Information exchange to strengthen disaster nursing collaboration: Sharing information about various roles and activities during disaster nursing in Japan

Megumi ARISAKA¹, Maki NAKAJIMA², Chikako SUGAWARA³, Yuki TAKAMURA⁴, Yukimi CHO⁵, Mayumi KISHINO⁶ and Asuka MUROYA⁷

¹Graduate School of Nursing Art and Science, University of Hyogo, Akashi, Hyogo, Japan
²Graduate School of Nursing, Chiba University, Chiba, Japan
³Graduate School of Health Care Science, Tokyo Medical and Dental University, Tokyo, Japan
⁴Medical Hospital of Tokyo Medical and Dental University, Tokyo, Japan
⁵Saijo Central Hospital, Saijo, Ehime, Japan
⁶Head Office - Disaster Psychiatric Assistance Team, Tokyo, Japan
⁷Aiiku Hospital, Tokyo Japan

As disaster frequencies, intensities, and complexities are increasing worldwide, people are suffering from various resulting effects and damage. The Great Hanshin-Awaji Earthquake of 1995 in Kobe, Japan, resulted in 6,432 deaths and 43,792 injuries, causing chaos and unpredictable situations for citizens, the local government, medical facilities, and nurses. After the earthquake, nurses provided care for the victims, and have been providing care thereafter at public restoration housing in Kobe. Twenty-three years on, disaster nursing has emerged as a new health discipline. Nowadays, opportunities and choices to learn disaster nursing are available for nurses in Japan; for example, at the graduate, Masters, and Doctoral levels. Most Masters courses are related to the Certified Nurse Specialist (CNS) disaster nursing qualification, and others are focused on training medical staff members of the Japan Disaster Relief Team (JDR) and nurses from the Japanese Nursing Association so that they can be dispatched to disaster sites to provide specialized nursing care, when appropriate.

All nurses have a common goal—to protect people’s lives and health. However, the question is, “what avenues are available for nurses to collaborate with other nurses with various education, training, and backgrounds?” At the 20th Annual Conference of the Japan Society of Disaster Nursing (JSDN) held in Kobe in August 2018, the authors proposed an information exchange focused on sharing information about various roles and nursing activities in disaster situations from a viewpoint of CNSs, doctoral students and JDR members. The aims of this information exchange were to understand each other’s backgrounds and objectives, to build networks, and to take the first step toward becoming involved in disaster nursing.

PRESENTATIONS BY PEOPLE FROM THREE DIFFERENT BACKGROUNDS

Certified Nursing Specialist in Disaster Nursing

The first CNS in Disaster Nursing was registered in December 2017, and their mission was to provide nursing care with limited material and human resources by analyzing hazard characteristics and coordinating and collaborating with other professionals, local governments, etc.

Cho, a CNS in Disaster Nursing, reported on the activities at a shelter after the Kumamoto Earthquake of 2016, where she had supported one of the local public health nurses who was stressed, fatigued, and worried that in the future, public health nurses would not know enough about the recovery process. Cho explained the process and management at the shelter and cared for her with dignity so that she could stay healthy. Cho believed that supporting public health nurses could strengthen the

Correspondence: Megumi Arisaka, University of Hyogo, 13–71 Kitaoji-cho, Akashi 673–8588, Japan. E-mail: meguike19781227@gmail.com
Received 15 September 2018; accepted 12 November 2018.

DOI http://doi.org/10.24298/hedn.2018-0014
local capacity to provide services and promote survivors’ safety.

**Doctoral student enrolled in the Disaster Nursing Global Leader (DNGL) Degree Program**

The learning of concept analysis and development is crucial in doctoral nursing education. One of the DNGL students, Sugawara, introduced her work on concept analysis by discussing the “Moushiwakenasa” concept in Japan, which means being regretful or remorseful in English. She explained her former research, wherein it was revealed that the personnel working in the local government at the disaster site had felt “Moushiwakenasa” for the survivors. She found a way to help them stay healthy and working towards “Build Back Better” in the future, clarifying the concept that led to the development of disaster nursing as an academic discipline, and which led to more appropriate intervention and development of the system or policy recommendations.

**A medical member from the Japan Disaster Relief Team**

The medical team within the JDR is a Japanese government organization that started offering support to disaster-affected countries in the late 1970s because the JDR had experience in responding to handling earthquakes and typhoons in Japan. The team was certified as a type 1, 2 and special cell of the Emergency Medical Team by the World Health Organization in 2016.

Takamura, a chief nurse and of medical member in the JDR, introduced the activities that supported the local hospital in Nepal after the Nepal Earthquake of 2015, whereby the JDR medical team organized a workshop for the nursing staff on infectious disease control and hygiene, and on helping local nursing staff to care for patients while respecting the tenets of Nepal culture. These activities gave the local nursing staff knowledge about disaster preparedness and effective responses, and while the JDR helped the hospital, as a result of which they could rest.

**RECOGNIZING THE IMPORTANCE OF NURSING COLLABORATION**

Approximately 100 people including nurses, academics, and nursing students participated in the information exchange (Figure 1 & 2). Participants recognized the importance of collaborating with nurses from different backgrounds. For example, a CNS was strong in providing direct nursing care to survivors or responders on site; doctoral students could conduct research to promote policy recommendations or develop disaster nursing; and JDR medical team nurses play an important role in providing medical and nursing care while being respectful of cultures. With these different strong points, nurses can easily collaborate and consult to protect and improve the lives and health of survivors at disaster sites.

**SCOPE**

Through this information exchange, it was clarified that nurses are seeking detailed information on how to study disaster nursing or participate in training courses to further enhance their skills. As Japan suffers from more and more disasters, if nurses have disaster nursing knowledge and skills, it could strengthen their local disaster response, recovery, mitigation, and preparedness, which can strongly protect people’s lives and health.