INTRODUCTION
Disasters can occur at anytime and anywhere, striking anyone. To make efforts for disaster risk reduction is to create a community where its members can live safe and secure lives. Under the theme of disaster risk reduction, every member of the community, regardless of age or sex, will be involved as an actor, providing us with some clues to create a livable community based on mutual help. “Volunteer Hanazono” (represented by Ms Shigeko Matsumoto) was established by the residents of the Hanazono district who experienced the Great Hanshin–Awaji Earthquake. The members cooperate with each other and exercise their ingenuity for community development under the concept of “a community that produces no disaster victims.” Students participating in the Disaster Nursing Global Leader Program also participate in this local activity so that they can deepen their understanding of how to create a community that is prepared for disasters. On November 2, 2014, a forum was held under the themes of disaster risk reduction and safe and secure lives for the community. Ms Marcia Shannon, who has offered guidance on disaster-related initiatives, attended the forum. This Special Contribution presents highlights from the forum. First, we introduce the activities of Volunteer Hanazono for community development, based on the concept of disaster risk reduction. Second, Ms Shannon’s comments on this follow. Third, we present the comments of Ms Miharu Nagasaka from the Bokai Home Care Support Center, who has led the movement on the role of nursing workers in developing “a community that produces no disaster victims.” (Forum planners: Reiko Sakashita and Atsuko Uchinuno)

ACTIVITIES OF VOLUNTEER HANAZONO
Presented by Ms Shigeko Matsumoto, Mr Osamu Gouda, and their associates
Volunteer Hanazono

Establishment of Volunteer Hanazono
We, the residents of the Hanazono district, established Volunteer Hanazono in 1991 with the hope of inspiring collaboration within, and development of, the community. Our activities of helping each other after the Great Hanshin–Awaji Earthquake later developed into a “disaster risk reduction and mutual help network.”

How Volunteer Hanazono is organized
Activities of Volunteer Hanazono include the development of disaster risk-reduction networks, home visits, management of “Hanazono Hiroba” as a place for communication among the members, events at Fureai Salon, and ground golf events as an opportunity for communication between children and elderly people. There are 178 members (as of August 2014). Last year, the system of “volun-soldier” (combination of the words “volunteer” and “soldier”) was organized to promote the development of disaster risk-reduction networks. Volun-soldiers work as an “8th Man” (name of a Japanese anime superhero) under the following eight themes, each led by a representative. To foster the next generation, children also participate in the activities as junior volun-soldiers.
Activities of Volun-soldiers

1 Help me in an emergency—registration of those who need support

The registration of people who need support is in progress. Volun-soldiers provide them with a “help-me badge,” register necessary information, and connect them to emergency services or police when necessary. Community members register themselves as a “person who can provide support,” “person who needs support,” or both. During ordinary times, as well as in an emergency, they help each other with small problems (replacing a light bulb, etc.), thereby establishing a mutual help network.

2 Try my hardest—recruiting and training volun-soldiers

Recruiting and registration of those who can provide support are in progress. Each community member is blessed with various talents. Initiatives are undertaken to make the best of such talents and ensure safe and comfortable lives for community members. Their talents are utilized in a wide variety of support activities, such as door-to-door visits, response to small problems in the neighborhood, and obtaining information about elderly people’s physical and mental health, as well as their living conditions. According to the content of the information obtained, volun-soldiers may introduce them to appropriate insurance, medical, or welfare service organizations if necessary. Information gathering, or finding people who need support, is also considered as an important duty.

3 Consultation and support for nursing care and health maintenance

Ms Nagasaka as a nurse, along with other members, offer care prevention classes on a regular basis so that elderly people can maintain their health to lead enjoyable and active lives without having to receive care. The content includes exercises for improving strength of the lower half of the body to prevent falls, which anyone can easily do anytime and anywhere. Consultation services on care prevention, as well as on problems of caregivers and recipients, are available. Necessary support is also provided, including formulation, evaluation, and review of care plans.

4 Hazard map to protect community members’ lives

To prepare for emergencies, such as earthquakes, fire, typhoon, and floods, we made a hazard map that indicates hazardous zones and safe routes to facilitate evacuation of people with disabilities, people in wheelchairs, elderly people, pregnant women, babies, and toddlers. Many of the maps provided by governments are not user-friendly, such as showing far away evacuation centers that are difficult to reach for elderly people. Considering this, our hazard map for the Hanazono district indicates more than one accessible and safe evacuation center for every community member. Evacuation routes are clearly shown, so that vulnerable people (elderly people, children, and people with disabilities) can reach evacuation centers safely and surely. The routes were decided after actually pushing wheelchairs along and walking them (Figs. 1 and 2). Educational activities have been also undertaken, encouraging people to decide how to evacuate in an emergency and confirm necessary communication information.

