## **D24H**



Cross-ministerial Strategic Innovation Promotion
Programme, Strengthening the National Resilience for
Disaster Prevention and Mitigation



Shibaura Institute of Technology

Tokyo Institute of Technology

University of Occupational and Environmental Health Japan

National Hospital Organization Disaster Medical Centre

Japanese Red Cross Medical Centre

Hamamatsu University School of Medicine

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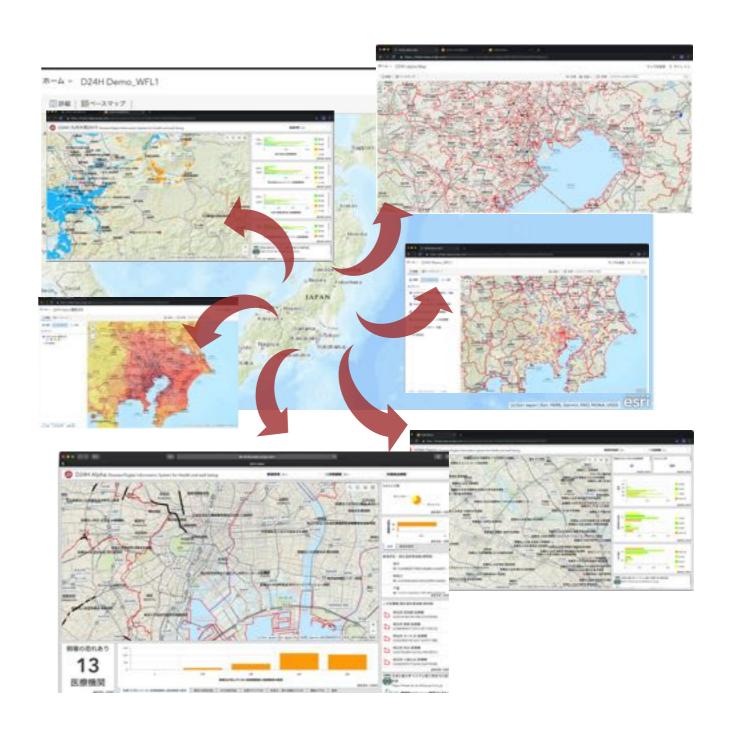
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Disaster/Digital information system for Health and well-being (D24H)

- Assisting support teams in public health field -



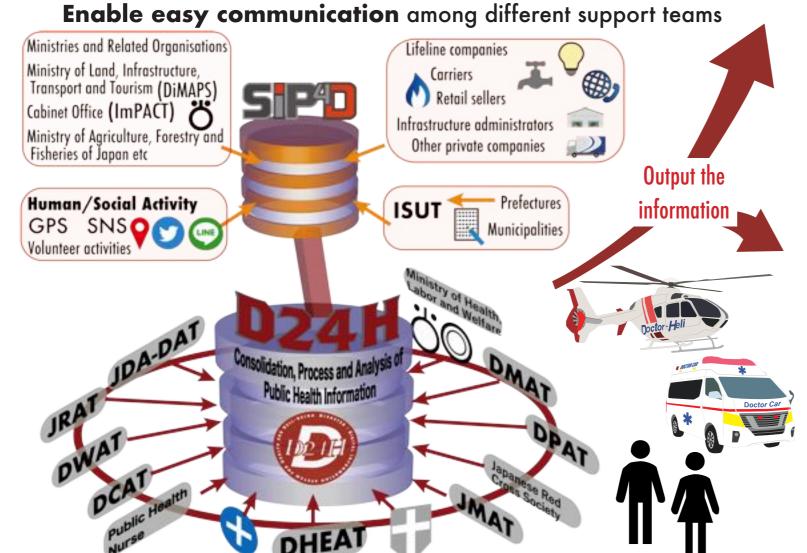


# Disaster/Digital information system for Health and well-being (D24H) – Assisting support teams in public health field

D24H: Disaster/Digital information system for Health and well-being

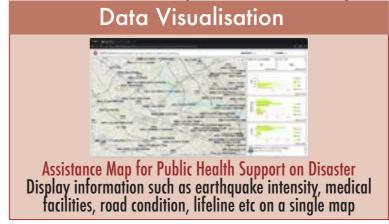
The D24H collects, consolidates, processes and analyses essential information for public health support at the time of disaster in cooperation with the Shared Information Platform for Disaster Management (SIP4D) for ministries and systems run by each support team. It enables information sharing among the support team in real time, thereby assisting decision-making of and among them. In addition, with its statistical analytical functionality, the D24H calculates estimated damage and needed and available support amount of personnel and material resources.

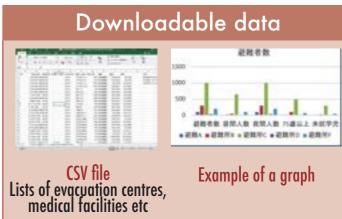
Image of the Linked Information in Related Systems Through the D24H Information sharing among all the support team, local governments and the Ministry of Health, Labour and Welfare



### Output disaster information in various data-type and in real time

Disaster information is output in the most suitable style for each support team, including downloadable CSV file, graph form and map, so that immediate and easy decision-making can be made.





### Anticipation and Projection: customising the data with statistical analysis

Astatistically analyses the data and display on a map. For example, it provides estimated travel distance of evacuees in one area using population distribution in ordinary times and evacuation centre and road information. In a similar manner, number of support staffs to be sent to one area and the best route to reach there can be calculated using number of hospitalised patients in the area, road information and operational status of staffs in the area.

