School crises (a) are extremely negative, (b) are uncontrollable/unpredictable, and (c) have the potential to impact a large number of individuals (Brock et al., 2016). Crisis events include naturally arising (e.g., infectious disease outbreaks) and human-caused disasters (e.g., gun violence) and can disrupt typical levels of student and school community functioning. Although crises are largely unpredictable, school-based professionals can improve their capacity to prevent and respond to such events by engaging in comprehensive planning and preparedness measures (Nickerson et al., 2014; Rees & Sutton, 2011; Steeves et al., 2017). School professionals who have had the opportunity to develop, review, and practice a crisis response plan report feeling better equipped to handle a crisis event (Love & Cobb, 2012; Steeves et al., 2017; Werner, 2015). Thus, ongoing training and practice opportunities are recommended to prepare school communities to manage crises effectively (Brown, 2020; Daniels et al., 2007).

As part of its leadership efforts in school crisis prevention and response, the National Association of School Psychologists (NASP) developed the PREP\(\text{a}RE\) School Crisis Prevention and Intervention Training Curriculum (Brock et al., 2009; Brock et al., 2016). PREP\(\text{a}RE\) is based on the ideas that (a) the skill sets of school-based professionals are best utilized when embedded within a multidisciplinary team that engages in crisis prevention, protection, mitigation, response, and recovery; (b) because school crisis management is unique, it requires its own model; and (c) school-based mental health professionals are best prepared to address mental health challenges associated with school crises. PREP\(\text{a}RE\) Workshop 1, Third Edition: Comprehensive School Safety Planning: Prevention Through Recovery provides skills to help multidisciplinary school staff engage in crisis planning and preparedness efforts while fostering a physically and psychologically safe school environment. Using frameworks set forth by the U.S. Departments of Education (2013, 2019) and Homeland Security (2008), Workshop 1 teaches participants how to develop and review comprehensive school safety plans based on tools such as vulnerability assessments. PREP\(\text{a}RE\) Workshop 2, Third Edition: Mental Health Crisis Interventions: Responding to an Acute Traumatic Stressor in Schools aims to equip school-based mental health professionals to evaluate psychological trauma following a crisis event, match interventions to mental health needs, and implement a range of school-based mental health supports. The PREP\(\text{a}RE\) acronym describes the steps of crisis prevention and intervention, which guide both Workshops 1 and 2: \textbf{P}revent/Prepare for psychological trauma; \textbf{R}eaffirm physical health, security, and safety; \textbf{E}valuate psychological trauma; \textbf{P}rovide interventions and \textbf{R}espond to psychological needs; and \textbf{E}xamine the effectiveness of prevention and intervention efforts.

This evaluation summary details the short-term outcomes (highlighted in orange in Figure 1) of PREP\(\text{a}RE\) workshop participation in 2022 (January to December), including knowledge change, attitude change, and overall workshop satisfaction. In addition to this annual evaluation report, peer-reviewed journal articles support the knowledge and attitude change and global satisfaction of PREP\(\text{a}RE\) participants (see Brock et al., 2011; Nickerson et al., 2014), as well as individual factors (e.g., motivation) and work environment factors (e.g., opportunities to use new skills, supportive environment) that predict the use of these knowledge and skills in practice (Nickerson et al., 2019; Parks et al., 2022). Nickerson and colleagues (2023) also detail an example of district-wide crisis planning and responsiveness using the framework set forth by PREP\(\text{a}RE\).
Figure 1. Logic Model of PREPaRE

Table: Logic Model of PREPaRE

Inputs
- Research base
- Authors/workgroup
- Time (meetings, writing, planning)
- Funding
- Multidisciplinary school safety team
- Existing safety initiatives and crisis plans

Outputs
- Activities
  - Develop standardized comprehensive PREPaRE curriculum
  - Deliver training curriculum
  - Provide follow-up consultation
- Participation
  - District-level safety and crisis team members participate in training
  - School-level safety and crisis team members participate in training

Outcomes
- Short
  - Increased knowledge
  - Increased confidence and improved attitudes
  - Satisfaction with training
  - Increased skill/competence
- Medium
  - Improved interdisciplinary collaboration
  - More comprehensive safety planning efforts (e.g., crisis plans)
  - Increased skill/competence
- Long
  - Improved school climate
  - Fewer crises
  - After a crisis, return to previous levels of functioning

External Factors
- Federal and state education policies and mandates
- Training provided by others
- Competing priorities in team members’ roles/responsibilities
- Size of school/district; number and extent of crises and threats
PROGRAM EVALUATION PROCEDURE, MEASURES, AND DATA ANALYSIS

Procedure. All administrative components of the workshop are conducted through the use of the online PREPaRE catalog, including mandatory preworkshop registration, access to workshop materials and preworkshop content, pre- and posttests, workshop evaluation, access to the certificate of completion, and postworkshop reports. Prior to attending the workshop, participants are required to complete a pretest. After completion of the in-person workshop, participants are required to complete both the posttest and evaluation within 7 days to access the certificate of completion.