5 Home visit activities

In preparing for disasters, it is important to establish networks during ordinary times and confirm the status of the community members. To create a comfortable living environment for everyone, volun-soldiers regularly visit and support those living alone, elderly people, and other vulnerable people.

6 Systems for safety confirmation and support for those living alone, elderly couples, and vulnerable people, in an emergency

Systems are being developed to confirm the safety of, and provide support to, those living alone, families with only two members, and other vulnerable people in an emergency.
7 Greeting campaign and orange cap activity

Exchanging the greetings “good morning” and “hello” is the beginning of disaster risk reduction and mutual help. A campaign to greet people we meet on the streets is in progress. Greetings are also promoted in an “orange cap activity” that aims to ensure the safety of children commuting to schools. (Orange cap activity: volunteers wearing orange caps stand on school-commuting roads in the district when elementary school children commute to and from school, and exchange greetings and words with them while watching for their safety.)

8 Workshops to promote disaster risk reduction and mutual help

To protect the precious lives of community members, disaster drills are often held, including those involving people with disabilities. Workshops on nursing care, disaster risk reduction, dementia prevention, care prevention, and monitoring activities are offered.

MENTAL PREPAREDNESS FOR DISASTERS IN A COMMUNITY

Presented by Ms Marcia Shannon, RNCS, MSN
Saginaw Valley State University, Michigan, USA

Emotional Responses of Disaster Victims and Psychological First Aid

During disasters, people show various responses, including confusion caused by inconsistent information, fear of exposure and infection, mass loss and grief, exposure to traumatic images, not being able to meet their loved ones, and not being able to say goodbye. In the case of adults, they undergo diverse emotions, such as frenzy, anger, jitteriness, dissatisfaction, fear, hypoesthesia, sense of guilt, and indifference. In regards to thought processes, people undergo loss of concentration, difficulty in making decisions, forgetfulness, self-abuse, and lower self-esteem. Physical responses include ongoing crying, dangerous behaviors, and deterioration in self-care. Ms Shannon talked about social confusion, business confusion, influence on children, and infrastructure issues, as well as the effect of Psychological First Aid (PFA) in disasters.

Strengths and Challenges of the Hanazono District

Based on the Psychological First Aid Core Actions, assessment and advice on Hanazono’s activities have been provided.

1 Contact and engagement

Seemingly easy, this is one of the most difficult among the eight core actions. In Hanazono, systems to enhance
mutual help have been established through local activities, such as the greeting campaign, monitoring activity, and home visits.

2 Safety and comfort
The goal is to enhance immediate and ongoing safety and provide physical and emotional comfort. This community is well-prepared for disasters through workshops and activities during ordinary times, such as making a hazard map for safe evacuation. Community members can easily obtain a feeling of mental safety through existing local networks.

3 Stabilization
The goal is to calm distraught survivors after disasters, and have them return to normal life as soon as possible. In this community, people who provide support recognize their responsibilities. This may lead to a sooner stabilization of life.

4 Information gathering
The goal is to identify immediate needs and concerns, gather additional information, and tailor PFA interventions. In this community, registration of those who can provide support and who need support is in progress, and community members monitor those living alone and other vulnerable people. Thus, basic information gathering has been accomplished. Consequently, specialists who come from other districts to provide support after a disaster will be able to access necessary information in a short period of time.

5 Practical assistance
Psychological First Aid offers practical help to survivors in addressing immediate needs and concerns. It encourages survivors, gives hope to them, and restores their dignity. This community has a foundation that makes it easier for outside specialists to offer practical assistance.

6 Connection with social support
The goal is to help establish brief or ongoing contacts with primary support persons, such as family members and friends, and to seek out other sources of support. This community has cherished local connections during ordinary times, and boasts rich local networks. In addition, registered information includes that of members’ families who live outside of the community. These will be useful in establishing social connections.

7 Information on coping
Psychological First Aid provides information about stress reactions and coping to reduce distress and promote adaptive functioning. This community offers workshops on disaster risk reduction during ordinary times, and the members have gained necessary knowledge. Accessible resources are described on the hazard map as well.

8 Linkage with collaborative services
The goal is to introduce available services to survivors. The local hazard map includes contact information for the fire department, police, and evacuation centers. In addition, having established regular meetings among parties involved and community members, as well as a cooperative framework with specialized institutions and governments, is a great strength.

The community’s advanced initiatives for disaster preparedness are wonderful. What then about individual preparation? How many of the members have prepared emergency kits? Enhancing disaster preparedness on a personal level, as well as providing support for this, will be a future challenge for this community.

