A Preliminary Evaluation of Interactive Video Simulation Training for Campus Law Enforcement in California

Courtney Ann Kase, Karen Chan Osilla, Rachana Seelam, Michelle W. Woodbridge, Bradley D. Stein

Campus law enforcement professionals are tasked with promoting and maintaining a safe campus environment. They are first responders and are often the first professionals in a position to help support and assist a student experiencing psychological distress, or a student experiencing an event or situation that puts him or her at risk for psychological distress. Mental health problems are common among students. In one survey, nineteen percent of students in California’s higher education system reported experiencing serious psychological distress in the past 30 days, and 11 percent reported significant mental health–related academic impairment in the past year. Additionally, 11 percent of students reported feeling hopeless most or all of the time (Sontag-Padilla et al., 2014). Campus law enforcement professionals with the necessary knowledge and skills can play a particularly important role in identifying students experiencing psychological distress, consulting with mental health personnel, and referring students to mental health supports and services when responding to events involving members of a campus community (Margolis and Shtull, 2012; Reuland and Margolis, 2003; Martinez, 2012; Hails and Borum, 2003).

To enhance the skills of campus law enforcement professionals, statewide Prevention and Early Intervention (PEI) activities funded by California counties through the California Mental Health Services Authority (CalMHSA) under Proposition 63 included PEI training in mental health for law enforcement professionals in California’s higher education systems. In June and July 2014, the California State University (CSU) system hosted 14 four-hour Interactive Video Simulation Training (IVST) sessions at five locations for CSU law enforcement professionals, law enforcement professionals from University of California and California Community College campuses, and local police agencies. Attendees represented more than 28 different law enforcement agencies from higher education campuses and communities surrounding such campuses. The IVST sessions use an innovative portable simulator, which enables law enforcement professionals to interact in real time with life-size, video-projected subjects who role-play individuals experiencing psychological distress. Participants make step-by-step decisions on how best to respond to the presented situation. In addition to the IVST sessions, participants are taught how to recognize the signs of mental health problems, deescalate conflict, and provide on-campus and off-campus referrals for mental health services (Office of the Chancellor, California State University, 2014; Santa Clara County Mental Health Department, 2014). The training aims to provide campus law enforcement professionals with the knowledge and skills to help in the effective identification of, assessment of, and intervention with students experiencing psychological distress (Council of State Governments, 2002; Hails and Borum, 2003; Margolis and Shtull, 2012; Reuland and Schwarzfield, 2008; Schwarzfield, Reuland and Plotkin, 2008; Office of the Chancellor, California State University, 2014). This report describes a preliminary evaluation of the 14 IVST sessions to measure participants’ perceptions of the training’s usefulness and quality, as well as changes in participants’ self-reported (1) confidence to refer, (2) confidence to intervene, (3) likelihood to refer, and (4) likelihood to intervene if encountering a student experiencing psychological distress.

Methods

Eighty-eight percent (n = 192) of participants in the IVST trainings completed a retrospective paper or online survey immediately after the training. The survey assessed participants’ pre- and post-training self-reported confidence and likelihood to refer and intervene with students experiencing psychological distress.

Measures

To measure the impact of training on participants’ self-reported confidence and likelihood to refer, as well as their confidence and likelihood to intervene with students, we adapted items from the Suicide Prevention Survey (Wyman et al., 2008). This measure was designed for evaluations of the Question, Persuade, and Refer...
(QPR) gatekeeper-training program in high schools and colleges (Tompkins and Witt, 2009; Wyman et al., 2008).

We used four items to assess training usefulness and quality, each along a five-point Likert scale, with lower scores indicating lower perceived importance or dissatisfaction with training. Items included, "Please rate the quality of training that you received," and "It is important for law enforcement and related staff to attend trainings like this one to support students/youth with mental health problems."

We measured individuals’ self-reported confidence to refer and likelihood to intervene using nine items along a four-point Likert scale (1 = strongly disagree and 5 = strongly agree) (measures adapted from Tompkins and Witt, 2009; Shaffer et al., 1991). Each item began with, "If a student showed signs that s/he might be experiencing psychological distress, I would . . ." and was followed by such prompts as, "Encourage him/her to get professional help (e.g., hospital, mental health center, counselor, etc.)."

**Analyses**

Paired t-tests were used to assess changes between pre- and post-training scores and to determine whether the pre- and post-training mean outcomes varied significantly (p < 0.05).

**Results**

Participating training respondents were 84 percent male (n = 162). They identified as 31 percent Latino (n = 58); 44 percent white, not Latino (n = 83); 10 percent African-American (n = 18); 8 percent Asian (n = 16); and 7 percent other (n = 13). Respondents’ roles were identified as 81 percent police officer (n = 155), 12 percent other security (n = 22), < 1 percent counselor (n = 1), and 7 percent other staff (n = 13). About 85 percent of respondents reported currently working with undergraduate students, and about 58 percent reported currently working with graduate students.

