

Nutrition Policy in Japan to **Leave No One Behind**

-For Achieving Sustainable Societies-

Initiatives and activities for nutritional and
dietary support in large-scale disasters

2026

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About This Material

The Japanese government hosted the Tokyo Nutrition for Growth Summit 2021 in December 2021. The year 2021 was approximately 10 years before the deadlines for achieving the global nutrition targets 2030 and the SDGs, and it was decided that further expansion and strengthening of nutrition improvement initiatives should be made to achieve these global targets and goals.

At the Summit, participants called on various stakeholders to commit to implementing activities aimed at improving nutrition, resulting in 396 commitments announced by 181 stakeholders from 78 countries. The Japanese government itself committed to further promoting the Nutrition Policy in Japan to Leave No One Behind, and to publishing its progress and achievements annually starting from FY2023.

This slide summarizes initiatives related to nutrition and dietary support in large-scale disasters, as well as the systems and frameworks that support these efforts.

**Systems and Frameworks
Underpinning Nutrition and Dietary Support
During Large-Scale Disasters**

Japan has established disaster preparedness systems that include nutrition and dietary support based on repeated experiences with disasters

Japan has built laws, regulations, and support frameworks for disaster-affected areas as the foundation of its disaster response, based on its experience with repeated large-scale disasters and the lessons learned from them.

“Nutrition and dietary support,” the theme of this report, is one of the key components of disaster response.

In Japan, registered dietitians and dietitians, professionals specializing in nutrition and dietary support, work in various institutions nationwide, including local governments, medical institutions, and elderly care facilities. In the event of a disaster, registered dietitians and dietitians provide nutrition and dietary support to disaster victims at evacuation shelters and temporary housing.



Implementation of nutrition and dietary support by registered dietitians and dietitians based on support needs

In the event of a disaster, needs for nutrition and dietary support vary depending on the situation and change over time.

Registered dietitians and dietitians conduct surveys on the operational status of evacuation shelters and meal provision, as well as nutritional assessments, to identify the needs of disaster victims. Based on these findings, they develop distribution plans for stockpiled food and plan menus for boxed meals and hot meal services.

Disaster victims include people requiring special care, such as pregnant and lactating women, infants, elderly people, and people with chronic diseases or food allergies.

Based on nutritional assessments, registered dietitians and dietitians provide tailored support to these individuals in coordination with public health nurses, physicians, and other professionals.

Phase	Phase 0	Phase 1	Phase 2
		Within 24 hours of a disaster	Within 72 hours of a disaster
Ideal vision (Nutrition / dietary habits)	Residents have stable access to food and water during disasters (<u>food security</u>)	Residents have access to <u>sufficient energy intake</u>	Residents have <u>access to adequate amounts of energy and nutrients</u> <u>Warm and varied meals</u> are served to disaster victims, enabling them to relax and recover from the fatigue of living through a disaster
Potential nutrition challenges	Stress-related disorders (hyperglycemia, hypertension) Infectious diseases, food poisoning Deep Vein Thrombosis (Economy class syndrome) (insufficient fluid intake)	Loss of appetite Insufficient energy intake	Excessive energy intake Constipation, diarrhea, stomatitis Micronutrient deficiencies Alcohol dependence, inactive lifestyle
Meal provision	Already stockpiled food only	Stockpiled food, distributed food, relief supplies	Relief supplies, hot meal services, boxed meals
Nutritional support	Primarily staple dishes	In addition to main dishes, ensuring sufficient protein intake	In addition to side dishes, ensuring sufficient vitamin intake
	Energy	Energy and protein	Energy, protein, and vitamins

Phases of nutrition and dietary support following a disaster *

* Created based on research results from “The Guide for Nutritional and Dietary Support during Disasters” (September 2025) and “Research on Appropriate Meal Provision at Evacuation Shelters, etc. During Large-Scale Disasters” (March 2022).

Various systems and frameworks have been established to sustain nutrition and dietary support during large-scale disasters

To ensure the smooth implementation of nutrition and dietary support, preparedness during normal times is essential. Led by the national government, local governments, and relevant organizations, systems related to human resources, supplies, and information are being developed and strengthened.

Nutrition and dietary support in disaster-affected areas

Examples of human resources

- ✓ Deployment of registered dietitians and dietitians
- ✓ Framework for dispatching professionals (JDA-DAT, DHEAT, Teams of public health nurses and other professionals, etc.)
- ✓ Pre-service education at training schools, workplace training, etc.

