

Tips on Health Care Volunteer Activities by Nurses in the Event of Disaster (Emergency and Medium-term : Support in phase of evacuation) ~To a month after a disaster~

① Approach to Disaster Area

1) Preparation

- Personal preparation
Clothing: Light, safe, easy to put on and take off, armband (which indicates volunteer nurse)
Kits : Daily necessities (sleeping bag, foodstuffs, water, etc.)
Equipments necessary for your activities (map, communication tools, medical instruments [blood pressure gauge, stethoscope, etc.], recording chart, etc.)
- Prepare clothing and kits that suit the type and phase of the disaster
E.g., In the case of flood : take work gloves, rubber gloves, goggles, surgical masks, eye drops, gargle, and rain boots
In summer : take kits that prevent heatstroke (hat and salt, etc.)
- Check your volunteer insurance
- Regard to the duration of activity (considering relations with disaster victims and the volunteers' fatigue, it is desirable to change with other volunteers after working for about a week)
- Coordinate schedule with family and workplace

2) Information Gathering

Information to be collected

- Situation of disaster area
- Support system (information obtained beforehand by referring to □ Assessment of Devastation)
- Approach (where in the disaster area you are headed for)
⇒ Check if a disaster management office and a volunteer center have been set up, make sure where these facilities are located, and what kinds of support they provide

Information resources

- Personal networks (acquaintances, friends)
- Government agencies such as the public health center, municipal offices, and health center
- Contact the disaster management office to grasp the overall situation

Means of information gathering

- Telephone, the Internet, radio, newspapers, etc.

② Assessment of Devastation

1) Situation of Disaster Area

- Local characteristics of the disaster area (urban or rural area, transportation, social infrastructures, etc.)
- Characteristics of residents of the disaster area (age distribution, networks among residents, inhabitants organization, residents' mentality, etc.)
- Type and scale of the disaster
- Extent of damage (human and property damage, damage to utility lifelines, etc.)
- Living environment (security of privacy, etc.)
- Hygienic conditions (cleaning, ventilation, availability of drinking water, toilets, etc.)
- Medical needs (first aid treatment, chronic illnesses, infectious diseases, mental care, etc.)
- Health and welfare services available (adult day-care centers, home helper stations, vocational aid centers, etc.)
- Contents and status of distribution (to what extent foods, water and other daily necessities are supplied)
- A base / the location of public health practice to have jurisdiction over a disaster area

2) Condition of Disaster Victims

- Family members (check whether each disaster victim lives alone or with other family members and if they have any relatives)
- Living conditions (diet, sleep, job, mental support [purpose in life, hobbies, pets, etc.], etc.)
- Living environment of disaster victims (home, evacuation center, changes from before the disaster)
- Health conditions (need for medical care, chronic disease management, etc.)
- Neighborly relationship
- Status of use of social infrastructures (nursing-care insurance · welfare services, etc. : day-care centers, functional training, rehabilitation for disabled children etc.)
- Feelings and sentiments (anxiety about the future, fear, things lost (home, family, etc.))
- Identify vulnerable populations
 - Vulnerability due to the target's attributes...Infants, pregnant women, elderly persons, disabled persons, elderly persons living alone, persons in need of nursing care, foreigners without Japanese ability
 - Vulnerability due to illnesses...Those heavily dependent on medical care such as those with intractable diseases, those bedridden, those with psychiatric disorders, chronic illnesses, tuberculosis, dementia, or persons on artificial respiration or oxygen therapy at home

③ Care for Disaster Victims

1) Support of the evacuation center

Living-Environment-Related Support

- Temperature control and ventilation, consideration of lighting and noise
- Clean living space including toilets and garbage disposal
- Giving advice about how to care for pets
- Separate smokers from non-smokers (set up smoking areas)

Dietary Support

- Coordinate a food menu for those who have special dietary requirements due to age, physical conditions or illnesses e.g. elderly persons, infants, those feeling sick or having digestion problems, those suffering from hypertension, diabetes or other chronic illnesses, dialysis patients, etc.
- Help evacuees drink a sufficient amount of water
- Help those who need feeding care

Support for Cleanliness and Excretion

- Provide bathing support for those who need care (newborn babies and elderly persons)
- Dry-bathe and shampoo those who cannot take a bath (because of being injured or bedridden)
- Provide excretion care (including diaper change)

Support for Restful Sleep and Privacy

- Secure enough space
- Supply partitioning kits
- Secure A place of a change of clothes, break rooms and nursing room

Support for Recreational Activities

- Create opportunities to adjust daily rhythms. (waking up · going to bed, cleaning the entire living space all together)
- Encourage regular exercise to prevent lack of exercise
- Encourage such recreational activities as hiking and walking on holidays
- Secure places and opportunities for children to play

Psychological Support

- Enlighten disaster victims on post-disaster stress reactions
- Help disaster victims deal with any pent-up anger they might have
- active listening
- Make the rounds on a regular basis, talk to each victim
- Locations and opportunities for gathering and sharing

- You may meet some people who say, "I'm OK." When you talk to these people, consider to what extent they have been affected and what their family situations are.
- Some people may reject you. Do not push yourself to relate to them. Just tell them, "Please let me know if there is anything I can help with," and leave them for the time being.
- When you see a disaster victim busy working or tidying up the debris, work with him/her.

Health Management

- Health checkup of disaster victims
- Cope with diseases that related disaster (pneumonia, economy-class syndrome, etc.)

Prevention of Infectious Diseases (common cold, influenza, food poisoning, scabies, tuberculosis, diarrhea, infectious diseases mainly affecting children such as chicken pox, measles and mumps, etc.)

