Third Party Evaluation Report 2012 Ministry of Foreign Affairs of Japan

Evaluation of Japan Disaster Relief Team -Summary-

February 2013

Mitsubishi Research Institute, Inc.

Preface

This report is a summary of the "Evaluation of Japan Disaster Relief Team" undertaken by Mitsubishi Research Institute, Inc. entrusted by the Ministry of Foreign Affairs (MOFA) of Japan in FY2012.

Since its commencement in 1954, Japan's Official Development Assistance (ODA) has contributed to the development of partner countries and finding solutions to international issues that vary with the times. Recently, more effective and efficient implementation of ODA has been required not only in Japan but also in the international community. MOFA has been conducting ODA evaluations mainly at the policy level, with two main objectives: to improve management of ODA and to ensure its accountability. These evaluations are conducted by third parties to enhance their transparency and objectivity.

This evaluation involved a review of the entire Japan Disaster Relief Team system (excluding the Self-Defense Force Unit). Its purpose was to learn lessons and provide recommendations as a reference for the future effective and efficient implementation of international disaster relief (humanitarian aid) by the Government of Japan (GOJ). Further, by widely publicizing the results of the evaluation, GOJ can fulfill its accountability to the general public.

Professor Hideki Kaji, Center for Urban Earthquake Engineering, Tokyo Institute of Technology, who served as chief evaluator, and Professor Eiji Oyamada, Graduate School of Global Studies, Doshisha University, advisor for the evaluation, contributed enormously to this report. Also, MOFA, the Japan International Cooperation Agency (JICA), and the ODA Task Force as well as government institutions in the Republic of Indonesia, donors, and NGOs also made invaluable contributions. We would like to take this opportunity to express our sincere gratitude to all those who were involved in this study.

Finally, the Evaluation Team wishes to note that the opinions expressed in this report do not necessarily reflect the views or positions of the Government of Japan.

February 2013

Mitsubishi Research Institute Inc.

Evaluation of Japan Disaster Relief Team

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2. Period of Evaluation Study:

June 2012 – February 2013

3. Country Survey / Case Study Country

Republic of Indonesia



Evaluation Interview

Ministry of Health of Indonesia,

Jakarta

4. Outlines of Evaluation Results and Recommendations

(1)Evaluation Results

(a)Relevance of Policies

The dispatch of Japan Disaster Relief Team (JDR) and its activities are highly regarded in terms of consistency with Japan's Official Development Assistance (ODA) Charter and Japan's Medium-Term Policy on ODA, responsiveness to the needs of disaster victims and affected countries, trends with regard to the international community, relations with other donors, and superiority of JDR in comparison to other disaster relief teams.

(b)Effectiveness of Results

Concerning alleviating human suffering (physical and mental), we evaluate the activities of the JDR Rescue team and Medical team extremely high in terms of alleviating mental suffering in particular. Publicity and acknowledgement in the international community, in disaster-affected countries, and in Japan are highly regarded, but these JDR activities should be expanded further. Moreover, derivative effects from JDR activities have also been confirmed, and these derivative effects are regarded as evidence of the effectiveness of the results.

(c)Appropriateness of Process

As a whole, we evaluate highly the appropriateness of the processes from preparation to dispatch JDR.

(d) Perspectives of Diplomacy

Particularly with respect to disasters that occur in Asia, JDR is able to reach disaster sites in a shorter time than disaster relief teams from Western countries as a result of geographical proximity. From the viewpoint of saving lives, it is extremely important to dispatch JDR quickly once a request for assistance

is received from the government of the disaster-affected country or an international organization. The ability to dispatch JDR rapidly, in the end, becomes one measure of diplomacy. There have been cases in which these activities have helped to foster pro-Japanese sentiment, and therefore we highly evaluate JDR activities from the perspective of diplomacy.

(2) Main Recommendations

(a) Policy and Strategy

Recommendation 1: Continuation and succession of assistance that establishes a close relationship with disaster victims

The mental care provided by JDR is a major characteristic and strength of Japan's assistance. This results from a specific policy of assistance that "establishes a close relationship with disaster victims." We recommend sharing and continuing this approach.

Recommendation 2: Continuation and Expansion of Seamless Assistance

We recommend continuing and expanding the seamless assistance for recovery and reconstruction that builds on the valuable relationships of trust forged in the course of JDR activities with government agencies in disaster-affected countries and with local governmental organizations involved in disaster relief, rescue and medical institutions, etc.

(b) Implementation Methods

Recommendation 3: Improvement and maintenance of materials and equipment procurement system (in particular, review of the use of overseas local human resource network)

We recommend that local human resource networks currently used for emergency procurement be kept in mind as an option for normal use for the local procurement of JDR materials and equipment in each country.

(c) Publicity and Cooperation

Recommendation 4: Review and improvement of public relations (in particular review of the use of overseas media)

We recommend reviewing public relations strategies for overseas media and, in particular, to consult on the idea of further strengthening collaboration with Japan's diplomatic missions and JICA's overseas offices. We also recommend reviewing the system of public relations in overseas offices, as well as taking measures to reduce the burden of public relations on dispatched JDR personnel if necessary. In addition, we recommend the continuation and further improvement of domestic public relations efforts.

Recommendation 5: Involvement in the International Search and Rescue Advisory Group (INSARAG) and enhancement of international cooperation

We recommend that Japan continue to pay attention to sharing information within Japan regarding INSARAG activities and while also ensuring that JDR opinions are heard by INSARAG. We further recommend that Japan's involvement in INSARAG to be increased. We also recommend that the JDR Rescue team, which has been certificated as the top IEC "Heavy" classification, to play a leading role in increased international activities among Asian countries.

Recommendation 6: Implementation of JDR activities while working to maximize their effectiveness

We recommend that dispatched JDR members keep in mind that maximizing the effectiveness of JDR will ultimately affect the degree of gratitude and friendly relations between Japan and the affected country.

