Proposal 2	Medicine and welfare		Local governments, institutions concerned
Construction of networking and cooperation systems between local governments and medical and welfare institutions			
➤ Refer t	to initiatives 3, 10, 11		or Disaster Risk Reduction priority action 3 (investing in

economic, social, cultural, and environmental resilience)

- O Prior to the disaster in Iwate Prefecture, medical and welfare institutions, such as Iwate Medical University, Iwate Medical Association, and the Iwate Prefectural Council of Social Welfare, had already been building networking and cooperation systems as part of their regular business. After the disaster, these systems proved effective in the carrying out of medical support on the ground, and saw the establishment of the Iwate Disaster Medical Support Network, which dispatched medical teams based on local demand, as well as supporting medical institutions and establishing temporary clinics in Rikuzentakata.
- O Iwate Prefecture has also promoted, through cooperation between public, private, and academic institutions, the Disaster Relief Welfare Team, which provides welfare support to the elderly, disabled, or other persons in need of support, and has made steady progress in various fields regarding emergency response preparedness.
- O Cooperation and partnerships related to emergency response operations between local governments, medical/welfare institutions and groups need to be built before disaster strikes in order to give support to survivors; in particular, specialist support or support for a wide range of survivor needs that, in the event of a disaster such as a major earthquake, local governments would not be able to handle alone.



A medical team dispatched to affected areas



Disaster Relief Welfare Team training