

# Japan: Six Months Later

## Our Immediate Response

### Delivering Medications, Medical Equipment & Critical Supplies

In the weeks and months following the disaster, thousands of people were living for extended periods of time with limited resources – most had fled with just the clothes on their backs. International Medical Corps was able to reach more than 20,000 people at evacuation centers with medications, baby food and communications equipment. In Ogatsu-machi, a small fishing village that was completely isolated after the tsunami, we also provided water tanks, washing machines and a host of everyday items like plates, chopsticks and hangers.

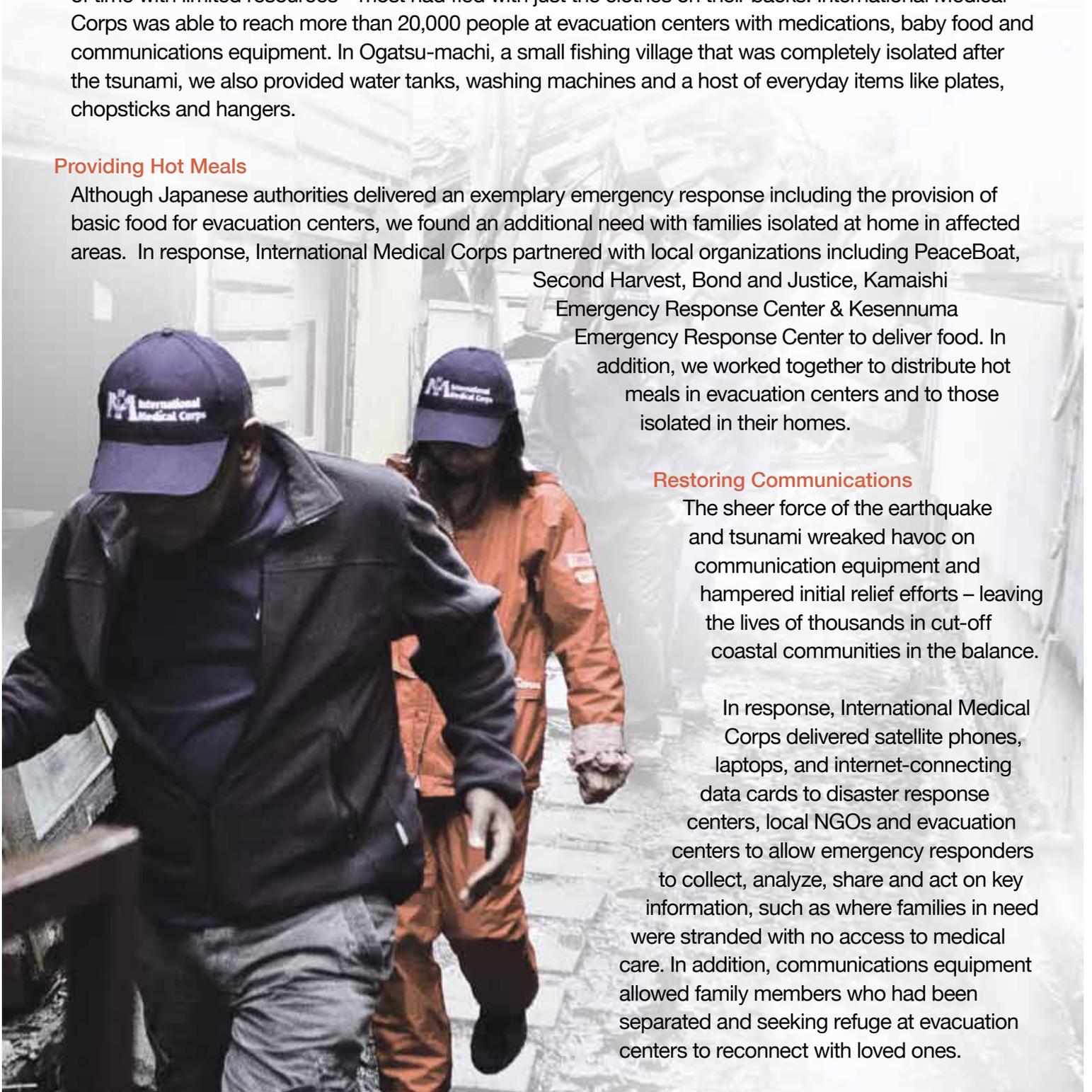
### Providing Hot Meals

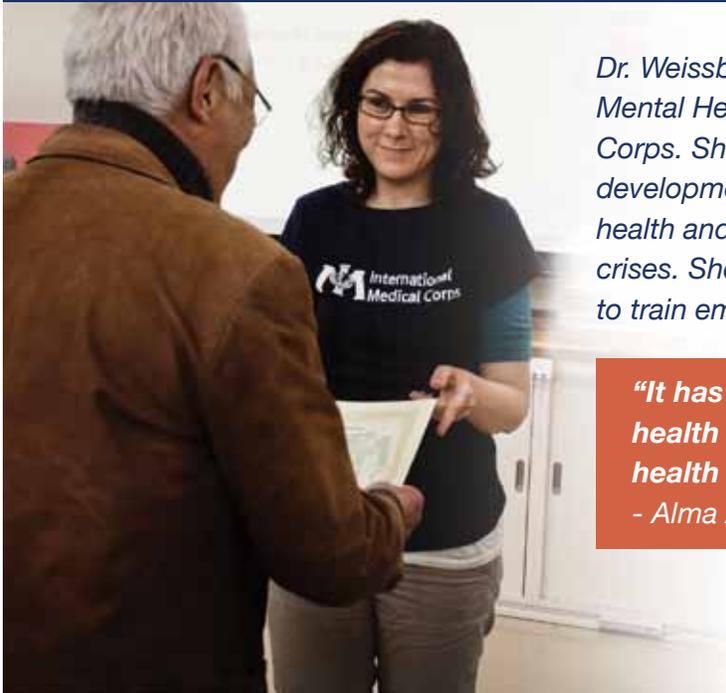
Although Japanese authorities delivered an exemplary emergency response including the provision of basic food for evacuation centers, we found an additional need with families isolated at home in affected areas. In response, International Medical Corps partnered with local organizations including PeaceBoat, Second Harvest, Bond and Justice, Kamaishi Emergency Response Center & Kesenuma Emergency Response Center to deliver food. In addition, we worked together to distribute hot meals in evacuation centers and to those isolated in their homes.

### Restoring Communications

The sheer force of the earthquake and tsunami wreaked havoc on communication equipment and hampered initial relief efforts – leaving the lives of thousands in cut-off coastal communities in the balance.

In response, International Medical Corps delivered satellite phones, laptops, and internet-connecting data cards to disaster response centers, local NGOs and evacuation centers to allow emergency responders to collect, analyze, share and act on key information, such as where families in need were stranded with no access to medical care. In addition, communications equipment allowed family members who had been separated and seeking refuge at evacuation centers to reconnect with loved ones.





