Disaster Relief and JICA
Striving to Make a Difference

Japan International Cooperation Agency
Emergency Disaster Relief - Providing timely support to disaster victims worldwide

In spite of countless and continuous disaster-preparedness efforts being made everywhere in the world, natural or man-made disasters can still threaten people’s lives anytime and anywhere. Japan is prone to natural calamities, and many countries and regions around the world have conspired and aided Japan in meeting such misfortune. We have expertise in taking responses to disasters and are thus committed to assisting the victims of such disasters wherever they may occur, making the most of our experience. JICA is responsible for administering Japan’s disaster relief operations in response to requests from any affected government/region or international organization following a natural or man-made disaster. JICA’s emergency disaster relief entails the provision of people and supplies.

Japan’s International Disaster Relief

Carried out by JICA under the authorization of the MOFA*

Japan Disaster Relief Team

- Search & Rescue Team
  - Officers from the National Police Agency, the Fire and Disaster Management Agency, the Japan Coast Guard, the Structural assessment expert and the Medical unit
  - Doctors, nurses, pharmacists, co-medicals, etc., registered with JICA

- Medical Team
  - Doctors, nurses, pharmacists, co-medicals and coordinators that have registered voluntarily with JICA constitute the team along with personnel from MOFA and JICA. The team provides direct medical care to casualties and, when appropriate, helps prevent the spread of disease or infection. Medical Team has the longest history among JDR Teams.

- Infectious Diseases Response Team
  - The team was established in October 2015 in response to the epidemic of Ebola hemorrhagic fever that spread across West Africa in 2014. The team has five functions necessary to offer a wide variety of assistance: the four specialist functions of “epidemiology,” “laboratory diagnosis,” “medical treatment and infection control,” and “public health response” as well as the function of “logistics” to achieve self-sufficiency in their activities.

- Expert Team
  - Expert Team has a dual role—helping to predict and prevent disasters before they may occur, and advising the authorities concerned on emergency response and early recovery in case of a disaster. Technicians and researchers recommended by the Japanese government, local municipalities, and/or private companies with required expertise provide assistance including predicting possible volcanic eruptions, assessing possible damage, or otherwise revealing the vulnerability of buildings to earthquakes.

- Japan Self Defense Force (JSDF) Unit
  - JSDF unit is typically dispatched only in large-scale emergencies where they provide heavy-duty logistical assistance with aircraft and/or ships, and assist in the prevention of epidemics.

Provision of Relief Goods

Apart from the deployment of JDR Teams, JICA also provides emergency relief goods to these areas as required. To facilitate the rapid and reliable provision of a large volume of emergency relief items, reserve supplies must be procured and properly stockpiled in advance at locations as close as possible to disaster-prone areas. SEVEN priority goods are stockpiled—tents, sleeping pads, plastic sheets, water purifying agent, medical and personal care items, tents, and water purifiers. JICA stores these emergency goods at warehouses overseas.

Dispatch of the Japan Disaster Relief Team

The Japan International Cooperation Agency (JICA) offers a variety of Japan Disaster Relief (JDR) Teams, dispatching either alone or in combination to meet the needs of disaster-affected areas. When a large-scale disaster occurs overseas and the government of the affected country or an international organization requests Japan’s Ministry of Foreign Affairs (MOFA) to provide assistance, and MOFA deems it appropriate to dispatch a JDR Team, it will consult with the other ministries and agencies concerned for obtaining cooperation in dispatching a JDR Team under the Law Concerning Dispatch of the Japan Disaster Relief Team (enacted on September 16, 1987; last amended on December 22, 2006). JICA conducts such dispatch and other necessary tasks following the decision of Minister for Foreign Affairs.

Since the very first dispatch of the Japan Medical Team in 1979 by the Japanese government to assist Thailand in handling the influx of Cambodian refugees, Japan’s Disaster Relief operations have evolved, thanks to domestic stakeholders who share JICA’s passion for assisting disaster victims.

- Rescue Team
  - Trained personnel search for, locate, rescue, and then provide emergency treatment for disaster victims including their transport to safety. The team consists of MOFA and JICA personnel, police officers, firefighters, coast guard rescue workers, medical staffs, and structural engineers capable of leaving Japan immediately. The team also includes rescue dogs.