Pre- and Posttests: Attitudes and Knowledge. Prior to attending the workshop, participants are asked to complete an online test that assesses their demographic information, attitudes, and knowledge. The Workshop 1 pretest and posttest contain four items to measure attitudes towards crisis prevention and preparedness using a 5-point Likert scale (e.g., “How anxious are you about engaging in school safety planning?”) and 16 questions that assess school crisis prevention and preparedness knowledge. The Workshop 2 pretest and posttest contain four items that measure attitudes towards providing mental health crisis interventions using a 5-point Likert scale (e.g., “How anxious are you about providing school mental health crisis interventions?”) and 13 questions that assess knowledge regarding mental health interventions after a crisis. All knowledge items are multiple-choice and scored as correct (1) or incorrect (0). Analyses were then conducted on participant responses to produce means and standard deviations and to assess changes in attitudes and knowledge from pre- to posttest both generally and based on demographic variables.

Satisfaction. Immediately following the completion of the posttest, participants are asked to complete an evaluation survey to assess their satisfaction with the training content and experience. Evaluations for both workshops have quantitative and qualitative sections. For Workshop 1, nine items evaluate workshop satisfaction, and six items evaluate workshop objectives. For Workshop 2, nine items evaluate workshop satisfaction, and nine items evaluate workshop objectives. With regard to the qualitative sections, both workshop evaluations use six open-ended questions: three questions pertain to workshop details (e.g., location and date) and three questions evaluate participant feedback regarding strengths of the workshop, potential improvements, and specific skills and knowledge they feel that they gained. Quantitative analyses on participant satisfaction surveys are conducted to produce means and standard deviations, and qualitative analyses are conducted to identify trends in participant responses.

Missing Data. Not all participants provide complete data. There were complete data (e.g., pretest, posttest, and evaluation) for 86% of participants for the in-person delivery workshops and 87% of participants in the virtual delivery workshops. Analyses were conducted for participants for whom matched data on pre- and posttests were available, and multiple imputation was used for item-level missing data. Evaluation data were analyzed separately (not matched), and item level data were listwise deleted.

Qualitative Analyses. In addition to the quantitative evaluation survey, participants are asked three open-ended questions about strengths of the workshop, specific knowledge or skills gained, and recommendations for improvements. While numerous potential themes emerged from each of the three open-ended evaluation questions in each PREPaRE workshop, only those found to be occurring in at least 10% of the sample were deemed common enough to summarize. This is aligned with Ryan and Bernard’s (2003) recommendation that themes be identified by repetition as determined by the researcher. The 10% threshold provided an opportunity to analyze a sufficiently robust, yet manageable, number of themes. This level was determined based on the procedures of a similar qualitative study of the PREPaRE curriculum (Brock et al., 2011). The themes, as developed, were intended to be mutually exclusive. That is, each theme category could stand on its own. Participants wrote responses that were then categorized into content areas. This convention was employed based on guidelines established by Hill et al. (2005).
PREPaRE WORKSHOP 1 IN PERSON AND VIRTUAL DELIVERY

Participant Information

Workshop 1 is appropriate for all members of multidisciplinary school crisis teams. Specific demographic information for all 4,082 in-person participants from January 1, 2022, to December 31, 2022, is presented in Figure 2. Specific demographic information for all 778 virtual participants from January 1, 2022, to December 31, 2022, is presented in Figure 3.

Figure 2. Demographic Data for Participants From PREPaRE Workshop 1 In-Person Delivery
Figure 3. Demographic Data for Participants From PREPaRE Workshop 1 Virtual Delivery

Overall Years in a School Setting
- Below 1 Year: 7%
- 1-5 Years: 20%
- 6-10 Years: 14%
- Over 11 Years: 60%

Graduate Student Status
- Graduate Student: 4%
- Not a Graduate Student: 21%
- Not Applicable: 74%

Race
- American Indian/Alaska Native: 0%
- Asian: 1%
- Native Hawaiian or Other Pacific Islander: 3%
- Black or African American: 13%
- White: 77%
- More than one race: 9%

Ethnicity
- Hispanic/Latino: 10%

Overall Years in a School Setting
- Below 1 Year: 9%
- 1-5 Years: 22%
- 6-10 Years: 16%
- Over 11 Years: 53%

