

Program Evaluation of the PREP_aRE Crisis Prevention and Intervention Training Curriculum

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Abstract

This poster details the second program evaluation of the PREP_aRE School Crisis Prevention and Intervention Training Curriculum (PREP_aRE) in the United States and Canada. Findings were consistent with previous evaluation efforts (Brock, Nickerson, Reeves, Savage, & Woitaszewski, 2011), revealing statistically significant increases in participants' attitudes and knowledge from pre-tests to post-tests. In addition, participants reported high satisfaction with both PREP_aRE workshops.

Introduction

The need for crisis prevention and intervention efforts focusing on emotional recovery has been recognized worldwide (Hatzichristioly, Lykitsakou, Lampropoulou, & Dimitropoulou, 2011). Further, there is a growing call for improvements to the welfare, support, and mental health needs of children impacted by disasters (Heath, Nickerson, Annandale, Kemple, & Dean, 2009), with schools as natural and important providers of such support. However, many school professionals report lacking preparation for these roles (Nickerson & Zhe, 2004), and school districts indicate that their efforts are impeded by lack of equipment and expertise (U.S. GAO, 2007).

PREP_aRE is grounded in psychological theory and research, addressing the role of the school-based mental health professional within a multidisciplinary team that addresses crisis prevention, preparedness, intervention, and recovery (Brock, Nickerson, Reeves, Jimerson, Feinberg, & Lieberman, 2009). The curriculum offers multiter interventions for students based on their risk for psychological trauma. Two workshops are available: *Crisis Prevention and Preparedness: The Comprehensive School Crisis Team* (PREP_aRE Workshop 1) and *Crisis Intervention and Recovery: The Roles of the School-based Mental Health Professional* (PREP_aRE Workshop 2). The PREP_aRE acronym describes the following hierarchical and sequential activities:

- P** • PREVENT and prepare for psychological trauma
- R** • REAFFIRM physical health and perceptions of security and safety
- E** • EVALUATE psychological trauma risk
- P** • PROVIDE interventions
- a** • and
- R** • RESPOND to psychological needs
- E** • EXAMINE the effectiveness of crisis prevention and intervention

Method

Participants

Workshop 1 participants totaled 1,456 individuals from November 2009 through November 2011. The final sample included 875 matched tests, 608 quantitative satisfaction evaluations, and 300 qualitative satisfaction evaluations.

Workshop 2 participants totaled 2,233 individuals from November 2009 through November 2011. The final sample included 1,422 matched tests, 1,137 quantitative satisfaction evaluations and 487 qualitative satisfaction evaluations. More information is available in Table 1.

Table 1
 Workshop 1 and Workshop 2 Participant Demographics

	Workshop 1		Workshop 2	
	N	(%)	N	(%)
Profession				
Mental Health	608	(68.8%)	1262	(88.4%)
Educators	173	(19.8%)	83	(5.8%)
Health Care	40	(4.6%)	30	(2.1%)
Safety/Security	5	(0.5%)	3	(0.2%)
Missing	39	(4.4%)	50	(3.5%)
Race/Ethnicity				
African American	68	(7.8%)	135	(9.5%)
Asian	17	(1.9%)	28	(2.0%)
Caucasian	716	(81.8%)	1048	(73.4%)
Hispanic	39	(4.5%)	101	(7.1%)
Other	23	(2.6%)	23	(3.9%)
Missing	12	(1.4%)	55	(3.9%)
Graduate Students	246	(28.1%)	55	(19.0%)
Interns	71	(8.1%)	115	(8.1%)

Measures

Satisfaction. Workshop 1 and Workshop 2 participants completed a 10 item Likert-scale evaluation survey at the end of each workshop to assess satisfaction with the training content and experience. A separate form with three open-ended questions was used to obtain qualitative data on participant workshop experience. Qualitative analysis used a modified consensus approach (Hill et al., 2005).

Attitudes and Knowledge. A quantitative pre- and post-test was used to assess changes in attitudes and knowledge. The Workshop 1 survey contained four items to measure gains in attitude using a five point Likert type scale. It also included 10 multiple-choice items to assess knowledge of key gains. The Workshop 2 survey consisted of three items assessing attitudes and 13 items assessing knowledge.

Results

Participant Satisfaction

Quantitative Analysis. Overall, participant satisfaction was very high (Workshop 1 $M = 3.53$ out of 4, $SD = .60$, mode = 4; Workshop 2 $M = 3.62$ out of 4, $SD = .67$, mode = 4).