**Perceptions of the Training**

Ninety-six percent of the participants reported that attending the training was somewhat or very helpful and agreed that it was important for law enforcement professionals to attend trainings to support students with mental health problems. Nearly 90 percent of participants reported that the training met the needs of the students or youth they interact with on campus (see Table 1).

**Changes in Confidence and Likelihood to Refer and Intervene as Result of Training**

Table 2 shows the average pre- and post-training scores on participants’ confidence and likelihood to refer and intervene and the results of the paired t-test to determine whether beliefs differed significantly from pre- to post-training. Participants reported significant improvements on all four outcomes. After attending the training, participants expressed greater confidence and likelihood to refer students with mental health problems to resources, as well as greater confidence and likelihood to intervene if a student showed signs of psychological distress.

**Discussion**

We evaluated law enforcement professionals’ ratings of a sample of IVST training sessions for referring and intervening with students experiencing psychological distress and acting as gatekeepers to the metal health system. We assessed how participants’ self-reported confidence and likelihood of identifying, assessing, and intervening to support students experiencing psychological distress changed post-training. Participants reported finding the sessions helpful and agreed that the training was important for them and their peers to attend. Participants indicated increased confidence and likelihood to assist a student or youth experiencing psychological distress. These findings are similar to recently reported outcomes of PEI trainings among staff and students in the state’s higher education system (Osilla et al., 2015).

These findings should be considered in light of study limitations. Our outcomes are subjective, because we asked about participants’ self-reported confidence and likelihood to refer and intervene, and we do not know to what extent the results would correlate with more-objective assessments of training.
outcomes, such as skill or actual behavior post-training. Also, although prior studies report the validity of retrospective surveys (Rockwell and Kohn, 1989; Rohs, 1999; Pratt, McGuigan, and Katzev, 2000; Lam and Bengo, 2003), a “true” baseline survey was not administered prior to the training. Finally, we examined outcomes only immediately after the training; whether the positive shifts in knowledge and attitudes are maintained over the longer term is unknown, and further investigation is warranted. Nonetheless, our findings indicate that IVST, as presented in the settings included within this evaluation, can result in immediate improvements in law enforcement professionals’ confidence and likelihood to refer students to mental health resources and services, as well as confidence and likelihood to intervene if a student shows signs of experiencing psychological distress. If campus law enforcement professionals are first responders to students experiencing psychological distress, and if higher education institutions want them to respond appropriately and effectively, then they need the knowledge and skills to carry out these tasks. More research is needed to better understand how to equip law enforcement to identify students in psychological stress, how IVST compares with other trainings, and whether skills learned during the training correlate with actual changes in behavior.

Table 2. Significant Changes on All Measures from Pre- to Post-Training

<table>
<thead>
<tr>
<th>Measure Subscales</th>
<th>Pre-Training Mean (SD)</th>
<th>Post-Training Mean (SD)</th>
<th>Paired T-Test P-Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Confidence to refer(^a)</td>
<td>3.84 (0.72)</td>
<td>4.43 (0.57)</td>
<td>&lt;0.0001</td>
</tr>
<tr>
<td>Confidence to intervene(^a)</td>
<td>4.00 (0.76)</td>
<td>4.51 (0.55)</td>
<td>&lt;0.0001</td>
</tr>
<tr>
<td>Likelihood to refer(^b)</td>
<td>3.18 (0.64)</td>
<td>3.61 (0.54)</td>
<td>&lt;0.0001</td>
</tr>
<tr>
<td>Likelihood to intervene(^b)</td>
<td>3.34 (0.65)</td>
<td>3.80 (0.38)</td>
<td>&lt;0.0001</td>
</tr>
</tbody>
</table>

NOTE: SD = standard deviation.
\(^a\) Five-point scale: 1 = strongly disagree, 2 = disagree, 3 = neither agree or disagree, 4 = agree, 5 = strongly agree.
\(^b\) Four-point scale: 1 = not at all likely, 2 = somewhat likely, 3 = likely, 4 = very likely.
References


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Courtney Ann Kase, Karen Chan Osilla, Rachana Seelam, and Bradley D. Stein are researchers for the RAND Corporation. Michelle W. Woodbridge is a researcher for SRI International.

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This research was conducted in RAND Health, a division of the RAND Corporation. A profile of RAND Health, abstracts of its publications, and ordering information can be found at www.rand.org/health.

CalMHSA
The California Mental Health Services Authority (CalMHSA) is an organization of county governments working to improve mental health outcomes for individuals, families, and communities. Prevention and early intervention programs implemented by CalMHSA are funded by counties through the voter-approved Mental Health Services Act (Prop. 63). Prop. 63 provides the funding and framework needed to expand mental health services to previously underserved populations and all of California’s diverse communities.

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