Graduate Student Status
- Graduate Student: 5%
- Not a Graduate Student: 25%
- Not Applicable: 70%
Workshop 1 In-Person Delivery Attitudes. As seen in Figure 4, more positive attitudes (i.e., mean of the four separate attitude questions) were reported at posttest \((M = 3.72, SD = 0.55)\) compared to pretest \((M = 3.37, SD = 0.59)\), \(t(3,487) = 33.55, p < .001, \eta^2 = .17\); this result is considered a large effect size. With regard to specific items, significant changes were found. Interestingly, participants reported feeling more anxious to engage in crisis preparedness, \(t(3,487) = -2.36, p < 0.01, \eta^2 = .11\), but less fearful to engage in crisis preparedness, \(t(3,487) = 16.90, p < .001, \eta^2 = .15\). They also reported significantly higher perceived knowledge about school mental health recovery supports, \(t(3,487) = 59.40, p < .001, \eta^2 = .10\) and higher confidence to collaborate with others, \(t(3,487) = 16.71, p < .001, \eta^2 = .12\). from pretest to posttest. Attitude toward crisis prevention and preparedness differed as a function of graduate student status (i.e., those who identified as graduate students demonstrated significantly greater changes in attitudes compared to those who were not graduate students and those who selected not applicable), prior school crisis training hours (i.e., all groups significantly differed from one another, and those with fewer hours demonstrated greater change), number of prior community agency crisis training hours (i.e., those with 0 hours demonstrated significantly greater changes in attitudes as compared to those with 1 to 5 hours, 6 to 10 hours, and 11 or more hours, and those with 1 to 5 hours and 6 to 10 hours demonstrated significantly greater changes as compared to those with 11 or more hours), occupation (i.e., mental health professionals demonstrated significantly greater changes compared to school administrators, and those who selected “other” as their occupation demonstrated significantly greater changes compared to those who identified as mental health professionals, school staff, school administrators, security/law enforcement, other mental health and health professionals, and university professors), number of years in current occupation (i.e., those with less than 1 year demonstrated significantly greater changes compared to those with 1 to 5 years, 6 to 10 years, and 11 or more years, and those with 1 to 5 years demonstrated significantly greater changes compared to those with 6 to 10 years and 11 or more years), and overall years working in a school setting (i.e., those with less than one year and 1 to 5 years demonstrated significantly greater changes in
attitudes as compared to those with 6 to 10 years and 11 or more years, and those with 6 to 10 years demonstrated significantly greater changes in attitudes as compared to those with 11 or more years).

**Workshop 1 Virtual Delivery Attitudes.** As seen in Figure 4, more positive attitudes (i.e., mean of the four separate attitude questions) were reported at posttest \((M = 3.72, SD = 0.50)\) compared to pretest \((M = 3.34, SD = 0.61)\), \(t(777) = 17.53, p < .001, \eta^2 = 0.17\); this result is considered to be a large effect size. With regard to specific items, significant changes were found for participants feeling less fearful to engage in crisis preparedness, \(t(777) = 10.71, p < .001, \eta^2 = 0.13\); higher perceived knowledge about school mental health recovery supports, \(t(777) = 26.90, p < .001, \eta^2 = 0.11\); and higher confidence to collaborate with others, \(t(777) = 9.40, p < .001, \eta^2 = 0.14\). Attitude toward crisis prevention and preparedness differed as a function of graduate student status (i.e., those who identified as graduate students demonstrated significantly greater changes in knowledge as compared to those who were not graduate students or selected “not applicable”), prior school related crisis training hours (i.e., those with 0 hours demonstrated significantly greater changes in attitudes compared to those with 1 to 5, 6 to 10, and 11 or more hours), community or agency related crisis training hours (i.e., those with 0 hours demonstrated significantly greater changes in attitudes compared to those with 6 to 10 and 11 or more hours; those with 1 to 5 hours demonstrated significantly greater changes compared to those with 11 or more hours), occupation (i.e., those whose occupation was listed as “other” demonstrated significantly greater changes in attitudes compared to school administrators), number of years in current occupation (i.e., those with 0 years demonstrated significantly greater changes in attitudes compared to those with 6 to 10 years and 11 or more years, and those with 1 to 5 years demonstrated significantly more changes in attitudes compared to those with 11 or more years), and number of years in a school setting (i.e., those with 0 years and 1 to 5 years demonstrated significantly greater changes compared to those with 11 or more years).

**Figure 4. Mean Changes in Attitude Toward Crisis Prevention and Preparedness From Workshop 1 In-Person and Virtual Delivery**

![Figure 4](image-url)

*Note. Items on a 5-point scale, higher scores indicate more positive attitudes (e.g., 5 = not at all anxious, 1 = extremely anxious).*

**Workshop 1 In-Person Delivery Knowledge Results.** As seen in Figure 5, Workshop 1’s in-person delivery participant responses indicated significant increases in knowledge, \(t(4093) = 105.31, p < .001, \eta^2 = .05\), from pretest \((M = 9.70\) out of 16, \(SD = 2.86\)) to posttest \((M = 14.68\) out of 16, \(SD = 1.81\)). Knowledge gains differed as a function of graduate student status (i.e., those who identified as graduate students demonstrated significantly greater changes in knowledge than those who were not graduate students), number of school-related crisis training hours (i.e., those with 0 hours demonstrated significantly greater changes in knowledge compared to those with 1 to 5, 6 to 10, and 11 or more hours, and those with 1 to 5 and 6 to 10 hours demonstrated significantly greater changes compared to those with 11 or more hours), number of community or agency related crisis training hours (i.e., those with 0 hours, 1 to 5 hours, and 6 to 10 hours demonstrated significantly greater changes than those with 11 or more
Workshop 1 Virtual Delivery Knowledge Results. As seen in Figure 5, Workshop 1’s virtual delivery participant responses indicated significant increases in knowledge, $t(777) = 49.91$, $p < .001$, $h^2 = .09$, from pretest ($M = 9.71$ out of 16, $SD = 2.74$) to posttest ($M = 14.79$ out of 16, $SD = 1.75$). Knowledge gains differed as a function of graduate student status (i.e., those who identified as graduate students demonstrated significantly greater changes in knowledge compared to those who were not graduate students), prior school-related crisis training hours (i.e., those with 0 hours demonstrated significantly greater changes in knowledge gain compared to those with 6 to 10 hours and 11 or more hours; those with 1 to 5 hours demonstrated significantly greater changes than those with 11 or more hours), prior community or agency related crisis training hours (i.e., those with 0 hours and 1 to 5 hours demonstrated significantly greater changes in knowledge gain compared to those with 11 or more hours), and number of years in current occupation (i.e., those with 1 to 5 years demonstrated significantly higher levels of knowledge gain compared to those with 11 or more years). There were no significant differences in knowledge gain by occupation and overall number of years in a school setting.