Examples of supplies

- ✓ Food stockpiling
- ✓ Securing of special nutritional foods for people requiring special care
- ✓ Provision of nutritionally balanced meals

Examples of aggregating and sharing information

- ✓ Establishment of information-sharing system
- ✓ Provision of evidence-based information (nutritional reference values for evacuation shelters, a simulator for nutritional food stockpiling, etc.)
- ✓ Various guidelines and manuals

Programs and systems underpinning nutrition and dietary support during disasters (main examples)

Introduction of Case Studies

List of Case Studies

This material introduces case studies related to nutrition and dietary support during large-scale disasters implemented by local governments, support provided to other regions based on such experiences, and disaster assistance initiatives undertaken by the Japan Dietetic Association.



JDA-DAT is organized by the Japan Dietetic Association and is composed of members from prefectural dietetic associations across Japan

No.	Organization	Key point
①	Hyogo Prefecture	Long-standing efforts to strengthen disaster response since the Great Hanshin-Awaji Earthquake, followed by proactive support in disaster-affected areas
②	Iwate Prefecture	Strengthening nutrition and dietary support systems after unprecedented earthquake and tsunami Damage, and expanding activities in collaboration with private-sector operators
③	Kumamoto Prefecture	Providing support for the 2024 Noto Peninsula Earthquake based on the framework established after the 2016 Kumamoto Earthquake and lessons learned from receiving assistance
④	Ishikawa Prefecture	Supporting activities in affected municipalities by establishing information-sharing systems based on advice from dispatched registered dietitians and dietitians, and providing assistance to people requiring special care at Level 1.5 evacuation shelters*
⑤	Anamizu Town (Ishikawa Prefecture)	Providing nutrition and dietary support in cooperation with dispatched registered dietitians and dietitians, and JDA-DAT, and delivering hot meals through a central kitchen initiative in collaboration with the private sector
⑥	The Japan Dietetic Association – Disaster Assistance Team (JDA-DAT)	Leveraging a nationwide network of approximately 6,000 registered dietitians and dietitians to provide rapid, tailored support for challenges that are difficult for government assistance alone to address

*Shelters established to support the relocation of disaster victims, including those requiring special care, from evacuation shelters and other facilities within the affected area to temporary evacuation facilities outside the disaster area, such as secondary evacuation shelters (e.g., hotels and inns)

Case 1

Hyogo Prefecture

Long-standing efforts to strengthen disaster response since the Great Hanshin-Awaji Earthquake, followed by proactive support in disaster-affected areas

Organizational Information and Disaster Experience

Hyogo Prefecture is located in the Kinki region and has a population of approximately 5.3 million. Based on its experience of suffering extensive damage in the 1995 Great Hanshin-Awaji Earthquake (6,434 deaths, 43,792 injuries, a peak of 1,152 evacuation shelters, and approximately 316,700 evacuees; figures from the Cabinet Office), the prefecture has made long-standing efforts to strengthen its disaster preparedness system, develop specialized personnel, and pass on lessons learned. Drawing on this experience, the prefecture has dispatched personnel to provide support to numerous disaster-affected areas, including following the 2011 Great East Japan Earthquake, the 2016 Kumamoto Earthquake, and the 2024 Noto Peninsula Earthquake.



Hyogo Prefecture

Population	5,304,127 (as of December 2025)
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Experience During Disasters

|| Proactive development of support systems based on disaster experience

Following the Great Hanshin-Awaji Earthquake, Hyogo Prefecture implemented various initiatives, including conducting nutrition surveys of disaster victims, providing outreach nutritional counseling in evacuation shelters and temporary housing, and distributing relief supplies, recognizing the critical importance of diet in maintaining health and mental stability. Based on these experiences, the prefecture took the lead nationwide in formulating the Guidelines for Dietary Improvement Activities during Disasters (March 1996) and established systems enabling rapid support during disasters, as well as mechanisms for promptly dispatching personnel when disasters occur in other prefectures.

Support from Other Regions

|| Rapidly dispatch of personnel to support other regions during disasters

In Hyogo Prefecture, awareness of the importance of nutrition and dietary support is shared across the organization even during normal times. Accordingly, a system has been established that allows registered dietitians and dietitians to accompany teams of public health nurses and other professionals, enabling the rapid dispatch of personnel when disasters occur in other regions. An annual survey is conducted among registered dietitians employed by the prefecture to determine the number available for dispatch in emergencies. In addition, when a disaster occurs, additional surveys are carried out in response to requests from the national government and disaster-affected areas, thereby establishing a system for rapid and long-term dispatch.



