challenging event that underscores the need for introspection concerning Japan's human security issues.

By the end of January 2020, COVID-19 was declared a "public health emergency of international concern" (PHEIC). Akiko Fukushima discussed that the COVID-19 pandemic is not only a health crisis but a human security crisis — depriving us of our freedom from fear, freedom from want, and freedom to live with dignity; hence, the crisis demands a human security approach of comprehensive, across-the-board human protection and empowerment (Fukushima 2020). The indiscriminate spread of the virus has revealed how certain groups are being disproportionately affected, including those already marginalized by structural barriers and inequalities even before the pandemic (UNDRR 2020b). This working report tries to address the question, "*How did the COVID-19 pandemic expose the human insecurities of vulnerable groups/communities in Japan?*" By providing a descriptive review of Japan's overall COVID-19 situation, it identifies the protection mechanisms initiated, along with the people who remain vulnerable, and the empowerment initiatives so far put in place. This report pays special attention to displaced people who confront the *dual disasters* of disaster displacement and a pandemic. This report aims to present the universality of human security and its applicability to the Japanese context.

2. Japan During the COVID-19 Pandemic

2.1. Japan's COVID-19 Timeline

While the virus outbreak in China had already been reported in late 2019, it was not until January 14, 2020, that the first confirmed positive case of COVID-19 in Japan was reported (WHO 2020b). Local awareness about COVID-19 grew as the Diamond Princess cruise ship confirmed positive cases of the novel coronavirus infections on board, docked at Yokohama Port on February 3 (Muto et al. 2020). By February, the cumulative positive cases had reached 100, and the first death from COVID-19 was reported on the 13th. In March, the WHO declared COVID-19 as a pandemic (WHO 2020a), and countries began imposing lockdowns and other measures to limit the transmission of the virus. That same month, Japan announced the closure of schools and placed

entry restrictions for travelers from China and Korea.

The detection of the surge in early signs of infections, along with the growing strain on the health care system and the logistical strains from the cluster-based impact of the virus, drove the declaration of a state of emergency in Japan (Omi and Oshitani 2020). On April 7, 2020, the Government of Japan officially declared a state of emergency in Tokyo, Saitama, Chiba, Kanagawa in Eastern Japan, and Osaka, Hyogo, and Fukuoka in the Western region. By April 16, that status was expanded nationwide. In essence, the declaration empowered prefectures to take restrictive actions (however, not legally binding) to ensure the functioning of the medical care system and seek cooperation to avoid contacts to reduce the spread of the infection (Sugiyama 2020). By May 14, the state of emergency was lifted in 39 prefectures and for the rest by May 25. Along with the constant advisories for preventive measures against COVID-19, and expert meetings on how to control the disease, the government enacted policies including travel restrictions, distribution of financial assistance stimulus packages for residents and affected businesses, postponement or canceling of major events, including the 2020 Tokyo Olympics, and school closures nationwide. Telecommuting was strongly encouraged whenever possible, and limiting non-essential activities were strongly advised.

Following the lifting of the state of emergency in late May, the daily number of cases stayed below 100 between May 16 to June 25 (WHO 2021). Preventive measures were continuously encouraged without any strict legal consequences if violated. However, during the 2020 summer, the big cities had to deal with increasing virus transmission cases in nightlife districts and care facilities, and transmission issues faced by less-populated prefectures (Abe and Noguchi 2020). Also, the Japanese government's subsidy program "Go-To Travel" campaign led to a surge in travel-associated cases (Anzai and Nishiura 2021). There was a resurgence of weekly recorded cases in mid-October (cumulating in 3,744 cases on October 12, 2020), leading to another peak

of 39,821 in a single week during the New Year holiday. Despite repeated reminders about preventive measures, the number of cases continues to rise and takes its toll on the medical system (Mun-Keat 2021). Amidst these incessant domestic challenges and the discovered presence of new COVID-19 variants globally and in Japan, a month-long second state of emergency was enforced on January 7, 2021, for Tokyo and its surrounding prefectures, and extended to 8 additional prefectures on January 14. This declaration has been extended twice since then as the number of cases has fluctuated.