Figure 5. Mean Percentage of Items Correct From the Pretest and Posttest for Workshop 1 In-Person and Virtual Delivery

Satisfaction

Overall, participants in Workshop 1’s in-person delivery indicated high satisfaction with their workshop experience ($M = 4.49$ out of 5, $SD = .56$) and with the outcomes of the workshop ($M = 4.41$ out of 5, $SD = .54$). Participants in Workshop 1’s virtual delivery also indicated high satisfaction with their workshop experience ($M = 4.49$ out of 5, $SD = .55$) and with the outcomes of the workshop ($M = 4.41$ out of 5, $SD = .54$). The results from the satisfaction analyses are presented in Table 1.
Table 1. Comparison of Results for Workshop 1 In-Person and Virtual Satisfaction Responses

<table>
<thead>
<tr>
<th>Question</th>
<th>2022 In-Person Mean (SD)</th>
<th>2022 Virtual Mean (SD)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q1. Objectives were clearly stated.</td>
<td>4.60 (.62)</td>
<td>4.60 (.63)</td>
</tr>
<tr>
<td>Q2. The content was clear/understandable.</td>
<td>4.47 (.67)</td>
<td>4.49 (.67)</td>
</tr>
<tr>
<td>Q3. Materials were well organized.</td>
<td>4.35 (.83)</td>
<td>4.39 (.79)</td>
</tr>
<tr>
<td>Q4. Trainer(s) was/were well organized.</td>
<td>4.60 (.62)</td>
<td>4.52 (.70)</td>
</tr>
<tr>
<td>Q5. Materials facilitated participation.</td>
<td>4.39 (.77)</td>
<td>4.42 (.72)</td>
</tr>
<tr>
<td>Q6. Trainer(s) facilitated participation.</td>
<td>4.52 (.69)</td>
<td>4.51 (.71)</td>
</tr>
<tr>
<td>Q7. This workshop increased my knowledge.</td>
<td>4.56 (.63)</td>
<td>4.57 (.59)</td>
</tr>
<tr>
<td>Q8. I will be able to apply the information and skills learned to my professional duties.</td>
<td>4.46 (.65)</td>
<td>4.44 (.63)</td>
</tr>
<tr>
<td>Q9. I recommend this workshop.</td>
<td>4.43 (.73)</td>
<td>4.42 (.72)</td>
</tr>
<tr>
<td>Q10. I recommend this/these trainer(s).</td>
<td>4.55 (.69)</td>
<td>4.52 (.71)</td>
</tr>
<tr>
<td>Q11. I am now better able to identify the importance of comprehensive safety planning and preparedness.</td>
<td>4.48 (.61)</td>
<td>4.47 (.59)</td>
</tr>
<tr>
<td>Q12. I am now better able to identify the five mission areas of crisis preparedness.</td>
<td>4.43 (.59)</td>
<td>4.43 (.60)</td>
</tr>
<tr>
<td>Q13. I am now better able to understand how crisis response teams use the Incident Command System to respond to multiple emergencies.</td>
<td>4.40 (.59)</td>
<td>4.40 (.59)</td>
</tr>
<tr>
<td>Q14. I am now better able to define the key components of effective school emergency operations plans.</td>
<td>4.37 (.59)</td>
<td>4.39 (.59)</td>
</tr>
<tr>
<td>Q15. I am now better able to identify guidelines for exercising and evaluating emergency operations plans.</td>
<td>4.37 (.60)</td>
<td>4.38 (.58)</td>
</tr>
</tbody>
</table>

WS 1 Satisfaction                                                                 | 4.49 (.56)                | 4.49 (.55)             |
WS 1 Outcomes                                                                    | 4.41 (.54)                | 4.41 (.54)             |

Strengths of Workshop 1 In-Person Delivery

Three broad themes emerged from the Workshop 1 in-person delivery qualitative analysis. The most prominent theme was helpful/useful information/informative/increased awareness (17%). Other prominent themes included discussions/group time/opportunities to participate/collaboration (16%), and session well organized/structured (11%).

"It was well organized and full of important information to better the school environment and our crisis plan."

"Materials and content were directly relevant to my job responsibilities. This is the workshop that I wish I had known about several years ago."

Development of Crisis Prevention and Intervention Knowledge and Skills. For this question, three broad themes emerged when reviewing all responses for Workshop 1 in person. The most prominent theme related to an increased general sense of readiness for crisis planning/preparedness (27%). Additional themes included an
awareness of the structure/roles/responsibilities of the crisis team or Incident Command System (21%) and awareness of the EOP functional annexes (15%).