Administrative dietitians dispatched from Hyogo Prefecture confirm outreach nutrition consultation methods with administrative dietitians from a disaster-affected municipality (Noto Peninsula Earthquake)

Characteristics of Support

II Supporting Disaster-Affected Registered Dietitians Based on Extensive Support Experience

At the time of the 2011 Great East Japan Earthquake, registered dietitians and dietitians assessed nutritional status in evacuation shelters and improved meal content amid disrupted logistics and shortages of supplies. Similarly, following subsequent large-scale disasters, dispatched registered dietitians and dietitians carried out a wide range of activities in collaboration with registered dietitians and dietitians in affected municipalities, as well as JDA-DAT. These included conducting nutritional assessments at evacuation shelters, providing individualized assistance for people requiring special care, making rounds to temporary housing, and offering nutrition counseling.

At the time of the 2016 Kumamoto Earthquake, registered dietitians dispatched from Hyogo Prefecture recognized that information sharing between personnel dispatched from other prefectures and JDA-DAT was insufficient. They contributed to smoother coordination by proposing measures such as regular pre- and post-activity meetings and the use of social media for information sharing. By clarifying the division of roles among organizations and compiling lists of people requiring special care at each shelter, they ensured a shared understanding of on-site conditions and delivered comprehensive support.

Moreover, at the time of 2024 Noto Peninsula Earthquake, they advised the town to promptly request the dispatch of DHEAT and JDA-DAT teams, resulting in the swift deployment of registered dietitians and dietitians and the provision of support to disaster victims.



Administrative dietitians from Hyogo Prefecture discussing nutrition and dietary support in disaster-affected areas with JDA-DAT (Kumamoto Earthquake)



Administrative dietitians from Hyogo Prefecture providing nutrition counseling at temporary housing (Noto Peninsula Earthquake)

Iwate Prefecture

Strengthening nutrition and dietary support systems after unprecedented earthquake and tsunami Damage, and expanding activities in collaboration with private-sector operators

Organizational Information and Disaster Experience

Iwate Prefecture is located in the Tohoku region and has a population of approximately 1.12 million. During the 2011 Great East Japan Earthquake, the prefecture suffered extensive damage, particularly along coastal areas struck by the tsunami, resulting in 19,782 deaths and 2,550 missing persons. At its peak, approximately 2,300 evacuation shelters accommodated around 470,000 evacuees*. Widespread destruction, combined with significant damage to transportation networks and essential infrastructure, resulted in prolonged stays in evacuation shelters and temporary housing.

Based on this disaster experience, the importance of nutrition and dietary support, and the need for regional collaboration have been widely recognized, which has led to strengthened preparedness measures and enhanced coordination with relevant organizations during normal times.

* Fire and Disaster Management Agency "Report on the 2011 off the Pacific Coast of Tohoku Earthquake (165th Report)" and the "Great East Japan Earthquake Records"



Iwate Prefecture

Population	1,124,483 (as of December 2025)
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Experience During Disasters

|| Inland health centers supported coastal areas by delivering continuous assistance to residents in evacuation shelters and temporary housing

At the time of the 2011 Great East Japan Earthquake, as wide areas of Iwate Prefecture were affected, inland health centers provided logistical support to coastal health centers, thereby establishing a support system for coastal areas and assisting residents in evacuation shelters and temporary housing. Registered dietitians and dietitians who were dispatched to provide support first focused on supporting the delivery of relief supplies to evacuation shelters and assessing meal conditions. They identified nutritional challenges through nutritional assessments of disaster victims. Based on these findings, they implemented a range of support measures according to the circumstances, including improvements to the content of hot meal services and boxed meals, as well as the use of kitchen trucks to provide health education.

At the time of the disaster, it was difficult to secure volunteers to carry out hot meal services, and there was a need to reduce the burden on the people involved. As a result, about one month after the disaster, collaboration with private-sector operators began, which had not been common before. This coordination involved the provision of boxed meals by private companies and proposals from registered dietitians and dietitians to improve meal content.

In addition, as evacuation became prolonged, kitchen trucks were arranged and used to provide opportunities for health promotion activities and health education aimed at preventing inactivity-related health decline.

These on-site ideas, including the establishment of continuous nutrition and dietary support systems in evacuation shelters and temporary housing as well as collaboration with private-sector operators, were accumulated within the organization as practical know-how.



