

**Organized by WHO Kobe Centre in cooperation with the University of Hyogo  
and WHO Kobe Centre Cooperating Committee**

**WKC Forum:**  
**“Creating resilient society and community for ageing populations  
in disaster situations”**

20 February 2015

**Programme**

14:00–14:10	<b>Opening remarks</b>	WHO Kobe Centre
14:10–15:25	<b>Presentations</b>	
	Older people's health after the Great East Japan Earthquake: from the epidemiological perspective	Dr Satoko Mitani Associate Professor, Unit for Liveable Cities Graduate School of Medicine Kyoto University
	Ageing society and disaster: report from global perspective	Dr Mayumi Kako Consultant WHO Kobe Centre
	Older people's health after the Hanshin Awaji Earthquake: learning from community support activities	Dr Kazuhisa Okamoto Head of Protection Section Health/Welfare Dept., Tarumi Ward Office City of Kobe
	Supporting people's health through the activity of 'Machi no Hokenshitsu (Public health room in communities)'	Professor Aiko Yamamoto Director, WHO Collaborating Center for Nursing in Disasters and Health Emergency Management University of Hyogo
	Health issues among the elderly after the Great East Japan Earthquake: a case in Fukushima	Dr Sae Ochi Director of Internal Medicine Soma Central Hospital Research Fellow, Imperial College London
15:25–15:55	<b>Discussion</b> (Open discussion)	Moderator: Dr Mayumi Kako
15:55–16:00	<b>Closing remarks</b>	WHO Kobe Centre

## **Background :**

During the last 20 years since the 1995 Great Hanshin-Awaji Earthquake in Japan, a great deal of effort has been made in communities and by local and national Governments, and with the international community to prepare, respond, and recover from natural disasters. The 2005 Hyogo Framework for Action (HFA) was adopted by all countries to address disaster risk reduction, while agencies such as WHO, UNDP, UNISDR, etc. have developed specific guidance for the various parts of the disaster continuum.

The HFA has been evaluated and is the basis for discussion for its revision at the UN World Conference on Disaster Risk Reduction held in next month at Sendai. Many lessons have been learned within the past 20 years, including from the Great East Japan Earthquake, and from so many other disasters across the world. This has led to a great need to share the lessons on to achieve the current goal on how to create a resilient society and community.

Japan has the largest proportion of older adults in the world. As a result, aged populations were much more affected in the 1995 Great Hanshin-Awaji Earthquake and in the 2011 GEJE. There are many implications from the vulnerability of older populations that help us better understand how to better prepare, respond, and support survivors. One of the largest issues confronting communities is caring for survivors that include health, psycho-social, and physical issues. Older persons are also important parts members of the community that can help lead and contribute to resilient communities.

This forum will provide an opportunity to discuss lessons from past disasters to guide how to create a more resilient ageing society that can better prepare for future disasters and support survivors. There will be five experts in the field of medical care, nursing, social welfare for elderly people and from WHO. They will share their experiences and discuss how to develop a resilient society and community for ageing society in disaster situations. An open discussion is also scheduled to answer questions from the floor.

### **Speakers: Short bio sketch**

(in order of the programme)



Dr Satoko Mitani  
Associate Professor, Unit for Liveable Cities  
Graduate School of Medicine  
Kyoto University

Dr Mitani is an expert in the field of Disaster Nursing, especially in mental health, and in the field of Public Health and Epidemiology, especially in life-style-related diseases.

“To prevent deaths associated with disaster, I would like to examine from the epidemiological perspective on the health risks caused by experiencing shelter/evacuation life, and the vulnerability of older people at the time of a disaster, focusing on the health problems that older people have faced at the time of the GEJE. In addition, I would like to speak on how the medical support to older people should be in a country like Japan where we are facing population decrease and reached a super-ageing society, within a disaster cycle that includes disaster prevention plan, training such as drill, aid and support after the outbreak of a disaster/crisis”.



Dr Mayumi Kako  
Consultant, WHO Kobe Centre

Doctor of Philosophy, Master of Nursing, Flinders University. Dr Kako currently works as Consultant at the WHO Kobe Centre in the area on health emergency management. After graduating from Kobe City College of Nursing in 1994, worked at the Kobe Nishi Medical Centre. Studied abroad in Australia and acquired Bachelor and Master of Nursing. While teaching at the Kobe City College of Nursing, involved in a volunteering activity, providing health support for older people who were relocated to HAT Kobe after the Great Hanshin-Awaji Earthquake. After acquiring Doctor of Philosophy at the Flinders University, Australia in 2008, involved in the research for disaster nursing and medical care at the Torrens Resilience Institute (former, Disaster Research Centre), Flinders University.