**Suggestions for Improvement.** For the in-person Workshop 1, three broad themes were endorsed highly enough to be considered noteworthy for the purpose of this analysis. One improvement theme related to the workshop materials (e.g., tabbed handouts, organization, accessibility; 12%). Another improvement theme suggested that the workshop was too long/a lot for 1 day/could be broken into more days (11%). Thirty-eight percent of participant feedback noted not applicable/none regarding suggestions for improving this workshop.

**Strengths of Workshop 1 Virtual Delivery**

Six broad themes emerged from the Workshop 1 virtual delivery qualitative analysis. The most prominent theme was *discussions/group time/opportunities to participate/collaborate/breakout rooms* (24%). Other prominent themes included *helpful/useful information/informative/increased awareness* (15%), *session well organized/structured* (12%), *detailed/organized/user-friendly materials* (10%), *handouts/form templates are good resources* (10%), and *good depth/exhaustive/comprehensive* (10%).

**Development of Crisis Prevention and Intervention Knowledge and Skills.** In the virtual Workshop 1, the same three themes as the in-person offering also emerged, but at different ratios of endorsement. The most prominent themes that emerged included an awareness of the EOP functional annexes (29%) and an increased general sense of readiness for crisis planning/preparedness (29%). Participants in this workshop also widely noted an awareness of the structure/roles/responsibilities of the crisis team or Incident Command System (24%).

**Suggestions for Improvement.** Four broad themes emerged from the virtual Workshop 1 qualitative analysis. The most prominent theme was not applicable/none (32%). Other prominent themes suggested the workshop was too long/a lot for 1 day/could be broken into more days (15%), hard to do virtually/better in person (14%), and needed improved workshop materials (e.g., tabbed handouts, organization, accessibility; 11%).

**PREPARE WORKSHOP 2 IN-PERSON AND VIRTUAL DELIVERY**

**Participant Information**

Workshop 2 is intended for school-based mental health professionals and other school crisis team members involved in meeting the mental health needs of students and staff following a school-associated crisis event. Specific demographic information for all 5,088 in-person participants from January 1, 2022, to December 31, 2022, is presented in Figure 6. Specific demographic information for all 1,027 virtual participants from January 1, 2022, to December 31, 2022, is presented in Figure 7.
Figure 6. Demographic Data for Participants From PREPare Workshop 2 In-Person Delivery

Race
- American Indian/Alaska Native: 10%
- Asian: 0%
- Black or African American: 79%
- White: 2%
- Native Hawaiian or Other Pacific Islander: 2%
- More than one race: 2%

Ethnicity
- Hispanic/Latino: 11%
- Non Hispanic/Latino: 89%

Occupation
- Mental Health Professionals: 11%
- School Staff: 1%
- School Administration: 7%
- Security/Law Enforcement: 1%
- Other Mental Health and Health Professionals: 1%
- University Professor: 1%
- Other: 68%

Prior School Crisis Training
- 0 Hours: 24%
- 1-5 Hours: 20%
- 6-10 Hours: 21%
- Over 11 Hours: 34%

Prior Community/Agency Crisis Training
- 0 Hours: 17%
- 1-5 Hours: 42%
- 6-10 Hours: 29%

Overall Years in a School Setting
- Below 1 Year: 46%
- 1-5 Years: 28%
- 6-10 Years: 20%

Graduate Student Status
- Graduate Student: 19%
- Not a Graduate Student: 77%
- Not Applicable: 4%
Figure 7. Demographic Data for Participants From PREPare Workshop 2 Virtual Delivery

**Race**
- American Indian/Alaska Native: 9%
- Asian: 13%
- Native Hawaiian or Other Pacific Islander: 2%
- Black or African American: 0%
- White: 0%
- More than one race: 4%

**Ethnicity**
- Hispanic/Latino: 18%
- Non Hispanic/Latino: 82%

** Occupation**
- Mental Health Professionals: 5%
- School Staff: 0%
- School Administration: 7%
- Security/Law Enforcement: 15%
- Other Mental Health and Health Professionals: 0%
- University Professor: 1%
- Other: 70%