Index

Chapter 1	Evaluation Policies	1
1.1	Background and objectives	1
1.2	Object of this evaluation	1
1.3	Method of this evaluation	3
Chapter 2	Overview of Japan Disaster Relief Team (JDR)	5
2.1	History of JDR	5
2.2	Process of dispatching JDR	5
Chapter 3	Evaluation Results	8
3.1	Relevance of policies	8
3.1.1	Consistency with Japan's high-level policies	8
3.1.2	Consistency with the needs of disaster victims and the disaster-affected countries	9
3.1.3	Consistency with trends in the international community	9
3.1.4	Relations with other donors	10
3.1.5	Comparative superiority of JDR	10
3.2	Effectiveness of results	11
3.2.1	Alleviating human suffering (physical and mental)	11
3.2.2	Publicity and recognition	13
3.2.3	Derivative effects	14
3.3	Appropriateness of processes	15
3.3.1	JDR preparedness system	15
3.3.2	Dispatch of JDR	18
3.4	Perspectives of diplomacy	19
Chapter 4	Recommendations	20
4.1	Policy and Strategy	20
4.2	Implementation Methods	21
4.3	Publicity and Cooperation	21

Chapter 1 Evaluation Policies

1.1 Background and objectives

Japan provides emergency assistance as one of its concrete international humanitarian assistance measures, and Japan Disaster Relief Team (JDR) constitutes the humanitarian aid provided within this framework. When a major disaster occurs overseas, JDR is dispatched in response to a request from the government of the affected country or an international organization. The JDR conducts search and rescue, provides medical assistance, and implements emergency and disaster recovery measures. As a form of Official Development Assistance (ODA) that is clearly identifiable as being from Japan, JDR makes a major contribution to the promotion of Japan's international cooperation efforts.

ODA is one of the mainstays of Japan's contributions to the international community. As such, whether provided within Japan or overseas, ODA must constitute high-quality assistance that is implemented both effectively and efficiently, and the Ministry of Foreign Affairs (MOFA) of Japan is constantly striving to improve its evaluations of ODA.

This evaluation represents a comprehensive evaluation of the JDR scheme, based on the significance of JDR within Japan's ODA, for the purpose of obtaining useful lessons and recommendations for the planning and implementation of future ODA policy. Moreover, the recommendations made in this evaluation are expected to help achieve even more effective and efficient assistance and contributions to disaster-affected countries by JDR in the future.

1.2 Object of this evaluation

This evaluation covers JDR Rescue team, Medical team, and Expert team (but excludes the Self-Defense Force Unit) dispatched from April 2004 to the end of March 2012. It follows the third-party evaluation of JDR that was conducted by MOFA in FY 2003.

During this period, a total of 42 JDR was dispatched in response to 24 disasters: 7 Rescue teams, 19 Medical teams, and 16 Expert teams. Of the total, 9 teams were dispatched to Indonesia (1 Rescue team, 7 Medical teams, and 1 Expert team), making Indonesia the most frequent receiver of JDR. For this reason, a great deal of information was available locally in Indonesia, so a field survey was conducted there and relevant personnel and organizations were interviewed. In the case of other countries, the achievements of JDR and the results of previous evaluations have been analyzed to provide reference information for the evaluation.



	Type of Disaster	JDR (Type, Number Dispatched)					
Year		Rescue	Medical	Expert			
1. China	1. China						
2008	Earthquake	1	1				
2. Philippi	2. Philippines						
2006	Oil Spill			1			
3. Indone:	sia						
2004	Tsunami		1				
2005	Tsunami		2				
2005	Earthquake		2				
2006	Earthquake		1				
2009	Earthquake	1	1				
2010	Volcanoes			1			
4. Taiwan	4. Taiwan						
2009	Typhoon			1			
5. Thailan	5. Thailand						
2004	Tsunami	1	1				
2005	Tsunami			2			
2011	Flood			4			
6. Sri–Lanka							
2004	Tsunami		1				
2005	Tsunami		1	1			

	Type of Disaster	JDR (Type, Number Dispatched)				
Year		Rescue	Medical	Expert		
7. Maldive	7. Maldives					
2004	Tsunami		1			
2005	Tsunami			1		
8. Pakista	8. Pakistan					
2005	Earthquake	1	2			
2010	Flood		2			
9. Korea						
2007	Oil Spill			1		
10. Myann	10. Myanmar					
2008	Cyclone		1			
11. New Z	ealand					
2011	Earthquake	3		3		
12. Haiti						
2010	Earthquake		1			
13. Chili						
2010	Earthquake		1			
14. Russia (Khabarovsk)						
2011	Fire Accident			1		
Subtotal		7	19	16		
Total				42		

Source: Evaluation Team

Figure 1: Dispatch of JDR teams from April, 2004 to March, 2012

The objective framework of JDR is shown below.

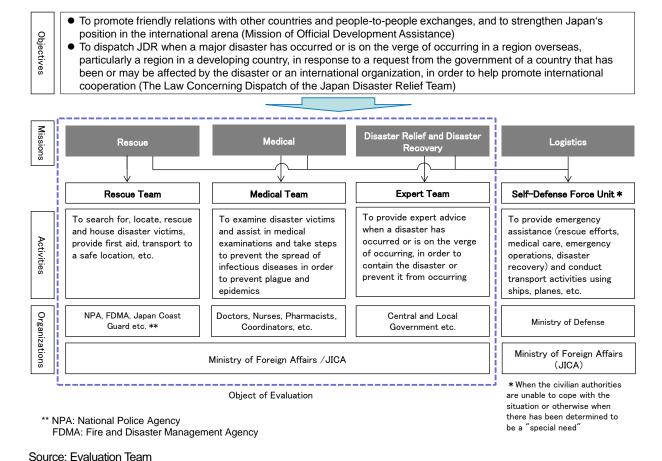


Figure 2: Objective Framework of JDR

1.3 Method of this evaluation

This evaluation conforms to MOFA's ODA Evaluation Guidelines, 7th Edition (April 2012). Four criteria were evaluated with respect to JDR (excluding the Self-Defense Force Unit): "Relevance of Policies," "Effectiveness of Results," "Appropriateness of Processes," and "Perspectives of Diplomacy."