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Material Aid

Carried out by JICA

<table>
<thead>
<tr>
<th>Disaster Type</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Earthquakes</td>
<td>22%</td>
</tr>
<tr>
<td>Tsunamis</td>
<td>13%</td>
</tr>
<tr>
<td>Volcanic Eruptions</td>
<td>13%</td>
</tr>
<tr>
<td>Accidents</td>
<td>13%</td>
</tr>
<tr>
<td>Droughts</td>
<td>10%</td>
</tr>
<tr>
<td>Floods</td>
<td>5%</td>
</tr>
<tr>
<td>Other</td>
<td>4%</td>
</tr>
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</table>

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Deployment Statics

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Deployment Statics

Many countries offered their help to Japan during the Great East Japan Earthquake of 2011. “Care for each other”–the most important quality in disaster relief–is universal.

JDR Teams have been deployed to disaster-stricken areas worldwide. Those sites were usually chaotic and faced many hardships, yet each Team undertook its relief activity vigorously in order to help the affected population, who also helped us by showing their gratitude and support.
An earthquake in Armenia exposes major flaws in international relief efforts. Based on the lessons from the earthquake, during this year, Cooperation Special Operation Office was reformed as the Disaster Relief Division, Medical Cooperation Department cooperation by earlier teams with post-disaster recovery assistance afforded by Japan. Specialists and Japan Self Defense Force Unit were dispatched to Indonesia, the Maldives, Sri Lanka, and Thailand. The least 240,000 people were killed and millions made homeless. A total of 14 JDR Teams including rescue and medical teams and a Self Defense Force unit are sent to the region, with the medical staff replacing personnel from the Japanese NGO Humanitarian Medical Assistance (HuMA).

Operation in a fragile state and international coordination
A large-scale earthquake occurred directly under the capital of Haiti, causing unprecedented casualties. JDR Medical Team first carried out its mission in what is called a fragile state. Numerous countries and NGOs also surged in, causing JDR to reaffirm the necessity for international coordination, as well as enhanced JDR Medical Team functions, improved mobility, and ensuring safety when operating in a PKO deployment area. JDR Rescue Team was qualified as a “heavy” team following the INSARAG External Classification (IEC) in March. This means that the International Search and Rescue Advisory Group (INSARAG) recognized JDR as having the operational capability for complex technical search and rescue operations in collapsed or failed structures. “Heavy” is the highest level of classification under the IEC system in 2015, the Rescue Team was again examined for the “heavy team” qualification and recognized as such again.

In response to the epidemic of Ebola hemorrhagic fever that spread across West Africa in 2014, Infectious Diseases Response Team were set up to provide even more effective assistance in the event of infectious disease outbreak. In July the following year (2016), the first Infectious Diseases Response Team was dispatched for yellow fever outbreak in the Democratic Republic of the Congo.

Establishment of Infectious Diseases Response Team

<table>
<thead>
<tr>
<th>Year</th>
<th>Event</th>
<th>JDR Medical Team</th>
<th>Total of Provision of goods</th>
</tr>
</thead>
<tbody>
<tr>
<td>2001</td>
<td>Earthquake in New Zealand</td>
<td>15</td>
<td>13</td>
</tr>
<tr>
<td>2002</td>
<td>Earthquake in Indonesia</td>
<td>14</td>
<td>13</td>
</tr>
<tr>
<td>2003</td>
<td>Earthquake in the Philippines</td>
<td>12</td>
<td>11</td>
</tr>
<tr>
<td>2004</td>
<td>Earthquake in the Philippines</td>
<td>11</td>
<td>10</td>
</tr>
<tr>
<td>2005</td>
<td>Earthquake in Indonesia</td>
<td>10</td>
<td>9</td>
</tr>
<tr>
<td>2006</td>
<td>Earthquake in the Philippines</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>2007</td>
<td>Earthquake in the Philippines</td>
<td>8</td>
<td>7</td>
</tr>
<tr>
<td>2008</td>
<td>Earthquake in the Philippines</td>
<td>7</td>
<td>6</td>
</tr>
<tr>
<td>2009</td>
<td>Earthquake in the Philippines</td>
<td>6</td>
<td>5</td>
</tr>
<tr>
<td>2010</td>
<td>Earthquake in the Philippines</td>
<td>5</td>
<td>4</td>
</tr>
<tr>
<td>2011</td>
<td>Earthquake in the Philippines</td>
<td>4</td>
<td>3</td>
</tr>
<tr>
<td>2012</td>
<td>Earthquake in the Philippines</td>
<td>3</td>
<td>2</td>
</tr>
<tr>
<td>2013</td>
<td>Earthquake in the Philippines</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>2014</td>
<td>Earthquake in the Philippines</td>
<td>1</td>
<td>0</td>
</tr>
</tbody>
</table>

