Emergency Relief Efforts for the Great East-Japan Earthquake and Tsunami: 3/11/11—4/20/11

Overview

Locations of AMDA’s Relief Efforts

March 11
At 2:46 p.m., a 9.0-magnitude earthquake and tsunami struck northeast Japan. AMDA immediately decided to dispatch its first emergency relief team.

12
The first AMDA medical team entered Sendai, the capital of Miyagi Prefecture. Upon request of the local government, AMDA started delivering medical assistance.

15
While part of the team remained in Sendai, the rest relocated to Kamaishi and Ohtsuchicho in Iwate Prefecture and started relief work.

19
AMDA started ER activities in Minamisanrikucho (Miyagi), where the damage was most severe.

21
Completed ER activities in Sendai and handed off the responsibility to local medical institutions.

31
Completed ER activities in Kamaishi and handed off the responsibility to the local medical association.

April 20
Completed ER activities in Minamisanrikucho (Miyagi) and Ohtsuchicho (Iwate) and handed off the responsibility to local doctors. AMDA’s activities have shifted from ER to rehabilitation. Acupuncture therapy and health assistance in those two towns are still being provided.

Total number of dispatched personnel (as of 30 April 2011): 149 personnel in 31 missions

| Doctors | 51 |
| Nurses | 33 |
| Midwives | 4 |
| Pharmacists | 3 |
| Coordinators | 50 |
| Assistant Nurses | 2 |
| Care Workers | 2 |
| Psychotherapists | 2 |
| Acupuncture therapists | 2 |

Delivering aid supplies: 7 times

Aid supplies were prepared in response to requests from the local teams and were delivered by a chartered truck. Commercial delivery services were also used after they resumed their regular operations. Aid supplies included medical supplies, medical devices (electrocardiogram, ultrasound machines, etc.), food (rice, vegetables, etc.), bicycles, stationery supplies, and electric appliances (washing machines, computers, battery chargers, etc.).
Daily operations at the activity sites

Coping with the needs of the evacuation shelters

Initially, the emergency shelters housed more than 1,000 evacuees at a time, but the numbers started to decline gradually and eventually some were closed. The major health concerns at the initial stage were a lack of clean water, food supplies, gasoline, and medicine. The weather was still freezing cold and it even snowed during the first few weeks after the disaster. All these factors added to the harsh conditions at the shelters and as a result, respiratory diseases such as the common cold started spreading rapidly in the crowded shelters.

Though the situation at the shelters saw some improvement with the partial restoration of communication and lifelines, the prolonged stay at the shelters caused other problems such as an increase in stress-related symptoms and deteriorating sanitary conditions. An outbreak of norovirus was reported in one of the shelters, and AMDA immediately took countermeasures to prevent its further spread.

AMDA treated patients with gastroenteritis, inguinal hernia, tetanus, hydrocephalia, common cold, hay fever, and chronic diseases such as high blood pressure and diabetes. The huge tsunami has simply washed away the entire region, claiming the lives of many local citizens. As a result there were very few cases of surgical treatment compared to other earthquake disasters.

Responding to the local needs, AMDA sent medical doctors as well as psychotherapists, psychiatrists, psychiatric nurses, and acupuncture therapists. Medical records were made for each patient who visited AMDA’s medical services, which were handed over to local doctors and hospitals for future reference. There was a great need for pharmacists as a huge amount of donated medicine had to be sorted out, properly labeled, and dispensed to patients after consultations, so AMDA called for pharmacist volunteers and managed to deploy sufficient numbers.

In addition to those medical treatments, AMDA teams took the initiative and worked on improving the living conditions in the evacuation shelters. Their activities included cleaning the toilets, providing hygiene education and nutrition program, delivering vitamin supplements, setting up a playroom for children, planning recreational activities and events, setting up partitions to protect privacy, introducing exercise machines, and so on.
Mobile Clinic Services

While AMDA teams were stationed at larger evacuation centers, they delivered mobile clinic services to smaller shelters and conducted many home visits to serve the people who could not make it to the shelters. Soja City in Okayama Prefecture provided AMDA with two electric cars (as seen in the photo to the right) to be used for mobile clinic services. These vehicles allowed AMDA to circumvent the gasoline shortage.

- Supporting the people of Fukushima

The Municipal Institute for International Cooperation in Okayama, an affiliate of AMDA Group, has also been supporting the city of Minami-Soma in Fukushima Prefecture by sending volunteers and daily commodities since March 12. Minami-Soma is one of the cities suffering from the effects of radiation leaks. Based on a request from Minami-Soma, the Institute will continue its support in cooperation with Okayama City.

Rehabilitation

- Three-year program to support the hospitals in affected regions

By the end of April, normal medical practices under Japan’s Social Health Insurance had resumed and the need for free clinics run by volunteers diminished. AMDA handed over its medical records to local hospitals and shifted its efforts to providing indirect support of local hospitals and doctors. As a start, AMDA has been supporting Ohtsuchi Prefectural Hospital and Shizugawa Prefectural Hospital by donating medical instruments and over the next three years will send doctors and other medical staff to supplement local personnel during the peak seasons of summer and winter. AMDA will also support local doctors who are restarting their clinics by donating supplies and medical instruments.

- Acupuncture and health support program

Considering the popularity and effectiveness of acupuncture therapy, AMDA will continue to send acupuncture therapists to the region regularly, cooperating with the Meiji University of Integrative Medicine. AMDA also has a plan to set up a “Health Support Centre” in Ohtsuchicho to provide acupuncture therapy and other alternative medical treatments.

- Helping the young

AMDA Scholarship for High School Students in Tohoku

Since schools were used as evacuation shelters, AMDA had the opportunity of meeting with local educators, giving AMDA insight into the real needs of the young people affected by the disaster. The young victims needed emotional as well as financial support to survive this ordeal. Considering such needs, AMDA established a scholarship program for local high school students who aspire to enter medical professions in the future. AMDA expects that this grant will give students hope for the future and that they will eventually contribute to the recovery of their communities. In addition to financial assistance for three years, the scholarship aims to provide international cultural exchange opportunities through the supporting organizations.
Exchange programs

AMDA has always placed great importance on the human relationships or ties between those affected by the disaster and outside communities. The victims need to know that they are not alone in their fight and that the rest of the country or the world will not abandon them in their most trying time. Furthering ties with people outside the affected area is a very effective way of boosting the spirit of victims and revitalizing the whole community. In April, AMDA organized an event for high school students in Okayama and Hiroshima to donate 1,500 gift bags, each with stationery and a handwritten message, to their peers in the disaster hit areas. After that, a group of high school students from Hiroshima visited Ohtsuchicho to take part in a high school exchange program. At the evacuation shelters, the students took part in daily chores with their peers in the local high schools.

In summer 2011, a joint sports exchange program will be held in Soja City, Okayama Prefecture, which will invite junior high school students from the disaster area to visit the cities of Okayama and Soja. The event will use soccer as a means of communication, replicating the successful example of a sports exchange program held for Haitian earthquake victims in 2010. The event hopes to promote mutual understanding and friendship between students from Okayama and those from the disaster areas who have persevered despite the hardships.

■ For the future

Though much has been achieved during the few months since the disaster, there is still a great deal yet to be done. AMDA will join hands with various donors, supporters, and its chapters around the world to launch a range of sustainable programs for the disaster victims in order to bring peace and normalcy back to the area. Offers of assistance have come from around the world and AMDA will keep on telling the survivors that they are not alone in their fight. AMDA will continue its assistance to meet the changing needs of these disaster sites. AMDA will fight together with the victims to build a safer and better community.