(1) Relevance of Policies

The relevance of policies was evaluated based on Japan's ODA Charter (August 2003) and Japan's Medium-Term Policy on ODA (February 2005). Japan's Country Assistance Program for Indonesia (November 2012) was also taken into consideration, but as the evaluation needed to cover the period prior to this date, the evaluation was based on the former Country Assistance Program for Indonesia (November 2004).

(2) Effectiveness of Results

The effectiveness of results was evaluated according to the degree of achievement based on the

results of JDR activities.

(3) Appropriateness of Processes

The appropriateness of JDR processes was evaluated separately for two steps of preparation and dispatch. Evaluation of the first step covered domestic processes from domestic preparedness through requests for assistance, decision to respond, and dispatch. Evaluation of the second step covered processes from the dispatch of teams through to their return to Japan, subsequent feedback, and activities at the disaster site.

(4) Perspectives of Diplomacy

The evaluation from the perspectives of diplomacy was conducted with consideration given to "diplomatic importance" and "diplomatic ripple effect" in terms of the national interests of Japan.

Chapter 2 Overview of Japan Disaster Relief Team (JDR)

2.1 History of JDR

In March 1982, the Government of Japan established a Medical Team in order to respond to major disasters overseas and ensure quick dispatch of the team to the disaster-affected area. This was the Japan Medical Team for Disaster Relief (JMTDR), the forerunner of the present-day JDR Medical team.

In 1985, medical teams were dispatched in response to the earthquake in Mexico and the volcanic eruption in Columbia. As a result of this activity, the need was recognized for a comprehensive disaster relief team that included not only a medical team but also a rescue team for search and rescue work and an expert team for emergency disaster relief measures.

Based on this experience, the Government of Japan moved forward with the establishment of the JDR. The Law Concerning Dispatch of the Japan Disaster Relief Team was enacted in August 1987 and enforced in September of the same year. Under this law, JDR was inaugurated and a system was established for the dispatch of Rescue teams, Medical teams, and Expert teams.

In 1992, the law was partially revised to enable the dispatch of a Self-Defense Force Unit and, at the same time, the scope for response by the different teams was specified. The Self-Defense Force Unit would respond in the event of disasters resulting from conflict, while the JDR would respond in the event of other natural and humanitarian disasters that are not caused by conflict.

Currently, four types of JDR (Medical Team, Rescue Team, Expert Team, and the Self-Defense Force Unit) are dispatched depending on the type and scale of the disaster and the request from the disaster-affected countries. Each of the four types can be dispatched independently or in combination with other teams.

2.2 Process of dispatching JDR

When a major disaster occurs overseas and Japan receives a request for assistance from the government of the affected countries or an international organization, the details of Japan's Emergency Assistance are considered based on the request, the scale and type of the disaster, and so on. Consultations are then held with relevant ministries, agencies and institutions, after which the JDR is dispatched.

(1) Rescue Team

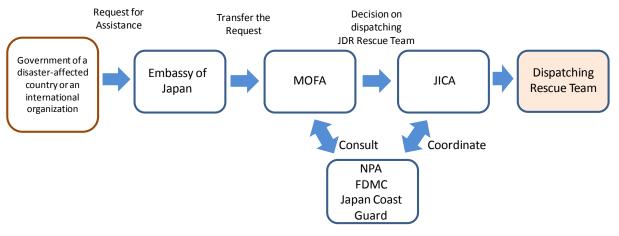
The primary duty for the Rescue team is to search for, locate, and rescue disaster victims, providing them with first aid and transporting them to a safe location. The team comprises personnel from the Ministry of Foreign Affairs, National Police Agency, Fire and Disaster Management Agency, Japan Coast Guard, and JICA (medical teams and structural assessment and work coordination).

In 2010, the JDR Rescue team was awarded "Heavy" classification, which is the best rating of the

International Search and Rescue Advisory Group (INSARAG)¹ External Classification (IEC)². INSARAG and the United Nations Office for the Coordination of Humanitarian Affairs (UNOCHA) recommend that disaster relief teams that are dispatched outside their own country should attain "Medium" or above IEC classification

The scale of the Rescue team that is dispatched is determined comprehensively according to the scale and type of the disaster, the geographical conditions, etc. The current standard Rescue team consists of 69 members in conformance with the INSARAG guidelines.

The process from disaster occurrence through dispatch of a Rescue team is shown in Figure 3.



Source: Evaluation Team

Figure 3: Process of dispatching Rescue Team

(2) Medical Team

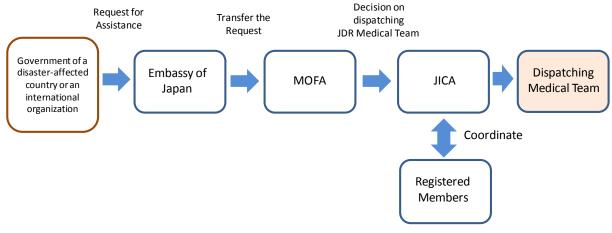
The Medical team provides medical care to disaster victims and, if needed, conduct activities to prevent the spread of disease and epidemics. In addition to registered doctors, nurses, pharmacists, and coordinators, team members also include representatives from MOFA and JICA.

The standard Medical team consists of 23 members in conformance with the INSARAG guidelines. Consideration is given to the gender balance of the team, based on the circumstances in the country to which the team will be dispatched, and many women doctors are included among the registrants.

The process from disaster occurrence through dispatch of a Medical team is shown in Figure 4.

An international network under the auspices of the United Nations that coordinating the disaster relief teams from each country in order to work together to conduct activities effectively at the disaster site. The secretariat is UNOCHA.

