Methods: This study employs a narrative approach to analyze the challenge of ASEAN joint research implementation.
Results: The findings indicate three key challenges. First is the challenge of choosing a methodology that is both rigorous and universally applicable in diverse multinational settings. This diversity necessitated several changes and modifications of the research methodology in the proposals, adding substantial delays to project timelines. Secondly, email communication for participant recruitment presents challenges, whereas direct meetings and facilitation by the ARCH Project have proven valuable for initiating further engagement. A third challenge concerns the ethical clearance (EC) process. Understanding and adhering to the various Institutional Review Board (IRB) protocols of each participating country was time-consuming and complex. The Fifth Meeting of the Steering Committee for AANDHM recommended that the research team follow EC and IRB procedures according to their country's regulations, while participants are only required to undergo EC review if mandated by their country. This guidance helps resolve the EC confusion that stalled the joint research process.
Conclusion: This study reveals that selecting methodologies applied in different contexts of disaster health management and diverse IRB protocols poses significant challenges to the ASEAN Joint Research on Hospital Safety Index. Addressing these issues is essential for developing regional mechanisms for the promotion of joint research activities. Future recommendations include training on developing research methodology, developing efficient communication platforms, and conducting surveys on EC guidelines across ASEAN to enhance research collaboration.

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The Development of a Citizen Disaster Preparedness Training Program

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Summary: Mass casualty incidents (MCI) stress systems. Research shows the critical role laypersons play in saving lives and reducing morbidity by providing time-sensitive interventions at a disaster scene. While many first-aid and basic life support courses exist, training for laypersons to respond to disasters is few. A course, "Ground Zero," was developed by Disaster Volunteer Corps, Singapore General Hospital, for laypersons focusing on basic disaster management and simple lifesaving interventions. This review aims to detail the methods of course development and challenges faced in this pilot program. Kern's 6-step approach was undertaken for curriculum development. Core content for Ground Zero included scene safety, triage, emergency communications, and principles for basic lifesaving procedures. Emergency physicians supervised Emergency Medicine residents and trained students who conducted the sessions. Course feedback was sought through online forms. Pre- and post-session quizzes were undertaken to assess the learning and confidence of the participants.
(Key challenges faced)
• Implementation: Phase 1 was delivered online with breakout sessions, due to COVID-19 pandemic restrictions. Phase 2 was delivered in person, with sessions centering around hands-on practice, and culminating with a simulated MCI, with scene safety, assessment and intervention, and evacuation of casualties undertaken by participants.
• Understanding: the course needed to address disaster response from the layperson's perspective. MCI principles needed to be simplified, and the limitations of life-saving measures in MCIs had to be addressed sensitively. Citizens have differing levels of baseline medical understanding and willingness to intervene. Focus stayed on empowering and not endangering them in their efforts. The importance of alignment with emergency systems was also taught.

Previous studies demonstrate the willingness of laypersons to respond to disaster scenarios. However, there is a lack of training in this area. Education remains a cornerstone in disaster readiness. Further training and research need to be conducted.

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Teaching Comprehensive Emergency Management and Hazard Vulnerability Analysis: A Comparison of Serious Game and Lecture Based Methods

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Introduction: Comprehensive Emergency Management (CEM) and Hazard Vulnerability Analysis (HVA) are vital topics in disaster management, particularly for hospital emergency preparedness training. Traditionally, these topics are taught through lectures, which rely heavily on the instructor's ability, potentially limiting effectiveness. This study introduces a serious game approach as an alternative method and compares its effectiveness with lectures in fostering engagement and knowledge gain.
Methods: Participants, all hospital staff, were divided into two groups. The Lecture (L) group received a traditional lecture from an expert in hospital emergency management, while the Game (G) group engaged in a board game, "Hospital Hazard," designed by the researchers to teach CEM and HVA concepts. Participants completed surveys before and after the sessions. The pre-survey assessed interest in learning CEM and HVA and willingness to engage in hospital CEM/HVA activities, using a 5-point Likert scale (1=very low, 5=very high). The post-survey reassessed these metrics and evaluated session enjoyment, willingness to recommend, perceived educational effectiveness, and knowledge gain, also on a 5-point scale (1=very poor, 5=very good).
Results: The L group included 60 participants, and the G group had 109. Both groups showed significant improvement

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