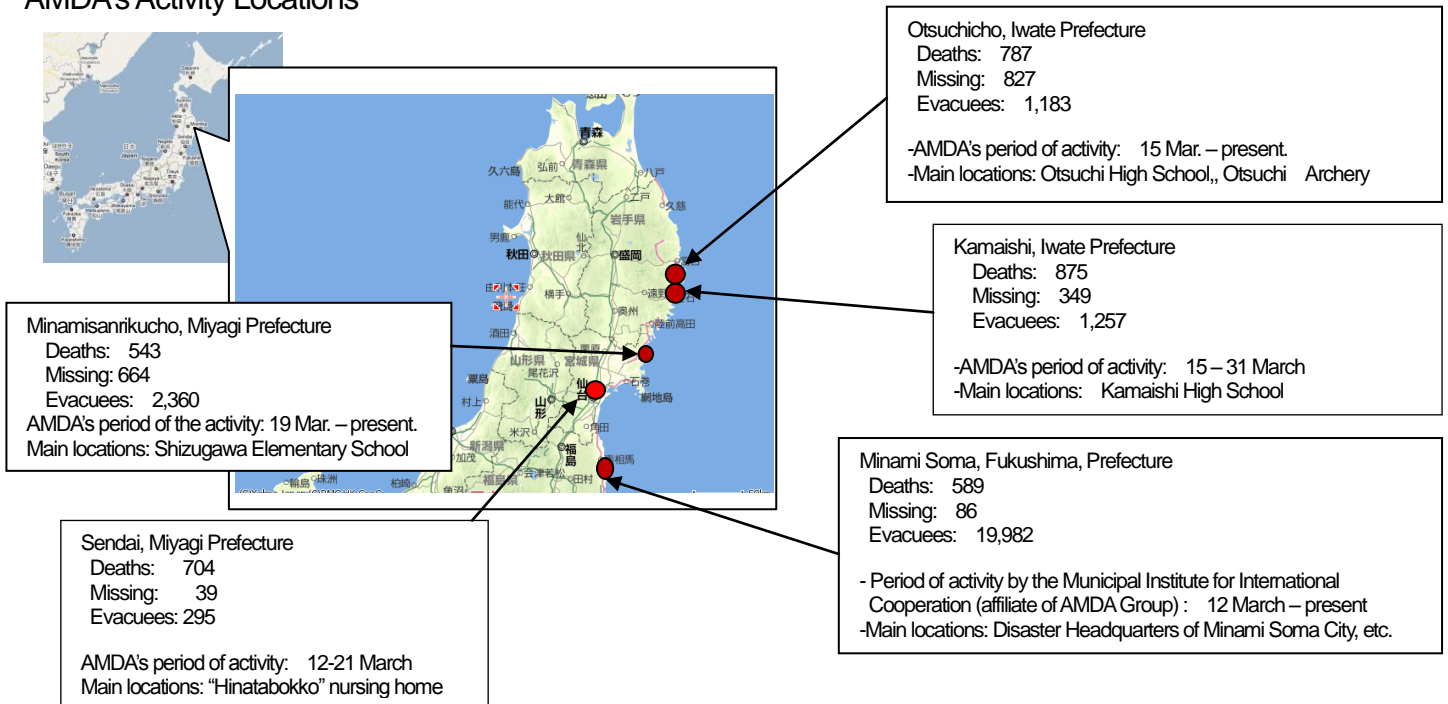


Emergency Relief Activities for the Great East-Japan Earthquake and Tsunami: 11 Mar. – 20 Apr.

Overview

AMDA's Activity Locations



March 11th	At 14:46, a 9.0-magnitude-earthquake and tsunami struck the northeast Japan. AMDA immediately decided to dispatch its first emergency relief team
12th	The first AMDA medical team entered Sendai City, the capital of Miyagi Prefecture. Upon request of the local government, AMDA started delivering medical assistance.
15th	While part of the team remained in Sendai, the rest relocated to Kamaishi City and Otsuchicho in Iwate Prefecture and started relief work.
19th	AMDA started ER activities in Minamisanrikucho (Miyagi) where the damage was the severest.
21st	Completed ER activities in Sendai and handed them to the local medical institutions.
31st	Completed ER activities in Kamaishi City and handed them to the local medical association.
April 20th	Completed ER activities in Minamisanrikucho (Miyagi) and Otsuchicho (Iwate) and handed them over to local doctors. AMDA's activities have shifted from ER to rehabilitation. Acupuncture therapy and health assistance in those two towns are still being continued.

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	

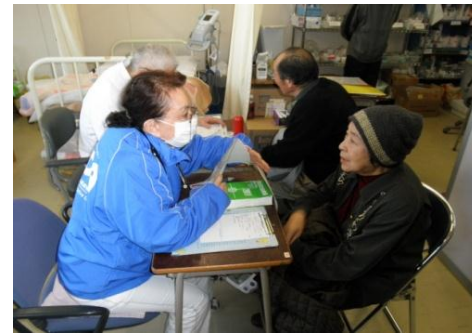
Delivering aid supplies: 7 times

The aid supplies were prepared in response to the request 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, stationeries, electric appliances (washing machines, computers, battery chargers, etc.) .

■ Daily operations at the activity sites

Coping with the needs of the evacuation shelters

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



Temporary clinic in Otsuchi High School shelter

Though the situation at the shelters saw some improvements with the partial restoration of communication and lifelines, 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 counter-measures to prevent the 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 not only medical doctors but also psychotherapists, psychiatrists, psychiatric nurses and acupuncture therapists. Medical records were made for each patient who visited AMDA's medical services and 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 handed out to patients after the consultation. AMDA also called for pharmacist volunteers and managed to deploy sufficient numbers to all places.