A Brief History of Japan’s Disaster Relief

1979
The First Japan Medical Team (JMT) is formed
An influx of Cambodian refugees fled to Thailand during their country’s civil war. Based on its report, public and private hospitals, the Japanese Red Cross, JICA and other organizations form the first Japan Medical Team (JMT). Over the next several years, a total of 13 teams comprising 407 personnel worked with Cambodian refugees. The Medical Cooperation Special Operation Office was established within the Medical Cooperation Department of JICA in 1985, and became a focal point for dispatching JMTs.

1982
The Japan Medical Team for Disaster Relief (JMTDR) is founded
Numerous medical personnel register as volunteers with JICA. Responding to such widespread support, the government developed a system to provide speeader disaster relief in overseas crises, including the dispatch of volunteers, which became known as The Japan Medical Team for Disaster Relief (JMTDR), the predecessor of today’s Japan Disaster Relief (JDR) system.

1984
The first mission
The first JMTDR teams are dispatched to Ethiopia to assist some of the millions of desperate peasants facing starvation in one of the worst droughts of the century.

1987
The Japan Disaster Relief (JDR) Law is enacted
On September 16, the JDR law was enacted, creating Japan’s first comprehensive and officially recognized disaster relief system. These JDR teams, which replaced JMTDR, consist of rescue and medical specialists and other personnel able to respond to various types of overseas crises.

1988-9 Disaster relief goes global
An earthquake in Armenia exposes major flaws in international relief efforts. Based on the lessons from the earthquake, the UN Department of Humanitarian Affairs (OCHA), the predecessor of the UN Office for the Coordination of Humanitarian Affairs (UNOCHA), became a focal point to better coordinate global assistance in future crises. JICA’s Medical Cooperation Special Operation Office was reformed as the Disaster Relief Division, Medical Cooperation Department during this year.

1991
Establishment of JDR Secretariat at JICA. End of direct assistance to refugees
In order to conduct emergency relief operations more effectively and flexibly when dealing with global disasters, JDR established an office within JICA as an independent department. A medical team assists Iraqi refugees from the Gulf War who sought safety in Iran and Turkey, but this proves to be the last time such assistance is offered because of a change in the JDR law the following year.

1992
Introduction of the International Peace Cooperation Law (PKO Law) and the revision of the JDR Law
The revision divides responsibilities. The PKO Cabinet Office is now in charge of conflict-oriented catastrophes such as refugee assistance, while JDR retains responsibility for natural or manmade disasters. In addition, units of the Self Defense Force can now be dispatched whenever necessary for major disasters as a JDR team.

2004
Massive disaster affecting a wide area, and seamless assistance
The Great Sumatra Earthquake and Indian Ocean Tsunami was one of the world’s worst natural disasters in which at least 240,000 people were killed and millions made homeless. A total of 14 JDR Teams including rescue and medical specialists and Japan Self Defense Force Unit were dispatched to Indonesia, the Maldives, Sri Lanka, and Thailand. The medical activities by JDRF units included the prevention of infectious diseases, thereby linking quick and flexible cooperation by earlier teams with post-disaster recovery assistance afforded by Japan.

2005
The Pakistan earthquake
Following the catastrophic tsunami, a fresh earthquake hits northern Pakistan killing more than 73,000 people. Rescue and medical teams and a Self Defense Force unit are sent to the region, with the medical staff replacing personnel from the Japanese NGO Humanitarian Medical Assistance (HuMA).
Voices and thanks from disaster areas

“I'll always treasure those smiles on the children’s faces when we helped them.”
Michiaki Hata, joined a rescue team as part of the medical unit following the 2004 Asian tsunami in Thailand. Also participated in medical teams responding to the 2005 Pakistan Earthquake and 2010 Haiti Earthquake, and in a rescue team for the 2008 China Earthquake.