A year and a half since its first reported COVID-19 case, Japan has imposed three states of emergency to dampen its fluctuating surges in infection.¹ Figure 1 visualizes the changes in the COVID-19 cases within this period. COVID-19 vaccination has slowly begun after an exhaustive review for efficacy in the country. The chronology of events leading to Japan's current circumstances reflects the government's continuous efforts to navigate and manage its response to the pandemic. The critical response comprises protective measures to secure people are protected from infectious disease and its socio-economic repercussions.

In **Japan**, from **3 January 2020** to **2:08pm CEST, 11 April 2021**, there have been **503,403 confirmed cases** of COVID-19 with **9,382 deaths**, reported to WHO. As of **27 March 2021**, a total of **822,869 vaccine doses** have been administered.

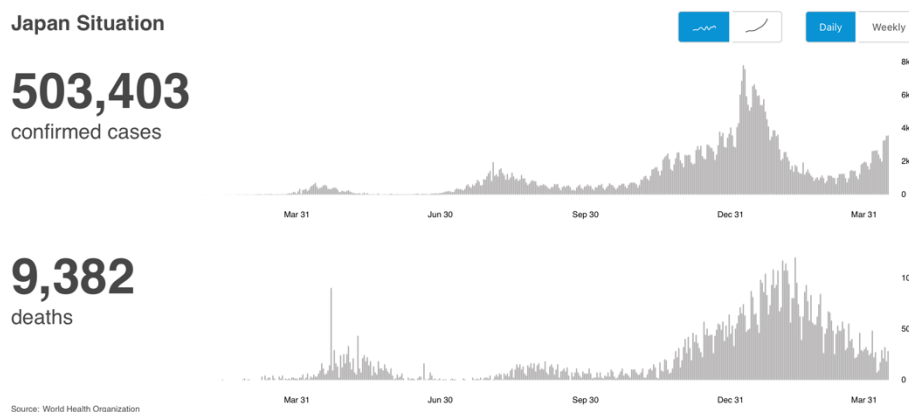


Figure 1. COVID-19 cases in Japan between January 3,2020-April 11, 2021
 Source: WHO Health Emergency Dashboard (Accessed: April 12, 2021)

¹ In the middle of July 2021, Tokyo and other nearby prefectures enter the Fourth State of Emergency intended to last until August 22. This covers the period of the Tokyo Olympics intended to curb the movement of people during the global sports event. (*The Japan Times*, 2021b)

2.2. Protection Mechanisms During the Pandemic

Back in 2020, the goal of every state was the urgent containment of the virus and mitigation of further transmission to avoid its potential to be a full pandemic. Among the early crisis management efforts by the Japanese government was to decline immediate disembarkation for passengers from the Diamond Princess cruise ship in Yokohama Port. Instead, it adopted the Anchorage Quarantine Approach, sending quarantine officers to the ship (Jimi and Hashimoto 2020). While the cases in the cruise ship are not counted in Japan's confirmed COVID-19 cases, the infection from it influenced people's awareness of the crisis and their adherence to preventive actions.²

The protection element of human security in global health entails promoting three institutional pillars of society: to prevent, monitor, and anticipate health threats (Commission on Human Security 2003), ensuring that risk is reduced and that vulnerable persons are safeguarded from disease, and its unavoidable impact. The need to protect citizens from new infections and support health care institutions from using up their capacities to deal with COVID-19 has become extremely important, as observed by many governments implementing lockdowns and interruptions to community social and economic activities during times of rapid infection increases (Hatabu et al. 2020). Protection strategies in response to the coronavirus in Japan are based on the modified 2012 Act on *Special Measures for Pandemic Influenza and New Infectious Diseases Preparedness and Response*, which introduced the "Basic Policies for Novel Coronavirus Disease Control" (Government of Japan 2013). This policy allowed the Prime Minister to declare a state of emergency, primarily to avoid putting further strain on limited intensive and critical care units that could collapse the health care system.