² External evaluation of international rescue teams by INSARAG. There are two evaluation classes, Heavy and Medium. Approximately 150 items are checked by the external evaluation personnel, covering the process from preparations prior to dispatch through withdrawal, after which a decision is made regarding whether to grant certification. In the most rigorous Heavy class, the capacity to secure safety independently at the disaster site and to conduct search and rescue activities continuously, 24 hours a day, at two disaster sites for a period of ten consecutive days is required.



Source: Evaluation Team

Figure 4: Process of dispatching Medical Team

(3) Expert Team

The Expert team consults with and provides recommendations to the government of the disaster-affected countries regarding such matters as seismic assessments for buildings, volcano eruption predictions, damage predictions, and other aspects of emergency disaster relief measures and recovery activities. The team also provides recommendations regarding ways to prevent the spread of new infectious diseases.

The Expert team is assembled based on the request from the disaster-affected countries. Unlike the Rescue and Medical teams, Expert team members are not registered in advance.

The process from disaster occurrence through dispatch of an Expert team is shown in Figure 5.

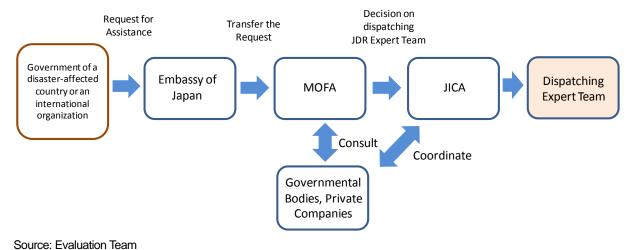


Figure 5: Process of dispatching Expert Team

Chapter 3 Evaluation Results

3.1 Relevance of policies

3.1.1 Consistency with Japan's high-level policies

Japan's high-level policies with respect to the JDR scheme are set out in Japan's ODA Charter (revised in August 2003), as well as Japan's Medium-Term Policy on ODA, which contains systematic and specific aid guidelines for ODA policies.

(1) Consistency with Japan's ODA Charter

Japan's ODA Charter, which was revised in August 2003, makes the following statement in the section "I. Philosophy: Objectives, Policies, and Priorities" under "1. Objectives":

"The objectives of Japan's ODA are to contribute to the peace and development of the international community and thereby to help ensure Japan's own security and prosperity.... [Omitted] In particular, humanitarian problems, such as extreme poverty, famine, refugee crises, and natural disasters, as well as global issues such as those related to the environment and water, are important issues that need to be addressed in order for the international community as a whole to achieve sustainable development.... [Omitted] Japan, as one of the world's leading nations, is determined to make best use of ODA to take the initiative in addressing these issues. Such efforts will in turn benefit Japan itself in a number of ways, including by promoting friendly relations and people-to-people exchanges with other countries, and by strengthening Japan's standing in the international arena."

This indicates that proactive efforts should be made with regard to disasters and other humanitarian problems. The dispatch and activities of JDR are found to be consistent as part of these efforts. Accordingly, the dispatch and activities of JDR are consistent with Japan's ODA Charter.

(2) Consistency with Japan's Medium-Term Policy on ODA

Japan's Medium-Term Policy on ODA lists the following six points as its approach for helping to achieve human security:

- 1) Assistance that puts people at the center of concerns and that effectively reaches the people
- 2) Assistance to strengthen local communities
- Assistance that emphasizes empowering of people
- 4) Assistance that emphasizes benefiting people who are exposed to threats
- 5) Assistance that respects cultural diversity
- 6) Cross-sectoral assistance that mobilizes a range of professional expertise

The approach expressed in these six points is that of direct and indirect humanitarian aid through JDR activities. Aid that is contributed directly to disaster victims and disaster-affected countries through JDR activities addresses points 1), 2), and 4). Point 3) is not directly addressed by JDR, but a contribution is made in the sense that Japan's advanced technologies are imparted through collaborative activities with medical and other cooperating institutions in the course of activities at the disaster site in the affected countries. Point 5) is addressed by activities that are implemented with consideration for gender and local customs and practices. With respect to point 6), Expert teams in particular provide assistance using advanced Japanese technologies and expert knowledge.

Based on the above, the dispatch and activities of JDR are consistent with Japan's Medium-Term Policy on ODA.

3.1.2 Consistency with the needs of disaster victims and the disaster-affected countries

A request for assistance from the government of a disaster-affected country or an international organization is a prerequisite for the dispatch of JDR. The details of a request for assistance vary and may include rescue and protection of human life in the disaster-affected area, the provision of medical treatment to injured victims, and providing a minimum standard of food, clothing and shelter to enable disaster victims to survive. However, the highest priority is always lifesaving. JDR directly responds to these needs on the part of disaster victims and disaster-affected countries.

In interviews conducted with relevant institutions in Indonesia in the field survey, responses demonstrated that JDR activities take the place of the national and local government of disaster-affected countries and help to save the lives of disaster victims and provide emergency medical assistance, and they are highly valued.

Accordingly, JDR is consistent with the needs of disaster victims and the disaster-affected countries.

3.1.3 Consistency with trends in the international community

Humanitarian assistance for natural disasters is viewed as important in the international community and its provision is constantly being revamped.

Japan considers ensuring human security to be one of the main pillars of its diplomatic policy. As such, Japan actively strives to provide humanitarian assistance that is appropriate to the changing circumstances of humanitarian crises in recent years. In the event of a natural disaster, the most important requirement is quick and effective humanitarian assistance to the affected countries and to disaster victims in accordance with their needs. The dispatch of JDR is considered to be one part of the humanitarian assistance effort that can be provided quickly in response to a request from a disaster-affected countries.

Accordingly, the dispatch of JDR is consistent with trends in the international community that

acknowledge the importance of humanitarian assistance.

3.1.4 Relations with other donors

When a major disaster occurs, a United Nations Disaster Assessment and Coordination (UNDAC) team enters the disaster-affected countries first, in response to a request from the government of the affected countries. An On-Site Operations Coordination Center (OSOCC) is set up to serve as the response coordination organization. The OSOCC collects information about the disaster relief teams from each dispatching country and provides maps and updated information about disaster status and so on to each disaster relief team that enters the affected countries. It also decides where each country's disaster relief teams to operate, understand the status of their activities, assigns locations for operations and receive disaster relief teams and coordinate the teams.