Health promotion activities utilizing kitchen trucks
(the Great East Japan Earthquake)

Post-Disaster System Development

Strengthening collaboration with related organizations based on lessons from food allergy response during the 2011 Great East Japan Earthquake

Following the 2011 Great East Japan Earthquake, assistance for people requiring special care during disasters, particularly individuals with food allergies, emerged as a challenge. Accordingly, Iwate Prefecture has continued to strengthen its response capacity, including conducting training on food allergy response in evacuation shelters in collaboration with volunteer organizations.

Through ongoing collaboration with related organizations, the prefecture has been able to accurately identify on-site challenges and the latest situations, and to reflect this information in prefectural policies and new initiatives.



Training exercises for hot meal services accommodating food allergies

Support from Other Regions

Sharing know-how and experience in coordination with private-sector operators and menu improvement

Following the 2016 Kumamoto Earthquake, registered dietitians and dietitians with experience from the 2011 Great East Japan Earthquake were dispatched to disaster areas, where they provided support drawing on their experience, including distributing relief supplies, coordinating roles among support organizations, and conducting dietary surveys in evacuation shelters.

In addition, following the 2024 Noto Peninsula Earthquake, the accumulated know-how from the 2011 Great East Japan Earthquake was utilized by providing sample meal plans and educational materials used during the response, as well as assisting with coordination between affected municipalities and private-sector operators when boxed meals began to be provided in evacuation shelters.

Kumamoto Prefecture

Providing support for the 2024 Noto Peninsula Earthquake based on the framework established after the 2016 Kumamoto Earthquake and lessons learned from receiving assistance

Organizational Information and Disaster Experience

Kumamoto Prefecture is located in the western part of the Kyushu region with a population of approximately 1.7 million. The 2016 Kumamoto Earthquake caused extensive damage, with many evacuation shelters opened throughout the prefecture, resulting in 273 deaths. At its peak, approximately 855 evacuation shelters accommodated around 180,000 evacuees*. In addition, the July 2020 heavy rains in Kumamoto caused significant flooding and damage in the Kuma River basin in the southern part of the prefecture, resulting in 65 deaths. At its peak, approximately 150 evacuation shelters accommodated around 2,200 evacuees**.

Through these experiences, the prefecture established a system in which health centers in unaffected areas support those in disaster-stricken areas, thereby creating an environment in which nutrition and dietary support can be provided promptly during disasters.

* Fire and Disaster Management Agency “Earthquake with Epicenter in the Kumamoto Region, Kumamoto Prefecture (121st Report)”

** Kumamoto Prefecture “Disaster Response Headquarters Meeting Materials for the July 2020 Heavy Rains”



Kumamoto Prefecture

Population	1,681,958 (as of December 2025)
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Experience During Disasters

Building on experience from earthquake and heavy rain disasters, the prefecture has strengthened collaboration between health centers to establish a system for providing rapid and continuous support to affected municipalities

Kumamoto Prefecture has experienced multiple large-scale disasters in recent years, including the 2016 Kumamoto Earthquake and the July 2020 Heavy Rains in Kumamoto.

During the 2016 Kumamoto Earthquake, while administrative functions and daily infrastructure were significantly disrupted, numerous evacuation shelters were opened across the prefecture. Under these circumstances, the prefecture established a collaborative network among health centers to support municipalities, delivering seamless nutrition and dietary support. For example, to improve meals provided at evacuation shelters, the prefecture requested cooperation from restaurants certified as “Health Promotion Support Restaurants” under a prefectural program, linking registered dietitians and dietitians in local governments with restaurant businesses to begin the distribution of boxed meals. Registered dietitians and dietitians from health centers also participated in meal plan reviews and coordination meetings, ensuring the provision of meals that accounted for nutritional balance and food allergies.

Following the 2016 Kumamoto Earthquake, registered dietitians were dispatched from the prefectural government and health centers in less affected areas to those more severely affected, with the support and understanding of managerial staff, thereby improving the quality of response. Building on these experiences, a system was developed that enables rapid dispatch of registered dietitians during disasters, with the understanding and cooperation of health center directors and multiple professional groups.

During the July 2020 Heavy Rains in Kumamoto, support to municipalities was delivered with practical advice and assistance from registered dietitians with prior disaster response experience.

Additionally, guidelines developed based on the experience and lessons learned from the 2016 Kumamoto Earthquake clarified necessary response actions, enabling less experienced personnel to provide support with confidence.