² See: "Japanese citizens' behavioral changes and preparedness against COVID-19: An online survey during the early phase of the pandemic". (Muto et al. 2020)

The April 2020 Expert Meeting on Control of the Novel Coronavirus Disease's Control Report included the need for behavior modification, urging the public to avoid the Three C's (closed spaces, crowded places, and close-contact settings), in addition to the government's effort to provide economic support, establish a medical service system, and secure human resources (MHLW 2020). For example, the Ministry of Defense and the Self-Defense Forces have engaged in quarantine assistance and testing, life support, and transportation assistance (Ministry of Defense, Japan 2020). These protection initiatives are geared at directly mitigating the spread of the virus locally.

With Japan's global responsibility to spearhead the 2020 Olympics against the backdrop of the COVID-19 pandemic, the effectiveness country's COVID-19 protection strategies were tested. Then-Prime Minister Abe Shinzo and the International Olympics Committee reached an agreement on March 24, 2020, to postpone the event to the following year. A year into the pandemic, the certainty of commencing the Olympics during the Summer of 2021 remained vague until it was decided to go ahead in July-August 2021.

The declaration of a state of emergency in April 2020 controlled the increase of infection, as evident in the decline in COVID-19 cases in the subsequent months. Despite Japan's moderately better COVID-19 response than other G7 countries, it still suffered economic downturns from the pandemic. On May 27, 2020, the government announced an additional economic stimulus package of up to 117 trillion yen. Key measures include establishing rent-fee support benefits for small and medium-sized enterprises (SMEs) and subordinated loans for large companies (KPMG International 2020). By July 2020, the government had initiated the "Go-To Travel" and "Go-to Eat" campaigns to support industrial and social sectors affected by the pandemic directly. However, the corresponding surge in travel-related cases made the campaign a premature effort, resulting in its indefinite suspension. The second state of emergency was announced based on the

repeated indicators of an increasing number of cluster cases and continued strain to the health system.

Despite the pandemic's differences from other disasters, it conforms to the key baseline of a disaster as it arises from a combination of hazard and vulnerability. It occurs at multiple levels simultaneously, with responses to a hazard exposing as many vulnerability problems as the original hazard (Kelman 2020). The catastrophic impacts of this coronavirus constrained the capacities of different protection actors to address various security issues. COVID-19's indiscriminate impact upon states and accompanying social infrastructures affects everyone. However, people have multiple vulnerabilities to the crisis that demand comprehensive responses.

2.3. Vulnerable and Marginalized Groups/Communities

Vulnerability is not something people are born with or uniformly attached to certain social groups; it depends on and may vary due to the interrelations between individual and contextual factors (Hansson et al. 2020). This pandemic's disparate impact on everyone underscores the need for a contextualized response to people's differentiated identities, needs, priorities, and capacities. Despite efforts to protect people from infectious disease and its accompanying risks, people still fall through the cracks of these protection mechanisms.

People with compromised health conditions are those directly affected by the pandemic. COVID-19 belongs to the larger family of respiratory tract diseases ranging from the common cold to the Severe Acute Respiratory Syndrome (SARS). Although its symptoms are mild to moderate for most, it can be fatal for people with pre-existing health conditions (Bryce et al. 2020, 881). People with cancer, chronic kidney disease, chronic obstructive pulmonary disease (COPD), heart conditions, and diabetes are found commonly among older Japanese adults – i.e., 75 years old and above, are identified at increased risk of contracting COVID-19 (Center for Disease Control and

Prevention 2021; Mitsutake et al. 2019). This situational vulnerability is not unique to Japan and is further heightened when combined with another factor such as age.

WHO warned that older people are at a greater risk of developing severe illness from contracting COVID-19 because of the physiological changes associated with aging and underlying health conditions (WHO Regional Office for Europe 2020). Compared to other age groups in Japan, the large proportion of older people has been a demographic predicament on many fronts, resulting from the combination of high life expectancy and low fertility. The consequences of the aging population extend to the soft infrastructure in the Japanese society, and is particularly evident in its related socio-economic impacts such as poverty, labor and employment, education, and rural depopulation.³ Even with most confirmed cases found among those in their 20s to 40s, the pandemic's impact on older people is evident, as the morbidity rate is higher for those aged 70 and above (MHLW 2021).