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***“It has been recognized that mental health and physical health are closely related and inter-dependent, there is no health without mental health.”***

*- Alma Ata, The World Health Organization*

### **How can psychological stress affect disaster-stricken people?**

Individuals affected by disaster may witness horrific events and lose loved ones, or become separated from family members. Often, they also suffer severe and inter-related stressors such as losing their homes, livelihoods, material belongings, and community or social support systems. Such severe events and chronic stressors can cause significant suffering among the affected population. Disaster leads to an increase in mental health problems while exacerbating existing mental illness.

### **Why is psychosocial support so important for disaster-affected communities?**

Most people affected by disaster experience psychological distress. They may not be considered to have a mental illness but are still in need of psychosocial support. A small percentage of people do develop mental health problems after disaster and should be referred to appropriate services. Significant distress and mental health problems have an impact on various other factors important in the context of disaster response and recovery: daily functioning, recovery and rebuilding efforts, economic security, and physical health.

### **What are the psychosocial needs in Japan following the disaster?**

The people living in affected areas have been subjected to various stressors and ongoing challenges including sudden displacement from family and community, physical injuries and other health problems, the difficulties of living in temporary shelters, loss of livelihoods and uncertainties about the future. In addition, ongoing fears of radiation are only compounding the crisis and increasing anxiety.