“The speed of ageing is accelerating globally. A global approach is indispensable to the challenges occur within the aging society. Disasters affect societies, much time will be required for recovery especially in societies that are vulnerable in its structure system. I would like to examine ageing society and also on disaster prevention, focusing on recovery & rehabilitation phase of disasters, from Japan and also from a global perspective on how we can provide support to older people”.



Dr Kazuhisa Okamoto  
Head of Protection Section  
Health/Welfare Dept., Tarumi Ward Office  
City of Kobe

Dr Okamoto graduated from the Social Welfare Department, Osaka Prefecture University. He joined City of Kobe in 1991, assigned to Central Welfare Office. Involved in launching volunteer centres and temporary housings. Also experience positions responsible for child abuse. Responsible for current position since 2012. Deployed to several areas in Japan (Fukui prefecture, Ishikawa prefecture, Niigata prefecture) affected by natural disaster and supported missions.

“The Great Hanshin-Awaji Earthquake (GHAE) affected many lives, causing unprecedented damage on housing and buildings. Older people and middle-aged men living in temporary housing and restoration housing were isolated as they had no connection within the community, and unfortunately, many of them died solitary. This became a big social problem. Therefore, to that end, we have deployed supporters and experts who contributed in taking care older people and regenerating/rebuilding communities. The experience from the GHAE is being applied to the disaster support for the Great East Japan Earthquake and other disasters occurred in Japan. I believe that, in order to create resilient society for ageing populations in disaster situations, there is a need to sustain the support at all times”.



Professor Aiko Yamamoto

Director, WHO Collaborating Center for Nursing  
in Disasters and Health Emergency Management  
University of Hyogo

Professor Yamamoto graduated from the St. Luke's College of Nursing (currently, St. Luke's International University). She has completed doctoral program at the Nursing Department, University of Texas at Austin. Acquires Doctor of Nursing Science. After experiencing positions as instructor at St. Luke's International University and also as expert for nursing education for an education project for JICA Pakistan, she joined the College of Nursing Art and Science, University of Hyogo in 1994. Professor Yamamoto has acquired current position since 2008. After the Great Hanshin-Awaji Earthquake, she was involved in the establishment of the Japan Society of Disaster Nursing in 1998, and also the World Disaster Nursing Society in 2008, and she serves as President of both institutes.

“Based on the lessons learned during the aftermath of the Great Hanshin-Awaji Earthquake (GHAE), when health support was needed for people living in temporary housing, the activity of ‘Machi no Hokenshitsu (Public health room in communities)’ is expanding in Japan. The main purpose of this activity is to provide health support to people by nurses. ‘Machi no Hokenshitsu’ is an activity promoted by not only the Japanese Nursing Association but also by nursing associations of all prefectures in Japan. One of the health assistance measures for the victims of the GHAE and Great East Japan Earthquake (GEJE), we organize home visits and hold meetings that provide health advice. We have been involved in supporting the health of the people whose lives were affected by the GEJE. Today, I would like to share our experience we have acquired on how to prevent isolation of the older generation and also on how to address maintenance and improvement of health”.



Dr Sae Ochi

Director of Internal Medicine, Soma Central Hospital  
Research Fellow at MRC-HPA Centre for Environment and Health  
Imperial College London

Dr Ochi graduated from the Tokyo Medical and Dental University in 1999. An expert in connective tissue disease (CTD). Acquired PhD in Medical Science from the Graduate School of Tokyo Medical and Dental University, 2003-2007, MPH from the Imperial College London School of Public Health, 2011-2012.

“The goal of disaster recovery is not only recovery of infrastructure and economy but also that of people, to which preventing long-term health deterioration is a key. Japan, a super-ageing country, the health problems among the elderly is a major burden at the disaster area, therefore it is necessary to get a holistic view of the health problems among this vulnerable population to manage health issues at disaster area. These issues include exacerbation of pre-existing chronic conditions, increase in the number of those living alone due to the evacuation of younger population, muscle weakness caused by the living at temporary housings, and decrease in the number of staff who cares them. I will present these issues based on my experience at Soma City, Fukushima”.