Home visiting acupuncture therapy

Beside those medical treatments, AMDA teams took 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 a playroom for children, planning recreations and events, setting partitions to protect privacy, introducing exercise machines, and so on.



AMDA's Mobile Clinic



AMDA's doctor visiting a nursery



Visit by a confectioner

■ 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 to be used for mobile clinic services. These vehicles were able to circumvent the petrol shortage



Electric car from Soja City (©New York Times, 8 May)

■ Supporting people of Fukushima

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

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 have resumed and the needs for free clinics run by volunteers diminished. AMDA handed over its medical records to local hospitals and shifted its activities to the indirect support of local hospitals and doctors. As a start, AMDA is going to support Otsuchi Prefectural Hospital and Sizugawa Prefectural Hospital by donating medical instruments and sending doctors and other medical staffs for three years, during the peak seasons of summer and winter. AMDA will also support the local doctors to restart their clinics by donating supplies and medical instruments.

■ Acupuncture and health support program

Considering the popularity and effectiveness of acupuncture therapy, AMDA will send acupuncture therapist regularly, cooperating with the Meiji University of Integrative Medicine. AMDA also has a plan of setting up "Health Support Centre" in Otsuchicho, to provide acupuncture therapy and other alternative medical treatments.

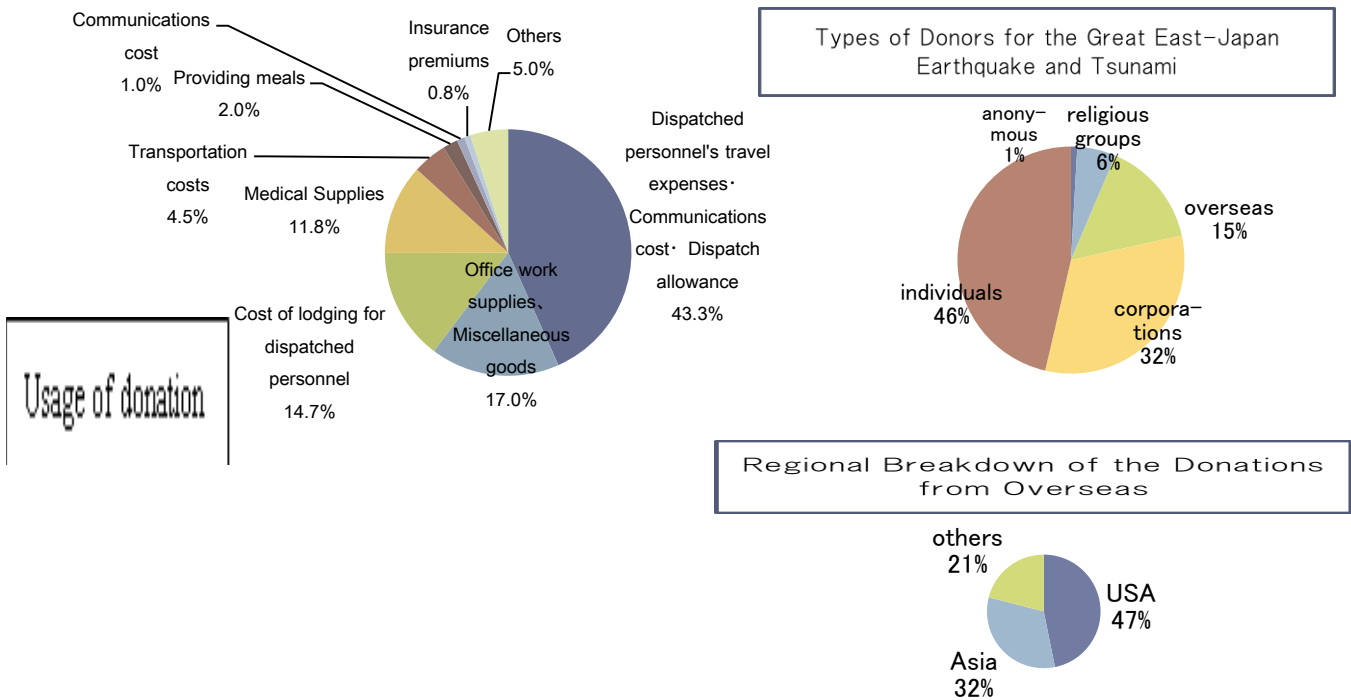
■ Helping the young**AMDA Scholarship for High School Students in Tohoku**

Since schools were used as evacuation shelters, AMDA had the opportunity of meeting with local educators which gave AMDA insight into the real needs of 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 the 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. Besides 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 relationship or ties between the disaster affected people and outside communities. The victims need to know that they are not alone in their fight and the rest of the country or the world would not abandon them in their most trying time. Furthering ties with the 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 handwritten message to their peers in the disaster hit areas. After that, a group of high school students from Hiroshima City visited Otsuchicho town 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, inviting junior high school students from disaster area to Okayama and Soja Cities. The event uses soccer as a means of communication, which replicates the successful example of the 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 disaster areas who persevered the hardship.



■ For the future

Though much has been achieved during the few months after the disaster, there are still many things yet to be done. AMDA will join hands with various donors, supporters and its chapters around the world to launch a range of programs for the disaster victims, not transiently but sustainably, 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.