One of the global activities affected by the current pandemic is migration. Not only has the virus curtailed people's mobility, but it has affected people's immigration status. The pandemic aggravated migrants' vulnerabilities from existing migration policies that limit their rights. It also brought to light migrant labor conditions, along with the challenges of limited or no access to healthcare, daily necessities, and information to protect their health (Human Rights Working Group 2020, 2). From Japan's 2,933,137 registered foreign nationals in 2019, 1.66 million are foreign workers in various industries, including manufacturing, service industry, and so on (Statistics Bureau 2021; Nippon.com 2020; MHLW 2020). Beyond the socio-economic implications, the country's increasing number of infected foreign nationals made them more susceptible to discrimination and prejudice against infected persons and care workers (Osaki 2020; Oshitani 2021). While the virus does not recognize geographic barriers or nationality, it has

³ See: "Japan's Aging Society" (European Parliament 2020).

been a tool to make the presence of "others" an instrument of insecurity for some.

The "shadow pandemic" of violence against women and children during COVID-19 also exists in Japan, re-emphasizing the seriousness of this crisis. Before the pandemic, Japanese attitudes about domestic violence were mixed, in part due to women's weak social position and the lack of space for open discussion on this topic between partners; thus, the true rates of domestic violence are still unknown, with many victims continuing to suffer in silence (Ando 2020). A Cabinet Office survey reported a 13,000 increase in domestic violence consultations between April to November 2020.⁴ These cases increased as an unfortunate consequence of limited engagements outside homes and the accompanying economic fallout from the pandemic.

The groups/communities mentioned above face the prolonged direct and indirect ramifications of COVID-19, of which their vulnerabilities may overlap. These challenges are not unique to Japan, confirming the universality of human security issues that people face. Even though protection measures have been institutionalized to address general health insecurities, some other fears and needs have surfaced, and these must equally be addressed.

2.4. Efforts to Empower

Empowerment serves as the complementary pillar to protection in human security's operational framework. Although mitigation efforts are ostensibly directed to protect society as a whole, they often end up marginalizing or even excluding certain groups from the support they needed to survive (Slater 2020). The continued increase of COVID-19 cases demonstrates that institutionalized protection mechanisms might not cover and respond to all the needs. The strain on conventional protection actors raises the importance of non-state actors as enablers to people's empowerment and resilience during the pandemic. Civil society organizations have taken

⁴ See: "Japan Sees Record Increase in Domestic Violence Consultations in 2020" (Nippon.com 2021).

initiatives in augmenting the absence or limited support through meal assistance for children and the elderly, livelihood opportunities for persons with disabilities, and support for single-parent families (Japan Platform 2021). For asylum applicants with work permits who have lost their jobs, the Japan Association for Refugees (JAR) continues to provide assistance and support, even with the present constraints during the pandemic (Tamura 2020). As for homeless people who have long been experiencing social exclusion, they are supported by NPO groups and other homeless advocates to rally support for greater government efforts (Slater and Ikebe 2020). These efforts do not strip the government of its protective role; instead, the interventions of these non-state actors supplement the protection mechanisms against the pandemic. Currently, non-state actors support vulnerable groups and communities, responding to real-time changes to these people's lives and livelihoods brought by the pandemic. As everyone is in a state of vulnerability due to the uncertainty of the time, even the empowerment efforts continue to evolve to meet the needs and address multiple insecurities.

3. Dual Disasters: Displacement and the Pandemic

The urgent need to curb the spread of the virus has been primarily focused on the development, manufacture, and equitable distribution of COVID-19 vaccines. At the same time, countries continue to avoid overwhelming their health care systems and devising durable solutions to minimize socio-economic strains, leading to a sustainable recovery from the pandemic. The drawn-out challenge of COVID-19 will inevitably occur with another disaster that will further expose our intersecting vulnerabilities, intensified human and economic losses, and deepening inequalities, and these dual disasters also extend to frontline responders, local actors, and volunteers (UNDRR 2020a). Hyndman (2014) describes *dual disasters* as a humanitarian crisis approach that examines power relations and vulnerabilities when and where one disaster prefigures another. Recognizing this dual occurrence of disasters re-emphasizes how crises are indivisible, congruent to the notion that vulnerabilities compound and intersect. Disaster

displacement has been one of the challenging consequences of large-scale catastrophes resulting from environmental hazards, and when overlapped by a pandemic, what other insecurities surface?

