

# JAPAN

## Psychosocial impacts of prolonged disaster displacement

SPOT  
LIGHT

The combined impacts of a devastating earthquake and tsunami on 11 March 2011, followed by radiation leaks from the crippled Fukushima Daiichi nuclear power plant, displaced more than 470,000 people from their homes.<sup>147</sup> Major recovery operations have made good progress in most of the affected municipalities, but some areas have lagged behind. Six years on, the disaster is far from over for around 124,000 people still living in displacement.<sup>148</sup>

The physical and mental health impacts of long-lasting displacement have been widely observed among evacuees. They are strongly associated with the dislocation from close-knit communities and familiar surroundings, the loss of their homes and livelihoods and the separation of families caused by their displacement. People

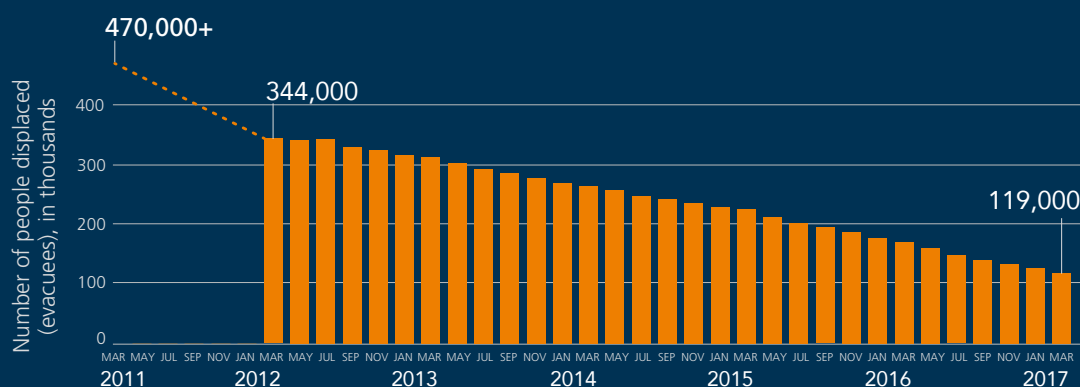
evacuated from Fukushima because of nuclear radiation suffered from higher rates of post-traumatic stress disorder (PTSD) and depression for a longer period of time than those affected in other prefectures.<sup>149</sup> Many evacuees were still suffering from sleeping disorders, anxiety, loneliness and depression five years later.<sup>150</sup>

In the other prefectures devastated by the earthquake and tsunami, the incidence of mental health problems also remains high. A recent survey of residents from Miyagi and Iwate found 14.3 per cent were still suffering psychological distress in 2015, an overall decline from 18.4 per cent in 2011 but still above the national average of 10 per cent. Among women still living in temporary housing complexes, the rates of PTSD and insomnia were significantly higher.<sup>151</sup> Reclu-

Along the Fukushima coast, enormous walls are being constructed to reduce the danger of tsunamis similar to that of 11 March 2011. Photo: IFRC/Masaya Noda, February 2016



Figure 1.21: Total number of people displaced by the Great East Japan earthquake disaster, March 2011 to March 2017



Source: Japan Reconstruction Agency situation reports, available at [goo.gl/cKLVE0](http://goo.gl/cKLVE0)

sive behaviour among evacuees living in temporary housing units has been linked to their loss of employment and sense of purpose.<sup>152</sup> Social stigma, including the bullying of schoolchildren, has also been a problem for IDPs from areas of Fukushima affected by radiation.<sup>153</sup>

Older people have been particularly vulnerable to the impacts of prolonged and protracted displacement. The residents of temporary housing units, the majority of whom are older people, have gradually been relocating to more permanent public housing or rebuilt private homes, but those left behind report feeling increasingly isolated.<sup>154</sup> Their isolation has contributed to a growing number of stress-related deaths and the phenomenon of *kodokushi*, or people dying alone and unnoticed.<sup>155</sup> As of March 2014, 90 per cent of an increasing number of evacuees who died of poor health while living in temporary housing were people over the age of 66.<sup>156</sup> In Fukushima, the number of deaths associated with the long-term effects of the disaster exceeds those caused by its direct impacts.<sup>157</sup>

The effects of displacement following the 2016 Kumamoto earthquakes follow a similar pattern. Twelve months on, health problems brought on or made worse by prolonged displacement are already responsible for more deaths than those caused by the more direct impacts of the disaster.<sup>158</sup>

These unquantified but profound social, psychological and health consequences of displacement show that “soft” protection and support measures that improve people’s mental, physical and socioeconomic resilience during displacement are as important as “hard” investments in infrastructure reconstruction and environmental remediation. They also make it clear that those who remain displaced for long periods tend to be the most vulnerable, without the means, capacity or support networks to forge their own paths.

Wherever displacement occurs, older people and other vulnerable groups with specific needs, such as women and children, should be prioritised from the start of any response. In areas at risk of disasters, they should also be considered and prepared for in advance. Mitigating and addressing the issues that drive and prolong displacement and worsen its impacts are vital to ensure that people affected by disasters are able to recover fully, and that development progress for the country as a whole leaves no one behind.