Meetings involving administrative dietitians dispatched from other local governments (Kumamoto Earthquake)

Support from Other Regions

■ Enhancing collaboration with the Kumamoto Dietetic Association and strengthening responses for people requiring special care based on experience from the 2024 Noto Peninsula Earthquake

While providing support for the 2024 Noto Peninsula Earthquake, administrative registered dietitians and dietitians in Kumamoto Prefecture encountered new challenges, such as Level 1.5 evacuation shelters and responding to the needs of people requiring special care. In response, the prefecture has been examining how to strengthen its support system.

Following the support activities in the Noto Peninsula, information was shared with the Kumamoto Dietetic Association, fostering a common understanding of the importance of strengthening nutrition and dietary support systems during disasters, particularly the establishment of rapid initial response systems.

Based on this background, a collaborative agreement was signed with the Kumamoto Dietetic Association at the end of June 2025. Moving forward, the prefecture plans to promote practical training for specialized personnel to ensure that staff can address new challenges under an effective and strengthened collaborative framework.

Post-Disaster System Development

■ Providing support tailored to on-site conditions, including consideration of the health of personnel engaged in response activities

Through multiple disaster experiences, Kumamoto Prefecture has developed a strong understanding of the burden on on-site personnel and the challenges faced by local governments receiving support.

During the 2024 Noto Peninsula Earthquake, in addition to providing advice and support to prevent secondary health impacts among disaster victims, particular emphasis was placed on reducing the physical and mental burden on response personnel. This included assessing on-site conditions through interviews with local staff and providing individualized care and guidance.

Furthermore, for local governments that lacked established systems for receiving support, the team provided advice on preparatory processes for receiving assistance and approaches to addressing challenges. Drawing on knowledge gained from the 2016 Kumamoto Earthquake and other disasters, these efforts contributed to the smoother implementation of nutrition and dietary support in affected areas.

Ishikawa Prefecture

Supporting activities in affected municipalities by establishing information-sharing systems based on advice from dispatched registered dietitians and dietitians, and providing assistance to people requiring special care at Level 1.5 evacuation shelters

Organizational Information and Disaster Experience

Ishikawa Prefecture is located in the Hokuriku region and has a population of approximately 1.1 million. The Noto Peninsula, which was hit by the earthquake, is located in the northern part of the prefecture, approximately 140 km from Kanazawa City, the prefectural center, or about two hours by car.

Furthermore, due to its peninsular geography, transportation networks are limited. The earthquake severed major roads in various locations, and port facilities were rendered unusable due to the tsunami and ground uplift. In addition, facilities where support personnel could stay were damaged and limited in number, making it difficult to secure bases for support activities. The 2024 Noto Peninsula Earthquake resulted in 684 deaths. At its peak, approximately 417 evacuation shelters accommodated around 45,000 evacuees*. Under these severe conditions, the prefecture provided nutrition and dietary support for disaster victims through collaboration with support personnel and relevant organizations.

* Cabinet Office in “Damage Status from the 2024 Noto Peninsula Earthquake.”



Ishikawa Prefecture

Population	1,089,190 (as of December 2025)
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Experience During Disasters

■ Establishing an information-sharing system under limited personnel and resources to support on-site nutrition and dietary activities

During the 2024 Noto Peninsula Earthquake, Ishikawa prefecture established the foundation for support activities in coordination with public health nurses and registered dietitians. This included building information-sharing systems, developing data-collection tools, coordinating the allocation of support personnel from other prefectures, and coordinating the delivery of relief supplies to improve evacuation shelter meals with support from the MHLW, DHEAT, and support personnel from other prefectures with disaster-response experience.

The disaster-affected areas suffered severe damage to transportation and communication networks, which hampered even efforts to confirm the safety of residents. As the number of registered dietitians and dietitians was limited, the prefecture devised practical ways to track the situation, including creating web forms so that other professionals, such as public health nurses, could collect information including meal status and report the results during meal rounds at evacuation shelters. Furthermore, with the cooperation of the developers of the D24H system, the prefecture built a system to centrally track the meal condition.

At the Noto Hokubu Health Center, which has jurisdiction over the disaster area, staff carried out information collection and dissemination, administrative support for municipalities, and responding to consultations, even as their own facilities and personnel were affected.

Liaison meetings were organized with municipal registered dietitians and dietitians to gather direct on-site feedback and identify the support that was truly needed.

In addition, by sharing best practices from other local governments with municipalities across the jurisdiction, they continuously devised practical solutions to provide support that met on-site needs despite limited personnel and resources.