** Years in Current Occupation**
- Under 1 Year: 19%
- 1-5 Years: 33%
- 6-10 Years: 24%
- Over 11 Years: 23%

** Prior School Crisis Training**
- 0 Hours: 23%
- 1-5 Hours: 19%
- 6-10 Hours: 33%
- 11 or More Hours: 24%

** Prior Community/Agency Crisis Training**
- 0 Hours: 19%
- 1-5 Hours: 13%
- 6-10 Hours: 26%
- 11 or More Hours: 42%

** Overall Years in a School Setting**
- Below 1 Year: 38%
- 1-5 Years: 33%
- 6-10 Years: 17%
- Over 11 Years: 12%

** Graduate Student Status**
- Graduate Student: 28%
- Not a Graduate Student: 68%
Workshop 2 In-Person Delivery Attitudes. As seen in Figure 8, more positive attitudes (i.e., mean of the four separate attitude questions) were reported at posttest ($M = 3.80, SD = .53$) compared to pretest ($M = 3.28, SD = .65$), $t (5097) = 29.77, p < .001, \eta^2 = .34$; this result is considered to be a large effect size. With regard to specific items, significant changes were found for participants feeling less anxious, $t (5097) = 11.87, p < .001, \eta^2 = .21$; less fearful, $t (5097) = 17.65, p < .001, \eta^2 = .25$; more knowledgeable, $t (5097) = 29.77, p < .001, \eta^2 = .15$; and more confident with the provision of mental health crisis interventions, $t (5097) = 25.87, p < .001, \eta^2 = .25$. Attitudes toward crisis prevention and preparedness differed as a function of graduate student status (i.e., those who identified as graduate students demonstrated significantly greater changes in attitudes compared to those who were not graduate students and those who selected “not applicable”), number of prior school-related crisis hours (all groups significantly differed from one another, and those with fewer hours demonstrated greater change), prior community or agency crisis hours (i.e., all groups significantly differed from one another, and those with fewer hours demonstrated greater change), occupation (i.e., those who selected “other” as their occupation demonstrated significantly greater changes in attitudes as compared to mental health professionals and security/law enforcement), number of years in current occupation (i.e., all groups significantly differed from one another, and those with fewer years demonstrated greater change), and overall years spent in a school setting (i.e., those with 0 years demonstrated significantly greater changes in attitudes as compared to those with 1 to 5 years, 6 to 10 years, and 11 or more years; those with 1 to 5 years demonstrated significantly greater changes in attitudes compared to those with 6 to 10 years and 11 or more years).

Workshop 2 Virtual Delivery Attitudes. As seen in Figure 8, more positive attitudes (i.e., mean of the four separate attitude questions) were reported at posttest ($M = 3.79, SD = .55$) compared to pretest ($M = 3.25, SD = .68$), $t (1,030) = 29.77, p < .001, \eta^2 = .34$; this result is considered to be a large effect size. With regard to specific items, significant changes were found for participants feeling less anxious, $t (1,030) = 11.87, p < .001, \eta^2 = .21$; less fearful, $t (1,030) = 17.65, p < .001, \eta^2 = .25$; more knowledgeable, $t (1,030) = 29.77, p < .001, \eta^2 = .15$; and more confident with the provision of mental health crisis interventions, $t (1,030) = 25.87, p < .001, \eta^2 = .25$. Attitudes toward crisis prevention and preparedness differed as a function of graduate student status (i.e., those who identified as graduate students demonstrated significantly greater changes in attitudes compared to those who were not graduate students), number of school-related crisis hours (i.e., those with 0 hours demonstrated significantly greater change than those with 6 to 10 hours and 11 or more hours, and those with 1 to 5 hours and 6 to 10 hours demonstrated significantly greater changes than those with 11 or more hours), number of community or agency-related crisis hours (i.e., those with 0 hours demonstrated significantly greater changes in attitudes compared to those with 1 to 5 hours, 6 to 10 hours, and 11 or more hours; those with 1 to 5 hours demonstrated significantly greater changes than those with 11 or more hours), occupation (i.e., those who selected “other” as their occupation demonstrated significantly greater changes in attitudes compared to mental health professionals, school administration, and other mental health and health professionals), number of years in current occupation (i.e., those with 0 years demonstrated significantly greater changes in attitudes compared to those with 1 to 5 years, 6 to 10 years, and 11 or more years; those with 1 to 5 years demonstrated significantly greater changes than those with 11 or more years), and overall years spent in a school setting (i.e., those with 0 years and 1 to 5 years demonstrated significantly greater changes than those with 6 to 10 years and 11 or more years).
Figure 8. Mean Changes in Attitude Toward Crisis Prevention and Preparedness From Workshop 2 In-Person and Virtual Delivery

Note. Items on a 5-point scale, higher scores indicate more positive attitudes (e.g., 5 = not at all anxious, 1 = extremely anxious).

Workshop 2 In-Person Delivery Knowledge. As seen in Figure 9, Workshop 2 in-person delivery participant responses indicated significant increases in knowledge, $t(5,097) = 104.42$, $p < .001$, $h^2 = .07$, from pretest ($M = 7.27$ out of 13, $SD = 1.98$) to posttest ($M = 10.75$ out of 13, $SD = 1.94$). Knowledge gains differed as a function of graduate student status (i.e., graduate students demonstrated significantly greater changes in knowledge compared to those who identified as not a graduate student), number of school-related crisis training hours (i.e., those with 0 hours, 1 to 5 hours, and 6 to 10 hours demonstrated significantly greater changes in knowledge compared to those with 11 or more hours), number of years in current occupation (i.e., those with 1 to 5 years demonstrated significantly greater changes in knowledge compared to those with 11 or more years), and overall number of years in a school setting (i.e., those with 1 to 5 years demonstrated significantly greater changes in knowledge compared to those with 11 or more years). There were no significant differences in knowledge gain by number of community or agency-related crisis training hours and occupation.