When a rescue team with "Heavy" status enters a disaster-stricken location before the teams of other countries, it sets up an OSOCC in place of UNDAC. The team works to collect information on the disaster, receive the teams of other countries when they arrive in the affected countries, and coordinate the teams.

At the time of the earthquake off the coast of Padang in 2009, the JDR Rescue team was the first to arrive at the stricken location. The team set up an OSOCC and then rapidly carried out reconnaissance in coordination with UNDAC and other donor staff. It also helped with the initial selection of sites for disaster relief operations. In addition, the OSOCC coordination conference was held in the JDR resident command center tent.

In the case of the earthquake on New Zealand's South Island, activity reports by the JDR Rescue team indicate that the building of useful relationships with other donors was adequate.

These cases demonstrate that the JDR relates well with other donors.

3.1.5 Comparative superiority of JDR

After the decision of dispatching JDR has been made, the Rescue team aims to depart from Japan within 24 hours, and the Medical team aims to depart from Japan within 48 hours. No explicit time has been established with regard to Expert teams, but the goal is to ensure that a team arrives as quickly as possible after a request has been received. At the time of the earthquake off the coast of Padang in 2009, the JDR Rescue team was the first to arrive at the stricken location and the OSOCC coordination conference was held in the JDR resident command center tent. This can be seen as a notable example of the comparative superiority of JDR.

Moreover, in interviews conducted during the field survey in Indonesia, the superiority of the JDR as compared to the teams from other countries was pointed out throughout, in terms of overall activities, technology possessed, and teamwork.

Accordingly, JDR is comparatively superior to the disaster relief provided by other countries.

3.2 Effectiveness of results

3.2.1 Alleviating human suffering (physical and mental)

(1) Rescue team

Rescue team has been dispatched five times from April 2004 to the end of March 2012, comprising a total of 387 personnel.

According to interviews conducted in the field survey in Indonesia, the activities of JDR Rescue team is highly regarded for their detail and care, as well as for providing psychological peace of mind to local residents experiencing disaster conditions. Within the larger framework of alleviating human suffering, they were extremely highly rated as having helped to reduce mental suffering in particular.

The objective for JDR is to dispatch a Rescue team within 24 hours of the decision to dispatch the team. In each of the five cases, only about one day elapsed from acceptance of the request to the team's arrival on site. This is the result of JDR building a preparatory system in which rapid dispatch is the primary goal. Rapid arrival on site leads directly to reducing human suffering (both physical and mental). Therefore, JDR's ability to dispatch a team rapidly is highly regarded.



Source: JICA (http://www.jica.go.jp/topics/2009/20100317_03.html)

Figure 6: Rescue team members carrying out search operations in confined spaces (Earthquake off the coast of Padang in Indonesia in October, 2009)

(2) Medical team

Medical team has been dispatched 19 times from April 2004 to the end of March 2012, comprising a total of 379 personnel.

In the case of JDR Medical team, the aim is for a team to depart from Japan within 48 hours of acceptance of a request. It was confirmed that this aim was achieved for all cases that can be determined from publicly available information. Rapid arrival on site leads directly to reducing human

suffering (both physical and mental). Therefore, JDR's ability to dispatch a team rapidly is highly regarded.

At the time of the earthquake that occurred in central Java in Indonesia in 2006, a tent was erected on the road in front of the main entrance to Muhammadiyah Bantul Hospital, the general hospital for the region (known locally as the Rumah Sakit Umum Daerah or RSUD) for the provision of medical services. The Medical team provided emergency first aid and conveyed critically injured patients to the RSUD. This role-sharing arrangement enabled the JDR Medical team and the local hospital to work together in an integrated manner. Medical equipment used by the team was subsequently donated to the hospital.

At the time of the earthquake off the coast of Padang in Indonesia in 2009, the Medical team was assigned to the front courtyard of the city office, located around 10 minutes from the Pariaman Hospital (which is also an RSUD hospital). As a result, the JDR Medical team became the medical field office best known to the general public and was the most used of all the facilities provided by medical teams from various countries. However, this also resulted in the Medical team and the hospital operating independently of one another. This clearly showed that there are differences in the degree of collaboration with local medical institutions depending on the location of operations.

The unique sensitivity of the response by JDR Medical team is highly regarded. In field-survey interviews in Indonesia, respondents said that they were deeply impressed by the teams, even in comparison to other countries. Their work was confirmed to have provided psychological peace of mind to patients who were facing disaster conditions and to have eased their suffering.

Accordingly, the activities of JDR Medical team can be regarded as very good with regard to alleviating human suffering (both physical and mental).



Source: JICA(http://www.jica.go.jp/topics/2009/20100317_03.html)

Figure 7: A doctor operates to remove an abscess

(Earthquake off the coast of Padang in Indonesia in October, 2009)

(3) Expert team

Expert team has been dispatched 16 times from April 2004 to the end of March 2012, comprising a total of 115 personnel. These Expert teams provided technical advice and guidance to the government of the affected countries and to institutions conducting aid operations. In many cases, their work included the submission of reports. In some cases, they submitted detailed reports and analysis results to the affected country after returning to Japan. These can be regarded as beneficial to future disaster measures implemented by the government of a disaster-affected countries, etc.

At the time of the flooding in Thailand in 2011, the activities of the JDR Expert team that was dispatched (a fleet of drain pumping vehicles) was very highly praised by the government of Thailand. This was an example of JDR helping directly to reduce human suffering.

Accordingly, we highly evaluate the operations of Expert teams as activities that help to reduce human suffering.



Figure 8: Drainage work (Flooding in Thailand, November 2011)

Source: MOFA http://www.mlit.go.jp/river/kokusai/disaster/thailand_jdr_120104.pdf)

3.2.2 Publicity and recognition

The reception by Their Majesties the Emperor and Empress of personnel who have participated in JDR overseas activities attests to how highly regarded and well acknowledged the work is.