“I worked in DR Congo as a member of the Infectious Diseases Response Team.”
Infection control activities, which target living things (pathogenic organisms and people), it is vital to think and act calmly, as it is often the case that there is no telling what will happen next. At the same time, you must also have the analytical skills needed to analyze issues from a broad perspective, rather than just dealing with immediate problems. In this way, providing emergency infection control aid is an extremely difficult and challenging task, but at the same time, it can give you a great sense of fulfillment by feeling the vitality and energy of people while pushing the limits of your own abilities.

Noboru Minakawa, a member of the public health response control group, Infectious Diseases Response Team, JDR, served as Team Leader of the second Infectious Diseases Response Team dispatched to DR Congo in response to the 2016 epidemic of yellow fever.

“I wish to always stand by victims of disasters”
I have been deployed as part of JDR teams about 20 times since 2000. I’ve seen sadness and cries of victims as well as their strong will to recover from the damages. There always have been smiles of children there too. Other JDR team members and cooperation with other country teams encouraged me during missions when feeling powerless to the harsh environment that we were facing. Above all, those kind words and messages of appreciation from the victims have always stirred me up. I believe people can overcome hardest situations that they would face. I always want to stand by those people going through aftermaths of disasters.

Hitoshi Otomo, JDR Secretariat, being deployed as deputy team leader/logistician 27 times, including the earthquake in Nepal in 2015 (Medical Team), typhoon in the Philippines in 2013 (Medical Team), flood in Thailand in 2011 (Expert Team), earthquake in New Zealand in 2011 (Rescue Team), and flood in Pakistan in 2010 (Medical Team).

“Plan to keep giving 100 percent along with my teammates”
After participating in three emergencies I have learned that while the ‘essence’ of nursing care is the same all over the world, because of cultural differences some of Japan’s current medical practices may not be suitable in other parts of the world. So, after we have finished treating disaster victims, it is important to also help them to develop and maintain their own treatment systems. We have begun introductory and intermediate training courses so that the disaster victims themselves will be able to handle future emergencies. Personally, working with JDR has broadened my horizons, given me a valuable experience to grow, and I plan to keep giving 100% along with my teammates.

Eiko Yamada, a JDR registered nurse, was a member of medical teams dispatched to four earthquake disaster zones: off the coast of Padang, West Sumatra Province, Indonesia in 2009; in Pakistan in 2005; in Sri Lanka in 2004; and in Taiwan in 1999. She was also in Palau from 2002 to 2004 with the Japan Overseas Cooperation Volunteers (JOCV) control.

“Wish to always stand by victims of disasters”
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A Japanese rescue team made up of police officers, fire fighters, and coast guard heard the faint voice of a victim from beneath the rubble, and started working to save him. After 52 hours we managed to pull that young man from the rubble alive. The human will to survive really hit me at that moment, and I remembered how important it is to never give up. If to only provide some peace of mind to the terribly grief-stricken disaster victims, I want to continue working through JDR to let those victims know that they’re not alone, and that they have friends all over the world.

Teiji Hasegawa, a member of the 3rd Regional Coast Guard Headquarters, Japan Coast Guard helped search for survivors following a 2003 earthquake which devastated Algeria.

“It’s important to never give up.”

“I’ll always treasure those smiles on the children’s faces when we helped them.”
I was on a JDR rescue team for the first time as a doctor during the Indian Ocean tsunami disaster. I was only able to get about two and a half hours of sleep in the first three days because I just worked so feverishly, but for some reason I didn’t feel a bit tired. During the Pakistan earthquake I was part of a medical team, sitting face to face with one victim after another. I will always treasure the smiles on the children’s faces when we helped them. There are so many youngsters in Japan today who don’t know the true value of life and end up committing suicide. But my experience with JDR has shown me the great value of each and every human life, I hope that others out there who want to make a difference in the world will feel moved to join us at JDR.

I worked in DR Congo as a member of the Infectious Diseases Response Team.”

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