Workshop 2 Virtual Delivery Knowledge. As seen in Figure 9, Workshop 2 virtual delivery participant responses indicated significant increases in knowledge, $t(1,030) = 48.35$, $p < .001$, $h^2 = .07$, from pretest ($M = 7.08$ out of 13, $SD = 1.95$) to posttest ($M = 10.64$ out of 13, $SD = 1.92$). Knowledge gains differed as a function of number of school-related crisis training hours (i.e., those with 0 hours demonstrated significantly greater changes in knowledge compared to those with 11 or more hours) and community or agency-related crisis training hours (i.e., those with 1 to 5 hours demonstrated significantly greater changes in knowledge compared to those with 11 or more hours). There were no significant differences in knowledge gain by graduate student status, occupation, number of years in current occupation, and overall years spent in a school setting.

Figure 9. Mean Percentage of Items Correct From the Pretest and Posttest for Workshop 2 In-Person and Virtual Delivery
Satisfaction

Overall, participants in Workshop 2’s in-person delivery indicated high satisfaction with their workshop experience ($M = 4.60$ out of $5$, $SD = .53$) and that they were highly satisfied with the outcomes of the workshop ($M = 4.48$ out of $5$, $SD = .54$). Participants in Workshop 2’s virtual delivery also indicated high satisfaction with their workshop experience ($M = 4.49$ out of $5$, $SD = .57$) and that that they were highly satisfied with the outcomes of the workshop ($M = 4.40$ out of $5$, $SD = .53$). The results from the satisfaction analyses are presented in Table 2.

Table 2. Comparison of Results for Workshop 2 In-Person and Virtual Delivery Satisfaction Responses

<table>
<thead>
<tr>
<th>Question</th>
<th>2022 In-Person Mean (SD)</th>
<th>2022 Virtual Mean (SD)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q1. Objectives were clearly stated.</td>
<td>4.66 (.62)</td>
<td>4.62 (.59)</td>
</tr>
<tr>
<td>Q2. The content was clear/understandable.</td>
<td>4.56 (.66)</td>
<td>4.48 (.68)</td>
</tr>
<tr>
<td>Q3. Materials were well organized.</td>
<td>4.50 (.75)</td>
<td>4.32 (.88)</td>
</tr>
<tr>
<td>Q4. Trainer(s) was/were well organized.</td>
<td>4.68 (.61)</td>
<td>4.53 (.71)</td>
</tr>
<tr>
<td>Q5. Materials facilitated participation.</td>
<td>4.53 (.69)</td>
<td>4.42 (.77)</td>
</tr>
<tr>
<td>Q6. Trainer(s) facilitated participation.</td>
<td>4.66 (.61)</td>
<td>4.54 (.71)</td>
</tr>
<tr>
<td>Q7. This workshop increased my knowledge.</td>
<td>4.63 (.61)</td>
<td>4.55 (.61)</td>
</tr>
<tr>
<td>Q8. I will be able to apply the information and skills learned to my professional duties.</td>
<td>4.56 (.61)</td>
<td>4.48 (.61)</td>
</tr>
<tr>
<td>Q9. I recommend this workshop.</td>
<td>4.57 (.68)</td>
<td>4.46 (.72)</td>
</tr>
<tr>
<td>Q10. I recommend this/these trainer(s).</td>
<td>4.65 (.65)</td>
<td>4.51 (.74)</td>
</tr>
<tr>
<td>I am now able to do the following:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Q11. Report improved attitudes toward, and readiness to provide, school crisis interventions.</td>
<td>4.50 (.62)</td>
<td>4.41 (.63)</td>
</tr>
<tr>
<td>Q12. Identify variables that determine the number of individuals likely traumatized by a given crisis.</td>
<td>4.52 (.60)</td>
<td>4.44 (.61)</td>
</tr>
<tr>
<td>Q13. Differentiate common crisis reactions from signs of mental illness.</td>
<td>4.46 (.62)</td>
<td>4.36 (.64)</td>
</tr>
<tr>
<td>Q14. Identify the school crisis interventions specified by the PREPaRE acronym.</td>
<td>4.48 (.60)</td>
<td>4.39 (.60)</td>
</tr>
<tr>
<td>Q15. Identify the triage risk factors that predict psychological trauma.</td>
<td>4.47 (.60)</td>
<td>4.38 (.59)</td>
</tr>
<tr>
<td>Q16. Identify the warning signs (crisis reactions) that signal psychological traumatization.</td>
<td>4.48 (.59)</td>
<td>4.38 (.59)</td>
</tr>
<tr>
<td>Q17. Sequence crisis interventions from least to most restrictive.</td>
<td>4.50 (.60)</td>
<td>4.42 (.61)</td>
</tr>
<tr>
<td>Q18. Match the degree of psychological trauma risk to the appropriate school crisis interventions.</td>
<td>4.46 (.60)</td>
<td>4.39 (.61)</td>
</tr>
<tr>
<td>WS 2 Satisfaction</td>
<td>4.60 (.53)</td>
<td>4.49 (.57)</td>
</tr>
<tr>
<td>WS 2 Outcomes</td>
<td>4.48 (.54)</td>
<td>4.40 (.53)</td>
</tr>
</tbody>
</table>

Strengths of Workshop 2 In-Person Delivery

Five broad themes emerged from the Workshop 2 in person delivery qualitative analysis. The most prominent theme related to discussions/group time/opportunities to participate/collaboration (20%). Other prominent themes
included helpful/useful information/informative/increased awareness (16%), good instructor—general (16%), role plays/hands-on activities (14%), and good instructor—knowledgeable (12%).