Meetings related to support for disaster-affected municipalities (Noto Peninsula Earthquake)

Characteristics of Support

|| Provision of meals to people requiring special care at Level 1.5 evacuation shelters in cooperation with the Ishikawa Dietetic Association and other organizations

The 2024 Noto Peninsula Earthquake caused severe and widespread damage to essential lifelines. To secure safe living environments for disaster victims until they could return home or move into temporary housing, the establishment of transit hubs was necessary. These hubs were designed to facilitate smooth movement to temporary evacuation facilities outside the affected area, secondary evacuation shelters* such as hotels and inns, and care facilities. Because the damage was widespread and severe, it was difficult for affected municipalities to coordinate wide-area evacuation independently. In response, Ishikawa Prefecture took a proactive leadership role by establishing Level 1.5 evacuation shelters**, mainly in Kanazawa City, creating a centralized support system.

At these Level 1.5 evacuation shelters, the Ishikawa Dietetic Association and JDA-DAT collaborated to provide approximately 400 meals per day for people requiring special care.

However, the burden of securing and managing personnel to provide round-the-clock meal services for people requiring special care was extremely heavy, highlighting the need to establish clear operational frameworks for Level 1.5 evacuation shelters in advance.

Taking these challenges into account, the prefecture has begun strengthening collaboration and information-sharing systems during normal times while continuing to support the recovery and reconstruction of disaster-affected areas. This includes revising disaster manuals, developing action cards, strengthening collaboration with the Ishikawa Dietetic Association, and promoting public-private partnerships.

* Facilities that accept people requiring special care who have difficulty staying in general evacuation shelters (primary evacuation shelters) during disasters

** Shelters established to support the relocation of disaster victims, including those requiring special care, from evacuation shelters and other facilities within the affected area to temporary evacuation facilities outside the disaster area, such as secondary evacuation shelters (e.g., hotels and inns)



Support for meal provision and related activities at a Level 1.5 evacuation shelters

Case 5

Anamizu Town (Ishikawa Prefecture)

Providing nutrition and dietary support in cooperation with dispatched registered dietitians and dietitians, and JDA-DAT, and delivering hot meals through a central kitchen initiative in collaboration with the private sector

Organizational Information and Disaster Experience

Anamizu Town, Ishikawa Prefecture, is located in the central part of the Noto Peninsula and has a population of approximately 7 thousand, with an aging rate of 49.19% (as of the end of December 2023).

During the 2024 Noto Peninsula Earthquake, up to 54 evacuation shelters were set up in the town. The number of evacuees reached 3,991, and there were 38 deaths. The entire town suffered extensive damage, requiring the construction of 532 temporary housing units.

At the time of the disaster, two registered dietitians from the town's health and welfare departments (one each from the Childcare and Health Division and Resident Welfare Division) and six public health nurses took a central role in activities to maintain the health of evacuees.



Anamizu Town (Ishikawa Prefecture)

Population	6,646 (as of December 2025)
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Experience During Disasters

- With limited human resources, registered dietitians collaborated with support personnel to conduct nutritional assessments at evacuation shelters, thereby supporting the health of disaster victims and assisting people requiring special care

In Anamizu town, two registered dietitians were engaged in evacuation shelter operations immediately following the disaster, and due to their heavy workloads, it took time before they could initiate nutrition and dietary support activities.

The arrival of registered dietitians and dietitians dispatched from other prefectures, such as Hyogo and Shizuoka, enabled the full-scale implementation of nutrition and dietary support activities. This included conducting nutritional assessments at evacuation shelters, providing individual consultations for people requiring special care, managing special nutritional foods, and offering hygiene guidance.

Once JDA-DAT arrived on-site, it provided additional support, including visits to evacuation shelters and temporary housing, transporting and organizing special nutritional foods, and individual consultations



Meetings between municipal administrative dietitians and DHEAT personnel



Meetings among registered dietitians and dietitians involved in support activities

Characteristics of Support

Implementing a central kitchen initiative based on advice from support personnel, realizing the provision of hot meals in cooperation with local businesses and support organizations

A characteristic feature of nutrition and dietary support in Anamizu Town was the launch and operation of the central kitchen initiative. Following the disaster, from the perspective of health support, such as preventing health deterioration and disaster-related deaths among evacuees, as well as from the perspectives of providing employment support for disaster victims and making effective use of relief supplies, the town collaborated with restaurant associations and volunteers to establish a system to provide up to 500 meals per day as town-led hot meal services.

At the start of this project, the town's registered dietitians built the foundation by verifying water and cooking facilities and installing large-scale refrigeration to utilize public facilities that were not originally designed for food service as kitchens.