Qualitative Results. Participants across both workshops expressed satisfaction with the knowledge gained, workshop presenters, and materials used. The active training components of the workshops were valued, with participants from both workshops requesting more experiential learning opportunities in the curriculum.

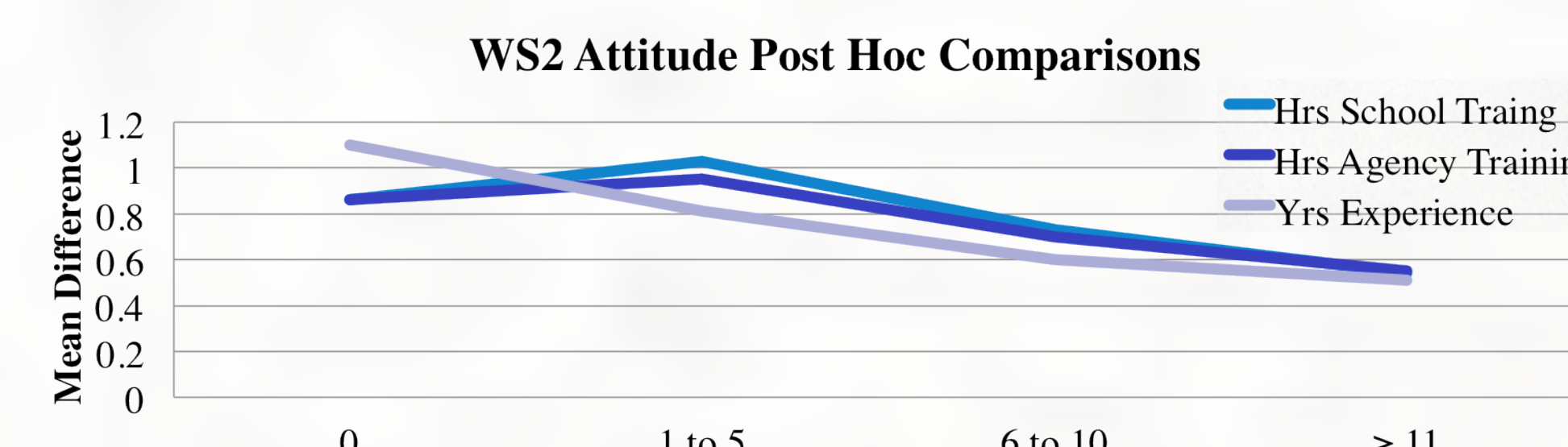
Workshop 1 Crisis Prevention and Preparedness

Attitude. The overall mean attitude toward crisis prevention and preparedness work became significantly more favorable [$t(858) = 21.74$, $p < .001$] from pre-test ($M = 3.32$ out of 5; $SD = .56$) to post-test ($M = 3.79$; $SD = .65$). The $\eta^2 (.36)$ indicated a large effect size. A series of ANOVAs were conducted to explore the impact of demographic factors on changes in attitude. Significant differences were found between participant occupation [$F(4,839) = 3.13$, $p < .05$, $\eta^2 = .01$], graduate student status [$t(795) = -2.445$, $p < .05$, $\eta^2 = .007$], and previous hours of community/agency crisis training [$F(3, 836) = 8.61$, $p < .001$; fewer hours of training were associated with more positive gains in attitudes].