### **What is Psychological First Aid?**

International guidelines recommend that volunteers working with people affected by disaster should be trained in Psychological First Aid (PFA). PFA is a non-intrusive way of providing psychosocial support and linking people to basic services. Research has shown that people tend to recover best using their own natural social support networks and that it is important to foster a positive and supportive recovery environment that strengthens existing resources, and actively involves those affected in relief and rebuilding efforts.

PFA is not a clinical or specialized intervention but an approach for how to function better in a disaster situation. It outlines common reactions to disaster, how to help people cope and to do no harm but foster a safe, positive and supportive environment for people who are affected. It also outlines how to refer those in need to more specialized mental health services in order to recover after disaster.



## Promoting Best Practices

International Medical Corps took an active role in promoting standards and best practices such as the IASC Guidelines for Mental Health and Psychosocial Support in Emergency Settings, which were created and endorsed by the World Health Organization and UN agencies. In partnership with Japan's National Institute of Mental Health (NIMH), we organized a workshop about guidelines for local mental health professionals. We also provided funding for NIMH to translate the health version of the guidelines into Japanese and distributed them widely in Japan.

## TELL Partnership

In an effort to strengthen local capacity to support mental health and psychosocial needs following the disaster, International Medical Corps partnered with accredited nonprofit Tokyo English Life Line (TELL), which has provided telephone and face-to-face counseling to the Japanese and international communities for almost 40 years. The TELL Counseling Center serves both adults and children and has licensed therapists, many of whom are bilingual in Japanese and English.

As a result of our partnership with TELL, 85 staff members and 93 additional frontline workers were trained in PFA. International Medical Corps also enhanced the capacity of TELL trainers to continue PFA trainings on their own. In addition, we supported TELL in providing training materials and sessions specific to parents, teachers or other caregivers to enable them to support children's emotional health needs.

International Medical Corps and TELL have evaluated the results of the PFA training and have presented outcomes at the 2011 Annual Meeting of the American Academy of Child Adolescent Psychiatry.



## Healing a Community Tohoku University Conference

In May 2011 in Sendai, International Medical Corps collaborated with Tohoku University and TELL to host a two-day psychosocial conference in Japan, titled "Healing a Community: What We Can Do For Our Children." The program brought together mental health experts, including child health specialists, from across the globe to enhance the knowledge and skills of Japanese academics and professionals with regard to PFA during disasters.

With the conference, we sought to promote international standards, guidelines and lessons learned from our initial emergency response and to lay the foundation for long-term mental health and psychosocial support programs in Japan.

***"I understand now that it is important to not only provide help but to involve people in helping themselves."***

*– International Medical Corps PFA Training Participant*

## Supporting Children through Art



As part of our psychosocial support programs in Japan, we facilitated an art exchange between school children at Ridge Elementary School in New Jersey with Kesenuma Elementary School, which is located in a Japanese town devastated by the tsunami. One month after the disaster, 988 Kesenuma residents were confirmed dead, and another 413 missing.

Through the exchange, children at Ridge sent drawings showing their support for the young students at Kesenuma and expressing their good wishes. In turn, the students at Kesenuma expressed their gratitude by sending their own drawings back to Ridge Elementary School.



## The Road Ahead

International Medical Corps continues to collaborate with local and national government agencies and partner with a variety of Japanese organizations so that our recovery efforts have maximum impact. This includes partnerships with local organizations to provide cash-for-work opportunities for the unemployed and support services for the elderly, as well as identifying needs in Fukushima, an area still devastated by the nuclear crisis.

With jobs and industries lost to the tsunami, the cash-for-work projects will focus on reconstruction activities and livelihood efforts. International Medical Corps also plans to provide the elderly with support programs that deliver lunches and undertake chores and errands. We also plan to help make farmers' markets accessible to people living in remote temporary housing sites. The markets provide readily available foods to the displaced, social outlets for the elderly, and economic opportunities for local farmers.

The Fukushima Daiichi powerplant is still facing enormous challenges for its recovery and reconstruction. The scale of the devastation was beyond anything the Japanese government expected. The national and local governments are still struggling to provide essential public services, such as medical and mental health care, and infrastructure repair. In addition, many residents still live in fear and uncertainty, especially those who lived within 20 kilometers of the damaged plant. They are not yet able to return to their homes. Because of these ongoing needs, International Medical Corps is committed to continuing to work with local organizations and government agencies to support vulnerable populations in Fukushima.

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