Development of Crisis Prevention and Intervention Knowledge and Skills. Within the responses for Workshop 2’s in-person delivery, three areas of knowledge or skills gained emerged. The most prominent theme pertained to the process of psychological triage/evaluating psychological trauma (29%). Other themes that emerged included understanding a systematic approach or model to respond to crisis situations, including steps, structures, etc. (25%), and awareness of intervention techniques (20%).

Suggestions for Improvement. For the in-person Workshop 2, only two improvement themes emerged throughout the survey responses. Participants suggested that workshop materials need improvement (10%), and 43% of responses indicated not applicable/none when offering suggestions for improving this workshop.

Strengths of Workshop 2 Virtual Delivery

Six broad themes emerged from the Workshop 2 virtual deliver qualitative analysis. The most prominent theme pertained to discussions/group time/opportunities to participate/collaborate/breakout rooms (21%). Other prominent themes included role plays/hands-on activities (15%), helpful/useful information/informative/increased awareness (14%), instructors were knowledgeable/experienced (14%), handouts/form templates are good resources (11%), and good instructor—general (11%).

Development of Crisis Prevention and Intervention Knowledge and Skills. Within the virtual Workshop 2, four areas of knowledge or skills gained emerged. Similar to the in-person offering, the most prominent skill area endorsed was the process of psychological triage/evaluating psychological trauma (28%). Other highly endorsed areas included awareness of intervention techniques (22%) and understanding a systematic approach or model to respond to crisis situations, including steps, structures, etc. (22%).

Suggestions for Improvement. In reviewing the virtual Workshop 2 evaluation responses, three broad themes emerged. Of the three major themes, the most prominent was not applicable/none (36%). Additional
improvement themes related to the workshop being hard to do virtually/better in person (15%) and the workshop materials needing improvement (11%).

Summary and Recommendations

In 2022, participants in both PREP4RE workshops demonstrated significant improvements in overall attitudes toward crisis prevention and intervention, regardless of in-person or virtual delivery. Interestingly, in-person Workshop 1 participants demonstrated a slight increase in anxiety related to crisis preparedness. Despite being statistically significant, the increase was minor, and all other participant groups demonstrated decreased anxiety from pre- to posttest. Across both workshops, regardless of in-person or virtual delivery, participants who identified as graduate students demonstrated significantly greater attitude change compared to those who were not graduate students. Participants with fewer prior school-related crisis training hours and community or agency-related crisis training hours exhibited greater attitude change compared to those with more training experience. Similarly, participants with fewer years in their current occupation demonstrated significantly greater attitude change compared to those with more career experience; participants with fewer overall years in a school setting demonstrated significantly greater attitude change compared to those with more experience in school settings.

Participants in both workshops also demonstrated significant changes in school preparedness and intervention-related knowledge regardless of in-person or virtual delivery. In both workshops, regardless of virtual or in-person delivery, participants with fewer prior school-related crisis training hours demonstrated significantly greater knowledge gain compared to those with more training experience. Across in-person and virtual Workshop 1 participants, those who identified as graduate students demonstrated significantly greater knowledge gain compared to those who were not graduate students. Additionally, in-person and virtual Workshop 1 participants with fewer community or agency-related crisis training hours and fewer years in their current occupation demonstrated significantly greater knowledge gain compared to those with more experience. Unique to in-person Workshop 2 participants, those with fewer overall years in a school setting demonstrated significantly greater knowledge gain compared to those with more experience in school settings.

Qualitative analyses of responses to open-ended questions indicated that participants’ feedback for PREP4RE administrations in 2022 was generally cohesive across both workshops and delivery formats. Endorsements of similar themes were present throughout all participant groups, albeit at different levels, signifying consistent content delivery. Participants widely noted the organized, structured delivery style of content as a strength and reported that the information provided was helpful and valuable. Participants expressed appreciation for trainers’ knowledge, experience, and presentation skills and noted that opportunities to discuss content, collaborate with others, and engage in hands-on activities helped them process the workshop content. Many participants also reported that the workshop handouts and resources would support them in facilitating crisis preparedness and response efforts upon returning to their schools.

When considering areas of growth or continued improvement, participants were generally satisfied with the overall workshop experience, the most common theme across both workshops and delivery formats related to having no specific suggestions for improvement. While participants often referred to the workshop materials as helpful and useful, they also suggested that the materials needed improved accessibility (e.g., a preference for hard copies of handouts, better organization, and being more user-friendly). Many individuals who participated in virtual workshops reported challenges with the virtual format. While participants generally felt the virtual format to be informative and relevant, they often noted the desire to participate in person to increase opportunities for group collaboration. Participants largely acknowledged PREP4RE as a comprehensive introduction to school crisis prevention and management. Many reported an overall increased sense of preparedness, planning abilities, and awareness of crisis work in schools, as well as an increased understanding of crisis team roles, the Incident Command System, and EOP functional annexes. Participants also widely reported awareness of triage processes and intervention techniques as content and skill gains.
References


