4.1(4th yr), and 4.2 (5th yr) in K6. 15.1, 14.6, 14.1, 14, 2, and 13.5 in PDI, and 12.9, 11.0, 10.1, 8.9, and 9.94 in IESR. On the other hand, the depression and resilience scale showed a stable trend, with an average of 9.0, 7.8, 8.6, 8.9, and 9.1 in CESD, and 61.4, 62.8, 62.5, 62.7, and 61.7 in RS-14.

Conclusion: It was found that the number of people with stress-related problems was. The K6, PDI, and IESR scores were on a decrease. There was not much change in the CESD or RS14 scores. Results suggest that stress-related mental health improves as recovery progresses over time, and the psychological impacts of adapting to the effects of the flood do not change.

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Reflections on COVID-19 Response: Preparing for Future Infectious Diseases with High Uncertainty

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Introduction: During the initial wave of the COVID-19 pandemic, our hospital established a task force to coordinate efforts across the institution in response to the growing health crisis. As the first wave began to subside, the hospital scaled down its response capacity and conducted a survey to assess the experiences of staff members.

Methods: The survey aimed to inform measures to strengthen preparedness for subsequent waves. Key topics included levels of stress, concerns about infection, attitudes toward future involvement, and an open-ended section for additional comments. Data collection was conducted online.

Results: A total of 338 responses were received, with nurses comprising 57%, physicians 12%, and other staff 31%. While 45.9% provided favorable feedback regarding the response measures, 65.6% reported experiencing mental stress, 50.5% physical stress, and 79.3% expressed concern about contracting the virus. Approximately half (49.1%) indicated their intention to participate in the response to future waves, though 27.5% expressed reluctance.

The survey revealed diverse suggestions for improvement, primarily related to command structure, information dissemination and sharing, infection control protocols at various stages, and mental health support for staff. Notably, perceptions of the same measures varied significantly, highlighting the need for careful communication. Effective risk communication, which is crucial during public health emergencies, was identified as a key area for improvement. Both management and frontline staff would benefit from enhanced understanding of risk communication strategies.

Conclusion: The unprecedented nature of the pandemic response placed significant mental and physical burdens on healthcare workers, coupled with high levels of concern about infection. The findings underscore the importance of thoughtful communication, particularly in crises, where messages can be perceived differently depending on the recipient's perspective.

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Psychosocial Support for Special Enforcement Officers in Response to Critical Incidents

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Introduction: Special Enforcement Officers (SEOs) in the Netherlands, employed by municipalities to enforce regulations in public spaces, are frequently exposed to aggression and violence, increasing their risk of psychological issues. The "Psychosocial Support for High-Risk Professions" guidelines provide a basis for assessing SEOs' psychosocial support needs; however, existing support practices often fall short of addressing the unique demands of their roles. As SEOs' tasks and responsibilities continue to expand, their specific psychosocial support needs must be better understood and addressed.

Methods: A mixed-methods approach was applied, including a document review and semi-structured interviews with SEOs and their supervisors. Document analysis identified existing preventive strategies and evidence-based best practices, creating a preliminary list of psychosocial needs. A total of 17 SEOs and 10 supervisors were interviewed, focusing on SEOs' support needs, best practices, and policy gaps across different municipalities and geographic regions. Qualitative thematic analysis was used to uncover recurring themes, particularly where formal support policies diverged from SEOs' practical experiences and perceived needs.

Results: Significant variability was found in perceived support levels, with smaller municipalities frequently offering fewer formal resources. Informal peer support emerged as a primary source of reassurance and solidarity among SEOs, while formal support, when provided, was more effective when supervisors had enforcement experience. A critical issue identified was ambiguity in SEOs' roles, particularly regarding their overlap with police duties. This role ambiguity fosters confusion and insecurity, amplifying stress and diminishing the impact of other support measures. SEOs consistently emphasized that without a clear role definition, other support needs remain challenging to address effectively.

Conclusion: The findings highlight the need for an enhanced psychosocial support framework that includes clear role definitions, access to structured support systems, and acknowledgment of SEOs' unique challenges. Addressing the foundational issue of role ambiguity is essential for reducing psychological risks and fostering resilience among SEOs.

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Trends in US Hospital-Based Gun Violence From 2000-2019

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Introduction: Violence in health care settings, particularly directed toward healthcare workers, has received increasing

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attention in the United States. While health care-related violence has taken many forms, shootings have raised special concerns, given the number of potential victims and disruption to a community's essential health infrastructure. However, there is limited evidence on trends in hospital-based gun violence. To address this gap, we studied characteristics of US hospital-based shootings over two decades.