- Encourage to evacuees to regularly wash their hands and gargle, ventilation, teach directions for disinfectant at the time of a flood
- Provide information concerning vaccinations and speak to those who might need to be vaccinated
- Dispose of foods past the use-by date

Support of Vulnerable Populations

- <In case of children> Provide ways of playing (make-believe play, story-telling, drawing/painting, etc.)
- <In case of seeing and hearing disabled persons> Introduce sign-language volunteers and guide helpers to those in need
- <In case of foreigners without Japanese ability> Introduce foreign residents to foreigners' support centers
- <In case of chronic illnesses etc.> Help them take their usual medicines, inform them of consulting a doctor, and provide them with necessary care. Cooperation with the medical team

2) Support for Management of the Evacuation Center

- Professional/ general volunteer makes each role clear and coordinate a role and share it
- Coordinate responsibilities with volunteers in various activities such as washing, cooking and bathing
- Protect disaster victims from the media
- Provide and management of information at the evacuation center
⇒ Provide necessary daily-life information (how to place and use items in the evacuation center, how to dispose of garbage, how to use the toilet, how to wash hands and gargle, supply of foods and other daily necessities, information on various events and programs, government announcement, etc.)

3) Support for Those who Cannot Come to the Evacuation Center

- Provide information
- Visit them and talk to them
- Give them the same kind of support as in the evacuation center

- Ask them specific questions such as: "Do you sleep well?", "Do you eat?", "Do you take your usual medications?"
- "How is the condition of your house? (There is a case to hear so that it influences health)"
- Ask questions of each disaster victim.
- Encourage disaster victims to do light exercises.

UNIVERSITY OF HYOGO, Graduate School of Nursing
The 21st Century Center of Excellence Program
『Development of a Center of Excellence for Disaster Nursing in a Ubiquitous Society』
The Professional Nursing Support Network Project (2004 making, 2007 revision)
13-71 Kitaojicho Akashi, Hyogo 673-8588 JAPAN
The 21st Century Center of Excellence Program Office
TEL: +81-78-925-9610 FAX: +81-78-925-0872

**Tips on Health Care Volunteer Activities by Nurses
in the Event of Disaster**
(Emergency and Medium-term : Support in phase of evacuation)
~To a month after a disaster~

④Support for Local Supporters
(Local supporters are also disaster victims)

- 1) Do not criticize local supporters but discuss problems with them
- 2) Respect the pace in which local supporters work and support their decision-making
 - Give assurance to local supporters with respect to their judgments
 - Secure a system in which local supporters can take rests
- 3) Having conferences and making other opportunities to share experiences
- 4) Check local supporters' health (living conditions, sleep, diet, mental conditions, change of physical conditions, etc.)

**⑤Essentials of Community Health Nursing
Activities in the Disaster Area**

1) Activity Principles

- The major objective of activities is to keep survivors as healthy as they were before the disaster
- Regard talking with each disaster victim as important
- Define the specific activities to carry out and work in a systematic manner
- Ensures cooperation not only with medical workers but also with health, welfare and educational stuffs

2) Activities after the Initial Operation Phase

- Disaster victims tend to be isolated after leaving the evacuation center. Be sure to visit them door-to-door after they return their home
- Promote activities to identify victims' health needs
- A local support network will be necessary from the middle phase of activities and thereafter

3) How to Conduct and Develop Activities

- In conducting activities, be sure to identify and integrate the needs of local residents and reflect these needs in future activities
- Be sure to communicate information obtained from the disaster management office to all disaster victims. When disaster victims can't get information, tell to the disaster management office

⑥Your Conduct in the Disaster Area

1) First thing to Do in the Disaster Area

- When you reach the disaster area, register yourself to the volunteer center
- Check or buy volunteer insurance
- Wear a name tag or some other item that identifies you by name
- Introduce yourself as a nurse
- Express words of sympathy for the local people

2) How to Act and Behave

- Work with local people (prefecture public health nurse, municipal public health nurse, local leaders, general local volunteers, etc.)
- To ensure your own security, work with two or more members
- To ensure a sense of security on the part of disaster victims, develop a system to send the same nurse to the same disaster victim, if possible
- Discuss with a local contact person (e.g., leader of the residents' association) and build good relations with him/her
- Provide care in cooperation with the first-aid station and the medical team
- Team up with local organizations (residents' association, women's association, youth association) in conducting activities
- Work with the local public health nurses
- Hold and participate in conferences (participants: government officials, general volunteers, etc.)
 - Conferences provide opportunities to share information and to make sure the courses of activities should proceed to confirm how to work
 - Conferences also provide opportunities for local supporters and outside supporters to debrief each other
- Record conscientiously and leave it to the disaster area for needs collection and continuation support of disaster victims
- Hand over your work for continuous support

3) Attitude and Preparedness

- Provide information about victim support service after having confirmed accuracy
- In conducting activities, understand the characteristics of the disaster victim's psychological recovery process
- Positive actions, go out and provide support to those in need
- Focus on immediate needs of disaster victims when you listen to what they have to say and support them
- Modify your role flexibly to cope with changing situations and needs
- Remember that what you want to do for disaster victims is not always what they need
- Supporters should not criticize local supporters

4) Care of Yourself

- Secure your own personal safety
- Mind to control yourself. Volunteer nurses tend to overwork themselves due to the emotional uplift.
- A limit of activity is around 1 week because there are your fatigue and relations with local peoples

UNIVERSITY OF HYOGO, Graduate School of Nursing
The 21st Century Center of Excellence Program
『Development of a Center of Excellence for Disaster Nursing in a Ubiquitous Society』
The Professional Nursing Support Network Project (2004 making, 2007 revision)
13-71 Kitaojicho Akashi, Hyogo 673-8588 JAPAN
The 21st Century Center of Excellence Program Office
TEL: +81-78-925-9605 FAX: +81-78-925-0872