MOFA and JICA conduct a variety of public relations activities with regard to the JDR system and its achievements. For example, JICA features articles about JDR at appropriate times in its regular publications including "JICA Frontiers" and "JICA's WORLD."

Each time JDR has been dispatched in the past, JICA activity reports have mentioned local newspaper articles about JDR activities, confirming that JDR attracts attention in disaster-affected countries and that a certain level of local reporting takes place.

With regard to how information is communicated to the media at disaster locations, MOFA

provides a manual for JDR team leaders. In addition to this media response manual, JICA has put together field operation guidelines. Moreover, information is communicated to the local media through daily press conferences held by the JDR team leader, while the Embassy of Japan in the country also holds press conferences and similar events as needed.

Accordingly, we highly evaluate the public relations activities with respect to the international community, the affected countries, and within Japan.

3.2.3 Derivative effects

(1) Technical Transfer

Through interviews in Japan with personnel who have participated in JDR, it was learned that activities are implemented in accordance with the technical capabilities available at the site of the disaster. Moreover, as part of the Indonesia field survey, the director of the Emergency Response Bureau at the Indonesian National Search and Rescue Agency (BASARNAS) commented that since JDR now has the IEC's "Heavy" classification, they would be grateful if JDR could conduct Search and Rescue (SAR) training in Indonesia. Indonesia is scheduled to take the IEC test in 2014 and would like Japan to act as its mentor. This indicates that the technical capabilities of JDR are highly regarded.

Based on its experience during the 2006 earthquake disaster in central Java, Indonesia, the Muhammadiyah Bantul Hospital set up the Muhammadiyah Disaster Management Center (MDMC) modeled after Japan's disaster relief activities. The MDMC is currently in operation.

Accordingly, we highly evaluate the effectiveness (impact) of activities that go beyond JDR responsibilities.





Source: MDMC

Figure 9: MDMC uses equipment provided by the Government of Japan

(2) Rehabilitation and Reconstruction Assistance

Besides JDR, emergency assistance for overseas disasters also includes material assistance in the form of emergency relief goods and financial assistance through Emergency Grant Aid. All three forms of assistance are coordinated with one another. Further, various ODA schemes follow directly after JDR activities, because seamless assistance after JDR withdrawal is crucial. Several ways of providing this seamless assistance have been devised as lessons learned from JDR activities, and these have been very effective.

For example, Indonesia field survey interviews confirmed the existence of a mobile health clinic at Gadjah Mada University (provided by Technical Assistance of Japan), the MDMC at Muhammadiyah Bantul Hospital (provided by Grant Assistance for Grass-roots Human Security Projects of Japan) and other similar installations, confirming that the dispatch of JDR provided a good opportunity for subsequent seamless assistance.

Accordingly, we highly evaluate JDR activities from the standpoint of reducing damage and providing assistance for rehabilitation and reconstruction.

3.3 Appropriateness of processes

3.3.1 JDR preparedness system

(1) Registration System

With regard to JDR personnel dispatched to disaster areas, the registration systems for Rescue and Medical team personnel are different. Rescue team includes personnel from the National Police Agency, the Fire and Disaster Management Agency and the Japan Coast Guard who are ordered, directed, or requested to take part by the chief of the agency or other authority. These personnel are therefore dispatched as part of their regular work duties. On the other hand, Medical team includes doctors, nurses, pharmacists, etc., who have voluntarily registered in advance with the JICA disaster relief team secretariat, and whose participation is chosen on a case-by-case basis. As Expert team is organized in accordance with the nature of a particular disaster, there is no pre-registration system.

1) Rescue team

The number of persons registered for Rescue teams is 1,659 (as of January 2013). This means that approximately 24 times the number of personnel in the standard JDR Rescue team (69 members) is secured at all times. Accordingly, our evaluation is that the system for registering members of Rescue teams is being implemented appropriately.

2) Medical team

The number of persons registered for Medical teams is 1,138 as of January 2013. This means that approximately 50 times the number of personnel in the standard JDR Medical team (23 members) is secured at all times.

Consideration is given to the gender balance of the team, based on the circumstances in the country to which the team will be dispatched, and many women doctors are included among the registrants. The registrations include a sufficient number of female doctors.

Accordingly, our evaluation is that the system for registering members of the Medical team is being implemented appropriately.

(2) Training

Rescue team training is conducted by JICA with the cooperation of various government agencies, Hyogo Prefecture, and others. Medical team training is hosted by JICA. As Expert teams are organized according to the nature of each disaster, no advance training is conducted for Expert teams.

1) Rescue team

JICA conducts practical training for JDR Rescue team that will be dispatched when major disasters occur overseas. Training takes place at the Hyogo Prefectural Emergency Management and Training Center (in Miki City, Hyogo Prefecture) under the support of Hyogo Prefecture, and at other locations.

JICA hosts comprehensive annual training to ensure that Rescue teams are able to implement search and rescue activities speedily and effectively in response to a request from a disaster-affected countries. By running a contiguous 48-hour simulation of the actual dispatch process, this practical training confirms that team members have the knowledge and techniques needed at overseas search and rescue sites. A further purpose of the training is to foster mutual understanding and teamwork among trainees.

This training complies with INSARAG standards. The training also covers the personal experiences likely to be had by Rescue team members as well as their mental health care. When trainees are actually dispatched, follow-ups are conducted after their return.

Accordingly, our evaluation is that Rescue team training is being conducted appropriately.

2) Medical team

Medical team training is hosted by JICA. Introductory training is given for interim registrants (registration applicants) (twice a year), mid-level training after registration (three times a year), and advanced training to train instructors (irregularly).

Introductory training is normally hosted at JICA institutions in Japan in June and December. As a rule, participants are selected on a first-come first-served basis from among those who register.