Methods: A search of Nexis Uni was conducted for newspaper articles, newswires, web news articles, or magazines mentioning hospital-based shootings during the period from 2000 and 2019. The search strategy included the terms ("shooting" w/5 "healthcare" OR ("shooting" w/5 "health care") OR ("shooting" w/5 "hospital") OR ("shooting" w/5 "emergency room") OR ("shooting" w/5 "ER"). Articles were screened for relevance, and data were subsequently extracted and categorized by two independent reviewers.

Results: From 2000-2019, we identified 148 hospital-based shootings with 241 victims. Mean number of shootings increased from 3.4/year during 2000-2004 to 8.4/year during 2005-2009 [rate ratio (RR): 2.5, 95% CI: 1.4, 4.3], to 11.2/year during 2010-2014 (RR: 1.3, 95% CI: 0.9, 2.0) but decreased to 6.6/year during 2015-2019 (RR: 0.6, 95% CI: 0.4, 0.9). An overwhelming majority (91%) of shooters were male, with a median age of 46. The most frequent motive was the spillover of social violence (22%). The majority (59%) of events involved a single victim, although 14% had 3 or more victims. Perpetrators were also most likely to be victims (35%), followed by hospital staff (26%).

Conclusion: Hospital-based shootings remain a persistent threat, with the 2010-2014 period representing increased risk. While motives were varied, the spillover of social violence was seen with the greatest frequency. Most hospital shootings involved a single victim, but some events involved three or more victims. These findings can potentially inform prevention and mitigation strategies for hospital-based gun violence.

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The Association Between the Activity Environment and Performance of Responders in the 2024 Noto Peninsula Earthquake: Analysis of Responders' Health Management Version of J-SPEED

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Introduction: Following natural disasters, specialized health, medical, and welfare teams are deployed to affected areas to support the affected population. It is crucial to manage the health of affected individuals, but also that of the responders. It has been suggested that responders' performance declines when they experience physical or mental health issues, highlighting the need for comprehensive health management, including environmental factors. This study aimed to examine the association between responders' activity environments and their performance using the Responders Health Management ver. of the Japan-Surveillance in Post-Extreme Emergencies and Disasters (J-SPEED).

Methods: This study targeted health, medical, and welfare responders involved in the response to the Noto Peninsula earthquake on January 1, 2024. Data were collected via the Responders Health Management ver. of J-SPEED from January 6 to March 31, 2024. We analyzed the association between responders' activity environments and their performance during the acute (January) and subacute (February – March) phases.

Results: Several activity environment factors were significantly associated with lower performance throughout the study period, including "Unclear organization and chain of command", "Difficulty in ensuring a safe activity environment", and "Lack of meals and breaks". During the acute phase, "Activities at headquarters" was a significant factor associated with lower performance, while in the subacute phase, "Lack of infection protection equipment" was a significant factor.

Conclusion: This study found phase-specific factors associated with lower performance in disaster relief responders. These findings suggest the need to consider phase-specific responses when developing future health care strategies for responders.

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A Systematic Review on the Use of Psychological First Aid and Stress First Aid in Supporting Healthcare Workers During the COVID-19 Pandemic

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Introduction: The COVID-19 pandemic has caused significant psychological distress, especially among healthcare workers. While Psychological First Aid (PFA) and Stress First Aid (SFA) were commonly utilized in disaster settings, a few institutions had adapted them in the pandemic to provide psychological support for their healthcare workers. This systematic review aims to explore the application of PFA and SFA in addressing the psychological challenges faced by healthcare workers during the COVID-19 pandemic.

Methods: Searches were conducted in PubMed, CINAHL, and the Cochrane Library in August 2024. Studies were included if they utilized PFA or SFA as the primary intervention or employed frameworks based on either approach.

Results: Seven studies were included in the review, with six conducted in the United States. Three studies focused on PFA-related interventions. One study reported that up to 20% of staff utilized the service. Another study highlighted a high satisfaction rate with the sessions, significant reductions in anxiety and emotional distress, and improved coping abilities. Four studies explored the implementation of PFA and SFA training for healthcare workers. Benefits of this training include increased awareness of available psychological resources, enhanced resilience, improved communication skills, greater

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