Additionally, they improved meal plans originally prepared for Self-Defense Force hot meal services based on advice from support personnel, and then requested food procurement, ordering, and cooking from restaurant associations and local restaurants. While all stakeholders were deeply committed, this led to intense discussions on reconciling competing priorities between nutritional balance and flavor. Ultimately, however, they achieved the stable provision of hot, nutritionally balanced meals and contributed significantly to meal management at evacuation shelters.



Hot meal services provided through the central kitchen program

Japan Dietetic Association Disaster Assistance Team (JDA-DAT)

Leveraging a nationwide network of approximately 6,000 registered dietitians and dietitians to provide rapid, tailored support for challenges that are difficult for government assistance alone to address

Organizational Information and Disaster Experience

The Japan Dietetic Association is a professional association of registered dietitians and dietitians with approximately 50,000 members. The Japan Dietetic Association established JDA-DAT (Japan Dietetic Association Disaster Assistance Team) in 2012 in response to the 2011 Great East Japan Earthquake, which highlighted the importance of nutrition and dietary support during disasters.

JDA-DAT is a team of professionals who have undergone specialized training to acquire the knowledge and skills necessary to provide prompt and appropriate nutrition and dietary support to disaster victims at evacuation shelters, temporary housing, and related facilities during disasters within and outside Japan, and it has a nationwide network of approximately 6,000 registered dietitians and dietitians who serve as members and team leaders.

The Japan Dietetic Association

Representative

: NAKAMURA Teiji, President

Number of Members : 49,104

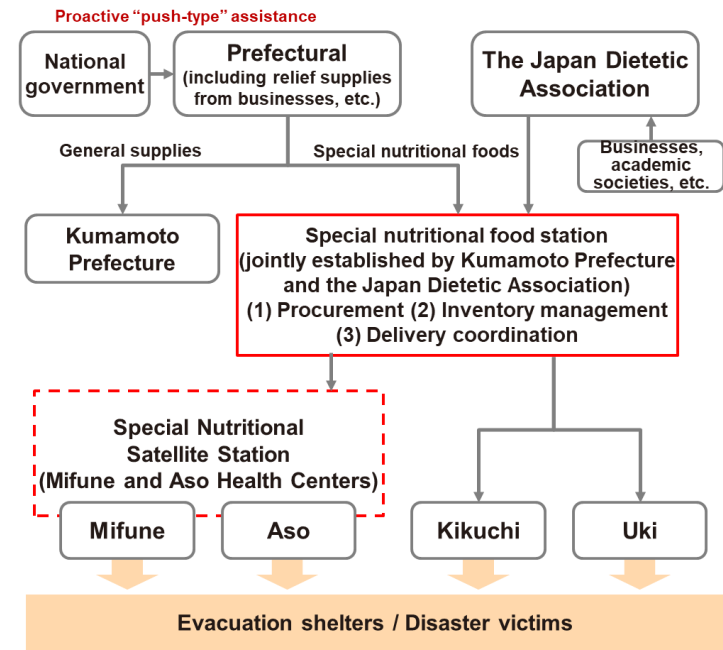
(as of the end of March 2025)

Characteristics of Support

Establishing Special Nutritional Food Stations to rapidly deliver essential items to people requiring special care

JDA-DAT carries out a wide range of activities in disaster areas, including accompanying medical rescue teams, visiting evacuation shelters and temporary housing, providing nutritional counseling, transporting supplies, and managing hygiene. These activities are carried out in collaboration with local municipalities and other professional support teams with logistical support from the Japan Dietetic Association headquarters. In this context, JDA-DAT plays a vital role in providing meticulous nutrition and dietary support, particularly for people requiring special care.

Since the 2016 Kumamoto Earthquake, establishing special nutritional food stations (centralized hubs for managing and distributing special nutritional foods), along with leveraging the mobility of emergency support vehicles deployed nationwide to visit evacuation shelters and provide nutritional counseling, has become a foundation of support for people requiring special care. At these station, a system has been developed to centrally manage a diverse range of special nutritional foods, including special meals for people with food allergies, powdered milk, liquid meals, and nursing care foods, enabling centralized procurement, inventory management, and delivery coordination. In addition, support for people requiring special care is provided through activities such as outreach visits to evacuation shelters and nutrition counseling, making use of the mobility of emergency support vehicles deployed nationwide.



