

IV. The Next Fourteen Hours

A. Assistance from Neighboring Areas

Neighboring Osaka and Kyoto were also shaken by the seismic event and sustained some damage and casualties. But the initial rescue and firefighting activities lasted just a few hours. People in Osaka, Kyoto (located east of Hyogo Prefecture), Okayama (west of Hyogo) and Tokushima (south of Hyogo across Osaka Bay) watched television and saw the magnitude of damage in Kobe. Emergency personnel as well as medical doctors and nurses were put on standby. The NFA alerted firefighters. The NPA ordered neighboring Prefectural Police Headquarters to send police teams to Hyogo Prefecture.

At 10:00 a.m. the NFA ordered that fire reconnaissance helicopters outside Hyogo Prefecture be dispatched to Kobe to assist local authorities with emergency evacuation of the seriously injured and the transportation of necessary relief items. At 10:00 a.m. the first police team from Tokushima reached Awaji Island and immediately started rescue operations. At 10:15 a.m. SDF troops stationed in Himeji (a city located 50 km west of Kobe) started rescue operations in Kobe. At 11:10 a.m. a police team

from Kyoto reached Itami City for rescue activities. At 11:10 a.m. fire squadrons from Sanda City (north of Kobe in Hyogo Prefecture) reached Kobe and started firefighting. By noon 2,418 policemen had been brought into Hyogo Prefecture from neighboring police headquarters. At 13:40 hours, ten fire squadrons from Osaka arrived in the Nagata Ward of Kobe. Hour by hour, the number of police and fire service teams arriving in Hyogo Prefecture rose sharply.

By 8:23 a.m. the Osaka-Senri Critical Care Medical Center (one of the main emergency hospitals) had received the last seriously injured patient in Osaka. Emergency hospitals in Osaka, Kyoto and Okayama prepared to accept those with serious injuries and made available all their emergency operations rooms. At 10:42 a.m. the Osaka-Senri Medical Center dispatched its special ambulance to Amagasaki in Hyogo Prefecture to pick up one patient in serious condition. The director expected that ambulances from Hyogo would be bringing more patients into his hospitals, but during the next two hours there were none. He decided to send his ambulance to Hyogo with medical doctors and nurses on board and a full load of medicines in order to pick up patients and/or treat them on the site.

The Japanese Red Cross Society (JRC) alerted its chapters in neighboring prefectures. By 10:15 a.m. a medical team from Okayama had reached Kobe and at 10:30 a.m. a team from Tokushima reached Awaji Island.

Assistance teams soon found a shortage of local manpower in Kobe and the affected cities. They also discovered that, due to a lack of information, local response personnel were facing enormous difficulties trying to get an overall idea of what had happened and trying to set up a relief strategy. Numerous roadblocks were hampering emergency activities. Medical teams found that clinics and hospitals inside the affected area were completely overwhelmed by the number of injuries and were unable to send out messages for help.

B. Nationwide Mobilization

At 10:04 a.m. a Government Emergency Headquarters was established by cabinet decision. At its first meeting, held at 11:25 a.m., it decided on the immediate priority measures to be taken and confirmed that all resources available for search and rescue and firefighting should be devoted to the affected sites, provide immediate assistance to evacuees and restore transportation and lifeline services (electricity, gas, water and telephone) as soon as possible.

At 12:00 noon the NPA reported the following casualties: 203 dead, 331 missing and 711 injured. These figures clearly indicated that this earthquake was a record-making event. (For the last 10 years, the average annual number of casualties from natural disasters in Japan has been under 200.)

The Minister of the National Land Agency visited Kobe by helicopter and reported to the Prime Minister. The Government Assessment Team was sent to identify priorities and bottlenecks and reported back.

Nationwide mobilization was then in full swing. By the evening of 17 January, the following number of teams from all over Japan had reached Hyogo Prefecture:

Table 8
Outside Teams on Site as of 17 January

Fire Services	83 search and rescue teams
	110 fire squadrons
	65 ambulance teams
	Total of 1,180 fire service professionals, 243 vehicles and 9 helicopters
Police Teams	12 mobile police task forces
	1 special rescue force (155 professionals)
	Total of 2,048 professionals and 7 police helicopters
Self-Defense Forces	1,900 personnel with vehicles and helicopters. Navy vessels.
Red Cross	23 Red Cross medical teams (150 professionals)

In addition, medical teams, water supply teams with tank trucks, electrical engineers, gas engineers, water engineers and civil engineers were already mobilized from all over Japan and heading for Hyogo Prefecture. Prefectures and municipal governments in the Tokyo Metropolitan Area (Tokyo, Yokohama, Chiba, Saitama, etc.) and Shizuoka Prefecture sent their professional teams, which had been trained for a possible major earthquake. The City of Kobe has a standing mutual assistance agreement with 12 other large cities. For example, the City of Yokohama (another similar major port city) dispatched a convoy of water supply trucks at 13:10 hours, since they knew that the supply of potable water would be a major problem in Kobe. These numerous teams headed for Kobe from all over Japan.

Search and rescue in collapsed SRC or RC buildings was tackled by professional teams. At the Kobe-Nishishimin Hospital site, where one floor had collapsed, initial rescue operations ended by 22:30 hours, leaving 1 person missing. That person was found the next day.

At 17:00 hours, the Japanese Red Cross Society, with the cooperation of the NHK, launched a nationwide fund-raising campaign for the affected people.

Medical volunteers headed for Kobe. At 16:00 hours, AMDA, a Japanese medical NGO based in Okayama (west of Hyogo Prefecture) dispatched its medical team in an ambulance. It reached the Nagata Ward Office at 23:00 hours and began caring for evacuees.

C. Distribution of Food and Water Begins

At 12:00 noon the Kobe Municipal Office arranged for the delivery of bread and biscuits to schools being used as evacuation centers. At 17:00 hours, the first water trucks arrived at the schools and began distributing tap water. Bread, canned food and cooked rice balls started being distributed. By late evening, food had been delivered to 225 evacuation centers and distributed to 48,000 evacuees. Supermarkets and 24-hour food-store chains complied fully with a request to stay open and sell everything available.

D. Flow of Information Resumes

By noon, policemen dispatched to affected sites started reporting back to their headquarters. The Hyogo Prefectural Police Headquarters was reestablished at one of the undamaged police office buildings, and emergency telephone lines and a police radio network were set up. The aerial reconnaissance of fires was reported back to the Kobe Fire Command.

At 10:30 a.m., the NHK turned its FM radio station over to disaster welfare inquiries. People having difficulty reaching their family members or relatives could ask the NHK to transmit their request for contact.

However, information related to medical care was still cut off at many locations. Hospitals inside the affected area were still desperately struggling with an overwhelming number of injuries. Doctors felt they had to evacuate the seriously wounded to outside hospitals, but where? Emergency medical centers in Osaka were still trying to discover where they could pick up patients. On the other hand, Red Cross hospitals in Kobe were able to contact their sister hospitals in Osaka and Okayama and were able to send out patients. This procedure was based on the day-to-day contacts which these Red Cross Hospital doctors had, and they did not have to refer to manuals to find outside medical resources.