Disaster displacement from this intersection of disasters and the pandemic exposes two scenarios of insecurities—the first one points to people's heightened vulnerabilities from protracted displacement. The December 2020 Reconstruction Agency report on the 2011 GEJE detailed that 42,000 evacuees are remaining and about 2,000 persons are still in temporary housing. These low numbers do not necessarily translate to people settled in a more permanent location. The high mortality rate of older people living in temporary housing over the years is partially attributed [indirect deaths] to the physical and mental stress of being forced to move and stay for long periods in collective shelters or temporary accommodation, the lack of initial care from cut hospital services, and suicides (Yonetani 2016). The inability to meet set timeframes for recovery from the GEJE caused a sense of hopelessness and uncertainty for many. And the protracted displacement during a pandemic reactivates the need to look at several human security challenges for displaced persons. GEJE-related displacement highlights human insecurities, particularly for older people who remain in temporary housing, coupled with their greater risk of contracting the virus. Combined with their displacement, the pandemic has aggravated these insecurities. Hence, the need to rethink and recalibrate the enforced protection measures for people's recovery from the GEJE will face new insecurities from the pandemic.

A second scenario involves people who were displaced at the height of this pandemic. Viruses do not respect the timelines of other disasters, nor borders, or politics (Mizutori 2020). The occurrence of natural hazards during a pandemic can dampen existing protocols for suppressing the pandemic and vice versa. The large-scale flooding in mid-July 2020 in Southern Japan was faced with this dilemma. The heavy rain on July 4 resulted in devastating floods and landslides in

many areas and prefectures, including Kumamoto and Kagoshima. The best course of action was to evacuate to a much safe place; however, the pandemic was a cause of confusion in terms of that evacuation. Hence, some opted not to evacuate out of fear of staying in crowded spaces, and some proceeded to the evacuation areas but were turned down because of limited spaces.⁵ The pandemic compelled new guidelines to operationalize shelter management, including distributing food, clothes, and everyday items, with a heavy focus on cleanliness and hygiene to avoid an outbreak of COVID-19 in these shelters. More so, the pandemic limited the presence of volunteers and health professionals to support displaced people, providing the chance to rethink the nature of volunteering and how it can result in better and stronger community resilience (Amano 2020; Das et al. 2021). These changes brought in complex challenges as well as opportunities to review the existing risk reduction strategies.

Six months after the heavy rains, 4,200 people are still in temporary homes, and 2,614 families live in damaged houses (*The Japan Times* 2021a). With the continuing struggle against the pandemic and the adjustments of people living in temporary housing, there is much to learn from the experience of GEJE displaced people. The current circumstances raise the need to consider not only a multi-stakeholder but a multi-hazard scenario as well. In either state of displacement during a pandemic, there is a need to take a human security approach to protect and empower displaced people in the face of dual disasters.

4. Integration

This level of the study revealed how the pandemic exhibits the intersectionality of people's vulnerabilities during compounded crises. The often-neglected concerns for vulnerable groups were reactivated, raising awareness of the challenges and the shortcomings of protection strategies

⁵ The designated evacuation shelters' capacities were reduced to nearly 1/4 to implement social distancing among evacuees (Das et al. 2021)

during this pandemic. COVID-19 is a real existential threat, as proven by its indiscriminate and disproportional impact on everyone. Thus, creating inclusive solutions to the crisis and the cascading consequences to people's lives, livelihood, and dignity are imperative. As the pandemic continuous, it is essential to realize that other threats exist and can cause critical damage, especially when combined. While recovering from the pandemic, leaders must consider the presence of multiple hazards that will continue to threaten our human security.

Currently, Japan remains a steadfast advocate of human security, evident in its foreign policy position in the global response to the pandemic. COVID-19 shows the value of optimizing a human security approach and applying it at home.

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