Mid-level training is designed to improve the skills of registered Medical team members. Team members are eligible to participate as long as they are registered members. Mid-level training is normally hosted at JICA institutions in Japan in July, November, and February. As a rule, participants are selected on a first-come first-served basis from among those who register.

Advanced training is provided to instructors by means of individualized training conducted overseas, etc. Therefore there is no regular schedule.

Accordingly, our evaluation is that Medical team training is being conducted appropriately.

(3) Participation in International Frameworks

In September 2010, Japan and UNOCHA jointly hosted the INSARAG Global Meeting in Kobe, Hyogo Prefecture. The conference was attended by some 200 search and rescue specialists from 79 countries with Urban Search and Rescue (USAR) teams and eight international institutions³ and the like. The conference featured discussions on topics such as assistance for developing countries to improve their search and rescue capabilities, cooperation in providing assisting for relief operations and quick recovery efforts, cooperation with humanitarian aid organizations, and promoting cooperation within the disaster area.

The INSARAG Global Meeting was the first global meeting to be held, offering the opportunity for search and rescue specialists from various countries to gather in one place. Japan played a leading role in conducting discussions on international cooperation in the area of search and rescue in major disaster settings.

Accordingly, our evaluation is that participation in international frameworks is being conducted appropriately.

(4) Management and Maintenance of Accompanying Materials and Equipment

For both Rescue teams and Medical teams, the materials and equipment used at disaster sites are provided by JICA and taken by the team to the disaster site. The materials and equipment are stored at a privately operated warehouse near Narita Airport under JICA management. The materials and equipment are also used for JDR training and are lent out for use in training by individual government agencies, etc. There is a system in place for ensuring that personnel are familiar with the use of the materials and equipment that have been prepared.

Registered team members carry out maintenance of Rescue team materials and equipment four times a year. After JDR has been dispatched, maintenance of the materials and equipment at the disaster site is on an ad hoc basis. JDR secretariat staff members carry out maintenance of Medical team materials and equipment each time training is conducted, and an inventory of medicines is taken four times a year. After JDR has been dispatched, JICA carries out maintenance of the materials and equipment and replenishes consumables.

Accordingly, our evaluation is that management and maintenance of accompanying materials and equipment is being conducted appropriately.

(5) Sharing of Information after Team Return

³ Membership in INSARAG is open to all countries and organizations with involvement in urban search and rescue (USAR) teams (including USAR organizations and the like at the state and local level).

The names, etc., of member countries and organizations can be checked on the INSARAG USAR Directory (http://vosocc.unocha.org/USAR_Directory/MemberCountriesOverview.asp).

After a JDR returns to Japan from a disaster site, MOFA holds a Post-Return Reporting Meeting that is attended by MOFA, JICA, the National Police Agency, the Fire and Disaster Management Agency, the Japan Coast Guard, the Ministry of Defense, and other relevant organizations. In addition, activity reports are distributed to all JDR members to promote information sharing.

Accordingly, our evaluation is that information sharing following the return of a JDR is being conducted appropriately.

(6) External Evaluation System

Based on "Japan Disaster Relief Team Evaluation Guidelines (Stop the pain)" and "Japan Disaster Relief Expert Team Evaluation Guidelines (Lock the pain)" prepared by JICA, each dispatched JDR member makes a report. These reports are subject to external evaluation.

Accordingly, our evaluation is that an appropriate external evaluation organization has been put in place.

3.3.2 Dispatch of JDR

(1) Dispatch in response to a request

Requests for assistance normally come to MOFA from the government of the disaster-affected countries. When MOFA receives a request for assistance, it consults with the ministries and agencies concerned so as to obtain cooperation for the dispatch of the JDR.

JICA provides support for customs procedures for the materials and equipment to be taken out of the country. There is a system that ensures that customs procedures go smoothly.

Based on a fundamental approach that is designed to minimize the burden on the disaster-affected countries, only a minimum quantity of some of the materials and equipment and means of local transport that are needed for JDR are procured within the disaster-affected countries. As a rule, JDR members do this procurement, but in some cases Japan's diplomatic missions and JICA's overseas offices provide assistance. In the interviews, it was confirmed that, in an actual disaster, all of the relevant entities work together to deal with the situation.

Accordingly, our evaluation is that the process from acceptance of a request through to dispatch is being conducted appropriately.

(2) Activities at the disaster site

Based on past JICA activity reports, the diplomatic missions and overseas JICA offices with jurisdiction over the disaster site have provided support during operations on a 24-hour basis during each past team dispatch. Our evaluation is that the support provided by diplomatic missions and JICA offices was generous.

In the interviews conducted in the field survey in Indonesia, we were able to confirm that the JDR Medical team was highly regarded for coordinating the details of their activities with nearby hospitals

in their area of operations.

Accordingly, we highly evaluate the appropriateness of the JDR process, since the coordination that ensures operations meet the needs of the local area works well.

3.4 Perspectives of diplomacy

At the time of the Great East Japan Earthquake of March 11, 2011, Japan received abundant aid from other countries, including emergency disaster relief. This shows that mutual cooperation when a major disaster occurs is essential for diplomacy. The dispatch of JDR is a form of very visible international assistance. It is the first assistance to be provided immediately following a major disaster and it leads directly to the formation and expansion of relationships of mutual trust. Moreover Japan, as a country that experiences natural disasters frequently, gains direct benefits from JDR activities.

Particularly with respect to disasters that occur in Asia, JDR is able to reach disaster sites in a shorter time than disaster relief teams from Western countries as a result of geographical proximity. From the viewpoint of saving lives, it is extremely important to dispatch JDR quickly once a request for assistance is received from the government of the disaster-affected country or an international organization. The ability to dispatch JDR rapidly, in the end, becomes one measure of diplomacy.

For example, JDR provided at the time of the Sichuan Earthquake in China in 2008 is said to have helped to change feelings toward Japan in a positive direction. This is an example in which disaster relief had a major diplomatic impact as well.

Accordingly, we highly evaluate the diplomatic impact of JDR.

