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#### RESEARCH PAPER

# Remote community-based public health nursing during a disaster: An ethnographic case study in Japan



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#### **KEYWORDS**

Public health nursing; Life change event; Relief work; Ethnography; Disasters; Case study

#### Summary

*Background*: The Great East Japan Earthquake that occurred on March 11, 2011 generated a tsunami that directly struck Japan. Public health nurses (PHNs) played important roles in this disaster response and community recovery. This research identified a PHN's experience in an affected area.

*Methods:* An ethnographic case study approach was used to obtain in-depth information regarding the experiences of one PHN, using semi-structured interviews, participant observation, and statistical documents.

*Results*: Six themes were identified and explored, including that the PHN undertook overwhelming responsibilities to protect the local residents, made several autonomous decisions, and had a strong sense of mission. These were based on the relationship-building that occurred with the local residents due to the geographical characteristics and her own preparations.

Conclusions: The findings encourage PHNs to participate in simulations of disasters in preparation for major catastrophes and establish good collaborative efforts with residents by being a part of the community.

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#### What is known

- A public health nurse (PHN) is a nurse who works to promote and protect the health of many population groups with provision of care directed toward community-level issues.
- During and after disasters, PHNs commonly play key roles in their communities.
- However, research has been conducted on nurses in rescue teams; little is known about the experiences of PHNs in disaster-stricken areas.

#### What this paper adds?

- PHNs need to conduct a simulation of the necessary preparations prior to major catastrophes.
- PHNs enhance their local community relationships during non-disaster times.
- External aid workers should be prepared to positively encourage the work of PHNs and offer appropriated support at the proper time and place.

#### Introduction

In 2011, there were 336 natural disasters reported worldwide, with Asia continuing to be the most frequently affected area. The deadliest natural disaster was the Great East Japan Earthquake in which 19,846 people died. This earthquake and its devastating tsunami that occurred on March 11, 2011 caused significant damage across the Tohoku region. Before the disaster, the coastal areas in these regions suffered from an underpopulated and ageing society, creating further challenges for the remote areas along this coast that became isolated for several days. The coast of the several days are suffered from the several days.

A public health nurse (PHN) is a nurse who works to promote and protect the health of many population groups with provision of care directed towards community-level issues. Their practice includes the core functions of public health. In Japan, the term "public health nurse"—as it is stated to in the Act regarding PHNs, Midwives, and Nurses—refers to a person under licensure from the Ministry of Health, Labour and Welfare to use the title of PHN and provide health guidance as a profession. PHNs are specialists who introduce value-added services relating to "health" in society and who "do good" in a community. Their activities include the health and welfare areas of maternal and child health, aged health, mental health, infection countermeasures, intractable diseases, and disabilities. 9

Health care systems can suffer severe effects from a disaster, which also interrupt a community's normal functioning via the disruption of infrastructure. <sup>10,11</sup> During and after disasters, PHNs commonly play key roles in their communities. <sup>12</sup> PHNs assume a vital role in the provision of many urgent health services directly to communities soon after disasters. <sup>13,14</sup> They must undertake their roles under diverse conditions, <sup>15,16</sup> and their broad duties are not limited to acute-phase care. PHNs have a much larger role than hospital nurses, <sup>17,18</sup> including the provision of acute-phase care, psychological support, and coordination with relevant

organisations. <sup>11</sup> Thus, PHNs should have high-level competence in the knowledge, behaviours, and tasks across three phases of emergency response: preparedness, response, and recovery. <sup>19,20</sup>

Several studies that investigated the experiences of nurses who were dispatched to the disaster-affected areas and worked in relief and support reported that nurses gained a sense of accomplishment<sup>21</sup> and rediscovered their commitment to nursing.<sup>22,23</sup> Nevertheless, the nurses who performed their duties also experienced tension between their family and work roles.<sup>24</sup>

Although research has been conducted on nurses in rescue teams, little is known about the experiences of PHNs in disaster-stricken areas. PHNs in this earthquake disaster continued their work under circumstances in which communications were cut off, and they did not know whether their families were safe. By describing the experiences of a PHN working in a devastated area, we will better understand the role of a PHN and may help predict the situations that she or he might encounter in future disasters. Therefore, the aim of this study was to describe the experiences of an individual PHN in local government working in an affected area after the Great East Japan Earthquake.

#### Materials and methods

#### Study design

A case study using ethnographic approach was used, involving the direct descriptions of human groups, culture, and local society. 25-27 The goal of an ethnographic strategy is to learn how people think and act in their natural setting.<sup>28</sup> Focusing on an individual PHN experience and contextualising this experience within this particular region, gives us the ability to understand a region and its culture in order to deepen our knowledge of the PHN experience in a remote area during a disaster. We conducted seven key informant interviews with several collateral informants, and analysed these data with comparisons. Through analysis, a crisis-ridden PHN, who almost lost her colleagues, emerged during a particularly difficult situation, becoming a makeshift director-general of an Emergency Operation Center (EOC) without any initial outside support. Therefore, we extracted and discussed this PHN's experience for this study.

#### Study area

District B in the Tohoku region is located near the sea and along the riverbeds where fishing and agriculture are the main industries. The population was approximately 4000 and, similar to other Tohoku regions, District B suffered from depopulation and an elderly population, with more than 30% of the population being over 65 years old.<sup>3</sup> The government office of District B (the B Branch Office), which had 40 staff members, was located beside a river, and the B health centre under the jurisdiction of the B Branch Office, was approximately 3 km away. Ordinarily, four staff members, including the key informant (referred to as T PHN), another PHN, a nutritionist, and a male office worker, were at the B health centre. The medical and private dental clinics occupied the same building.

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