THE ROLE OF NURSING WORKERS IN DEVELOPING “A COMMUNITY THAT PRODUCES NO DISASTER VICTIMS”
Reported by Ms Miharu Nagasaka, RN
Bokai Home Care Support Center

Starting Point of My Activities
What is the role of a nursing worker in a community? I have been engaged in local activities for 20 years with this question in mind.

The starting point of my activities was the Great Hanshin–Awaji Earthquake that occurred on January 17, 1995. I was at a loss for words when I saw the catastrophe and walked around the affected areas. At the same time, I felt something inside me had been changed. My first mission was to provide support for those living in temporary housing. At first, they did not even open their doors. As I visited them every day, they began to open their doors slightly—five centimeters, ten centimeters, and finally, they opened up their doors together with their minds. I wanted to protect the lives that survived. However, having insufficient medical equipment, all I could do as a nurse was to perform blood pressure checks and lend an ear. Even so, the affected people expressed relief when they learned that I was a nurse. At that time, I did not understand what it meant.

Two years after the earthquake, mature communities based on mutual help had been formed in temporary housing, where elderly people kindly watched over a
small number of children with care. I was deeply moved at the scene and was determined to develop a town like this. Then I became driven to work energetically around the communities. When I began joint activities with community members, I found many people who needed medical care. At the same time, I met many local people who were energetically involved in their activities, who were inspired to help others after earthquake. Until then, I had thought it was medical and nursing care that cured diseases. Actually, however, local activities had a power stronger than that of medical and nursing care, and I often saw patients recovering from diseases that medicine alone could not deal with.

### Activities That Utilize People’s Various Talents

I reflected on the role of nursing workers in the joint activities with community members. The goal for them is to create a community where they can live in comfort. Yet, when they face a situation they have never been in, they feel cornered by an anxiety of uncertainty. But what if there were specialists and experienced people around, whom they could consult with? The disaster risk-reduction network activities examined this. We established Bokai home care service zone councils, divided by junior high school districts, at which discussions on local problems to find solutions are held once every 2 months. Diverse members participate in the councils, including residents’ associations, specialists (staff of medical institutions and nursing care facilities), companies, and governments. Ms Matsumoto from Volunteer Hanazono takes part in this activity by producing and performing plays with community members several times a year to share problems and solutions. When problems and solutions are shown through a play, it becomes easier to win the cooperation of community members. Many dreams expressed in the plays have come true.

I am sure that the knowledge, skills, and experience of medical workers will be necessary to develop a community that produces no disaster victims. I also believe that when there are shared with community members, a tremendous power will be exerted for disaster risk reduction. This is why I host workshops.

### Role of Nursing Workers

The following are important in the roles of nursing workers.

1. **Protecting life**

   Based on a strong faith, nursing workers can clearly show the purpose of protecting life to community members. Nursing workers can deal with people regardless of their physical and mental conditions. In addition, nursing workers can also deal with the problems of leaders of local activities, and serve as good consultants.

2. **Coordination**

   Nursing workers can judge a person’s physical, mental, and social condition, conduct hazard prediction, and turn over the case to appropriate institutions or persons if necessary. Volunteers in Hanazono who know the community well, bring cases of people in abnormal situations to us specialists. We assess the cases and then turn them over to necessary institutions or services. By cooperating with the service zone councils that I mentioned earlier, we are now able to deal with more difficult problems.

3. **Educational support**

   It is also important to convey knowledge on health and medical welfare widely to the community members and have them acquire practical abilities. Our workshops include not only lectures but also hands-on learning so that participants can learn medical skills. The other day, we conducted a disaster drill in the community. People in wheelchairs or with visual impairment living in the community actually participated in the drill. It served as a good opportunity for everyone to learn what support they needed.

4. **Acting together**

   What is important in local activities is acting together. By doing so, we can understand the local characteristics, living conditions, culture, and traditions, as well as the community members’ way of thinking, weak points, strengths, and dreams. When medical personnel take steps together with local community members, they feel they can have the courage to take action, even in an emergency, thereby becoming more active. The participants will gain great confidence and become more highly motivated.

5. **Endorsement of local activities**

   A volunteer leader said “Disaster risk reduction is the ultimate monitoring of people’s lives.” Specialists should support this idea, clarify its supporting evidence, and speak of their dreams with community members. In addition, when a specialist endorses and praises local people’s activities, they will feel confident and continue more energetic activities. A dream that seemed difficult at first will turn into a feasible one shared by the entire community. I believe that recognizing and endorsing local people’s activities are also our role.