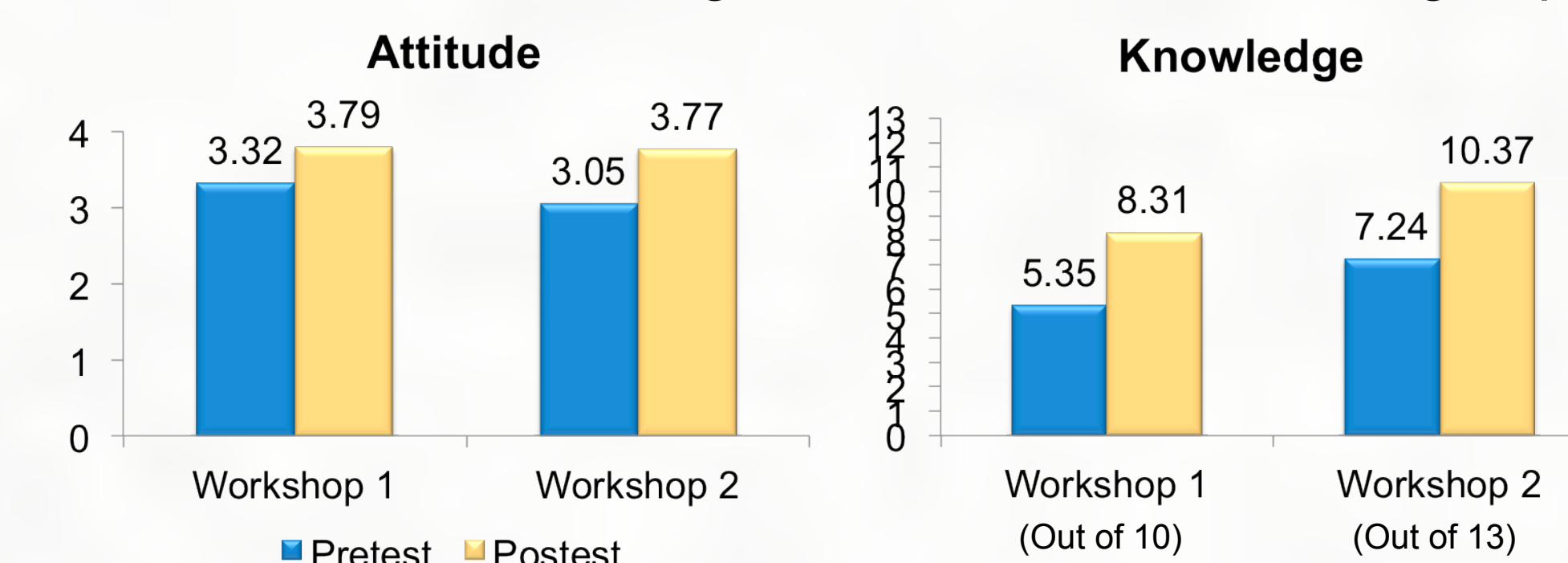
Knowledge. Workshop 1 participant responses indicated significant increases in knowledge [$t(874) = 35.77$, $p < .001$, $\eta^2 = .59$] from pre-test ($M = 5.35$ out of 10; $SD = 1.65$) to post-test ($M = 8.31$ out of 10; $SD = 2.07$). There were no other significant differences found.

Workshop 2 Crisis Intervention and Recovery

Attitude. The overall mean attitude toward crisis intervention and recovery work increased significantly [$t(1421) = 41.79$, $p < .001$, η^2 of .55] from the pre-test ($M = 3.06$ out of 5; $SD = .78$) to the post-test ($M = 3.77$ out of 5; $SD = .51$). Significant differences were found based on student status [$t(1285) = 23.30$, $p < .001$, $\eta^2 = .30$], years spent in the current profession [$F(3,1395) = 49.07$, $p < .001$, $\eta^2 = .10$], previous school crisis training hours [$F(3,1378) = 32.88$, $p < .001$, $\eta^2 = .07$], and prior community/agency crisis training hours [$F(3, 1379) = 26.48$, $p < .001$, $\eta^2 = .05$].



Knowledge. Workshop 2 participants had significant increases in knowledge [$t(1427) = 46.63$, $p < .001$, $\eta^2 = .60$] from pre-test ($M = 7.24$ out of 13; $SD = 2.0$) to post-test ($M = 10.37$ out of 13; $SD = 2.13$). Significant differences were found in knowledge gained based on: graduate student status [$t(1292) = 2.36$, $p < .05$, $\eta^2 = .004$] and previous community/agency crisis training [$F(3,1385) = 3.24$, $p < .05$, $\eta^2 = .007$; those with no additional community or agency based training gained significantly more knowledge than those with ≥ 11 hours of prior training], and reported professions [$F(4,1391) = 2.63$, $p < .05$, $\eta^2 = .007$; follow up contrasts revealed no significant differences within groups].



Conclusion

The PREP_aRE curriculum results in improvements in attitudes and knowledge toward crisis prevention and intervention across both workshops and evaluations. Future undertakings seek to extend the evaluation to better understand the extent to which training influences these variables over time and to determine how PREP_aRE concepts are utilized in the schools. Further, evaluation efforts must continue to monitor the impact of revisions across the second edition and the international version of the PREP_aRE curriculum.

References

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