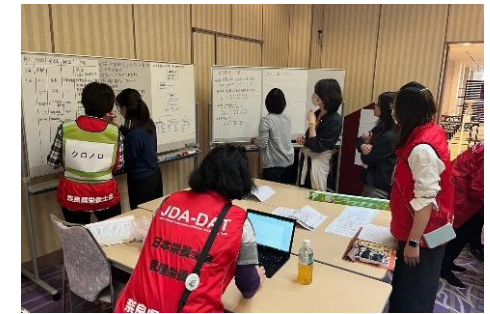
Special nutritional foods station initiative during the 2016 Kumamoto Earthquake

System Development in Normal Times

|| Training specialists capable of responding to disasters nationwide in collaboration with prefectural dietetic associations

JDA-DAT works closely with prefectural dietetic associations throughout Japan to establish a framework for developing disaster-response specialists during normal times. The Japan Dietetic Association is responsible for formulating the overall curriculum, training and certifying leaders with advanced expertise, and operating nationwide training programs, while prefectural dietetic associations conduct staff training in their respective regions and recommend leadership candidates.

In addition to acquiring fundamental knowledge through classroom instruction, participants gain practical knowledge and skills through participation in local disaster drills and collaboration with local municipalities.



JDA-DAT training session

|| Rapidly securing specialists capable of responding to on-site conditions and needs in disaster-affected areas through a specialist matching system

JDA-DAT is collaborating with prefectural dietetic associations during normal times to establish frameworks for the rapid deployment of specialists during disasters.

At the center of this system is DiMS (Dietitian Matching System), a specialist matching system that maintains a nationwide database of JDA-DAT leaders and staff.

DiMS is an ICT system designed to rapidly mobilize specialists capable of carrying out on-site activities during disasters. It functions by recruiting and selecting available specialists from the database in response to requests for dispatch from prefectural dietetic associations and local municipalities.

Strengthening Preparedness

Enhancing collaboration with local municipalities and other health, medical, and welfare activity teams in preparation for emergencies

By concluding disaster cooperation agreements with local municipalities to clarify support arrangements, establishing close working relationships, and promoting information sharing, prefectural dietetic associations have developed systems that enable rapid and smooth coordination during emergencies.

JDA-DAT conducts joint training programs and disaster drills with other health, medical, and welfare teams, thereby deepening understanding of each team's roles and methods of collaboration at disaster sites. In particular, JDA-DAT leaders are dispatched to multidisciplinary training programs hosted by the Japan International Medical Technology Foundation (JIMTEF), where they gain practical knowledge alongside physicians, nurses, pharmacists, public health nurses, and other healthcare personnel on support systems, methods for information sharing, and responses for people requiring special care during emergencies.

Steadily implementing necessary measures based on disaster support experience to strengthen preparedness for future disasters

The 2024 Noto Peninsula Earthquake in particular revealed challenges and emerging needs, including support at Level 1.5 evacuation shelters. Accordingly, the guidelines for nutrition and dietary support during disasters were swiftly revised based on these insights (September 2025).

Further, since transportation is essential for supporting activities in disaster areas, JDA-DAT has promoted the nationwide deployment of disaster relief emergency vehicles.

By learning through such experiences and building on improvements, JDA-DAT has created a system for providing effective support during disasters.



Participation in disaster preparedness drills conducted by municipalities with disaster cooperation agreements

Conclusion

|| To advance nutrition and dietary support during disasters, it is essential for registered dietitians and dietitians to play a central role and to strengthen preparedness for future disasters.

In Japan, registered dietitians and dietitians are strengthening preparedness for future disasters in nutrition and dietary support by building on experience from past disaster responses. These efforts contribute to the promotion of “Leave No One Behind” approaches to nutrition improvement, including disaster victims.

The knowledge and experience presented in this report and its case studies are expected to serve as useful references for municipalities across Japan as they consider developing systems and frameworks to prepare for future large-scale disasters

|| Sharing Japan’s knowledge with the world and striving to contribute internationally

Addressing nutrition-related challenges arising from prolonged evacuation conditions, as well as providing individualized support for people requiring special care, are important issues shared across countries.

We believe that the information in this material, including case studies, will serve as a reference for relevant personnel both in Japan and abroad who are engaged in disaster response.

Japan has been building greater momentum for improving nutrition by sharing with the world the knowledge and experience gained through over 100 years of nutrition improvement efforts, building on the commitments made at the Tokyo Nutrition for Growth Summit 2021 and the Nutrition for Growth Summit 2025 in Paris. Japan will continue to focus on key issues shared across countries and contribute to addressing nutrition challenges by disseminating information on the progress and outcomes of efforts under its “Leave No One Behind” nutrition policy. Through these efforts, Japan will ultimately contribute to achieving sustainable societies.