Chapter 4 Recommendations

We recommend continuing and maintaining JDR activities as they are currently being conducted. We also offer six recommendations for additional proactive activities that exceed, in certain instances, the scope of the JDR mission to date as a means to improve JDR and deliver maximum effectiveness. These specific recommendations apply to three different areas of JDR activity: "Policy and Strategy," "Implementation Methods," and "Publicity and Cooperation."

4.1 Policy and Strategy

Recommendation 1: Continuation and succession of assistance that establishes a close relationship with disaster victims

One of the characteristics of JDR clearly noted in many of the field survey interviews conducted in Indonesia was the high regard for the mental care aspect, with JDR personnel forming close relationships with disaster victims. We seldom heard such an assessment with regard to disaster relief teams from other countries, and it can be seen as both one of the major characteristics and one of the major strengths of the work of JDR. This behavior toward disaster victims can be attributed in part to the sensitivity of the Japanese, but also to the fact that part of the training given to trainees in Japan includes "establishing a close relationship with disaster victims." This approach is shared among all JDR personnel.

It is essential to continue this kind of assistance that establishes close relationships with disaster victims and provides mental care. We recommend that the approach of providing assistance that "establishes a close relationship with disaster victims" should be continued and shared among JDR.

Recommendation 2: Continuation and Expansion of Seamless Assistance

Since the earthquake that occurred in central Java in Indonesia in 2006, and with the aim of providing seamless aid, JICA has dispatched teams charged with surveying the need for reconstruction assistance as a follow-up to the work of JDR. These teams quickly identify recovery and reconstruction assistance needs, in part using local information collected during JDR activities, in order to deliver projects that lead to a smooth and speedy recovery.

The provision of seamless assistance in this way makes it possible to respond to the needs of a disaster-affected countries comprehensively and continuously, from initial emergency response through to recovery and reconstruction. Interviews conducted during the field survey in Indonesia confirmed that disaster-affected countries see Japan's disaster relief assistance as comprising not only JDR activities, but also the subsequent recovery and reconstruction assistance. We think the approach of providing seamless assistance in a comprehensive and continuous manner will also ultimately help to increase awareness of Japan's presence.

We recommend continuing and expanding the seamless assistance for recovery and

reconstruction that builds on the valuable relationships of trust forged in the course of JDR activities with government agencies in disaster-affected countries and with local governmental organizations involved in disaster relief, rescue and medical institutions, etc.

4.2 Implementation Methods

Recommendation 3: Improvement and maintenance of materials and equipment procurement system (in particular, review of the use of overseas local human resource network)

The JDR approach is to minimize the burden on a disaster-affected countries by procuring only the minimum necessary quantity of materials and equipment within the countries. Where local procurement is necessary, JDR members do this by themselves as a rule, but in some cases assistance is necessary from Japan's diplomatic missions and JICA's overseas offices. The local procurement capability should be strengthened by including the use of local resources among the options from the very beginning. Overseas local human resource networks should be maintained and expanded. Japan's potential in this respect is particularly high because of human networks developed through the past assistance activities.

We therefore recommend that local human resource networks currently used for emergency procurement be kept in mind as an option for normal use for the local procurement of JDR materials and equipment by JICA's overseas offices in each country. It is also important to ensure full continuity of information about these networks when office personnel changes are made.

Reviewing procurement systems at these overseas sites will help ensure stable procurement of materials and equipment and promote problem-free execution of JDR activities.

4.3 Publicity and Cooperation

Recommendation 4: Review and improvement of public relations (in particular, review of the use of overseas media)

Japanese reporters like to cover different aspects of a disaster from local reporters in the affected countries. Activities that might seem normal to a Japanese audience are sometimes seen as extraordinary by local reporters in a disaster-affected countries and may have news value in themselves. Measures to ensure cooperation with reporters from the overseas media are crucial.

We recommend reviewing public relations strategies for overseas media and, in particular, to consult on the idea of further strengthening collaboration with Japan's diplomatic missions and JICA's overseas offices. We also recommend reviewing the system of public relations in overseas offices, as well as taking measures to reduce the burden of public relations on dispatched JDR personnel if necessary.

Finally, the significance and activities of JDR should be correctly acknowledged domestically in

Japan. Already, MOFA, JICA, the dispatched JDR personnel report various types of information, but to further promote understanding we recommend the continuation and further improvement of domestic public relations efforts.

Recommendation 5: Involvement in the International Search and Rescue Advisory Group (INSARAG) and enhancement of international cooperation

Japan, primarily through MOFA and JICA, has actively participated in various INSARAG meetings, training sessions, and so on. We recommend that Japan continue to pay attention to sharing information within Japan regarding INSARAG activities and while also ensuring that JDR opinions are heard by INSARAG. We further recommend that Japan's involvement in INSARAG to be increased. We also recommend that the JDR Rescue team, which has been certificated as the top IEC "Heavy" classification, to play a leading role in increased international activities among Asian countries. In particular, domestic personnel training and recruitment activities for JDR members should be continued. When necessary, in addition to MOFA and JICA, it is hoped that rescue personnel with linguistic abilities will be trained and sent to INSARAG to discuss the standard deployment of emergency aid and other issues. Furthermore, it would be good to consult on the contribution of technical assistance, such as improving rescue technologies in developing countries. This would be helpful to improve the ability to deal with disasters in developing countries.

Recommendation 6: Implementation of JDR activities while working to maximize their effectiveness

The evaluation of JDR by disaster-affected countries has been shown to be high overall in terms of technical level, response details, and teamwork. On the other hand, it has also been confirmed that, even with qualitatively the same types of activities, the location of the activities and when they start have an impact on local acknowledgement of JDR activities by the affected countries and disaster victims.

Local perceptions of aid by recipient countries will ultimately affect the degree of gratitude and friendly relations between them and Japan. Accordingly, although this is not a primary mission of JDR, improving the perception of JDR is important from the diplomacy perspective as well. Maximizing the effectiveness of JDR will make a good impression in the end.