

Effects of emotion recognition training on aggressive behaviour in antisocial youth

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		<input type="checkbox"/> Protocol
Registration date 09/05/2012	Overall study status Completed	<input type="checkbox"/> Statistical analysis plan
		<input checked="" type="checkbox"/> Results
Last Edited 17/01/2019	Condition category Mental and Behavioural Disorders	<input type="checkbox"/> Individual participant data

Plain English summary of protocol

Background and study aims

Previous research has shown that juvenile offenders overestimate the presence of anger in ambiguous facial expressions. This might result in inappropriate social responses, such as reacting aggressively or violently, which might help explain adolescent offender aggression. Using a computer-generated facial expression sequence that runs from anger to happiness, training can change the point at which an ambiguous expression changes from being perceived as angry to being perceived as happy. In pilot work, training was associated with a reduction in aggressive behaviour. The aim of our new study is to repeat and extend this work over a longer period. We think that modifying emotion perception to induce a shift towards perceiving an expression as happy instead of angry will reduce subsequent aggressive behaviour.

Who can participate?

The study will recruit participants detained at a secure children's home in South Wales, aged between 13 and 17 years old.

What does the study involve?

The participants will be randomly allocated to either a treatment group, which will receive feedback designed to shift their perceptions of ambiguous faces as displaying happiness rather than anger, or a control group, which will receive feedback not designed to shift their perceptions.

What are the possible benefits and risks of participating?

Participants in the treatment group may display reduced levels of aggression following completion of the computer-based intervention. There is no evidence to suggest that completing this type of intervention will lead to an increase in displays of aggressive behaviour. As the study will use data that are collected as part of the daily running of the children's home, the intervention should have minimal adverse impact on the daily routine of the participants.

Where is the study run from?

Hillside Secure Children's Home in Neath, South Wales, UK

When is study starting and how long is it expected to run for?
April 2012 to September 2012

Who is funding the study?
Investigator initiated and funded

Who is the main contact?
Professor Marcus Munafo
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Contact information

Type(s)
Scientific

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Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers
N/A

Study information

Scientific Title
Effects of emotion recognition training on aggressive behaviour in antisocial youth

Study objectives
Previous research has found that juvenile offenders have a perceptual bias for overestimating the presence of anger in ambiguous facial expressions. Allied with the growing evidence to

suggest that a misinterpretation of ambiguous emotional cues can result in inappropriate social responses, such as reacting aggressively or violently this suggests a possible explanatory pathway for adolescent offender aggression.

Our research has shown that it is possible to modify how aggressive young people perceive ambiguous facial expressions of emotion. Using a computer-generated morph facial expression sequence that runs from anger to happiness, training can change the point at which an ambiguous expression changes from being perceived as angry to being perceived as happy. In pilot work, training was associated with a reduction in both self- and staff-rated aggressive behaviour. The aim of this study is to replicate and extend these results using objective measures of aggression over a longer follow-up period.

We hypothesise that the modification of emotion perception, designed to induce a shift towards perceiving an expression as happy instead of angry, will lead to a reduction in subsequent aggressive behaviour compared with those in a control condition.

Ethics approval required

Old ethics approval format

Ethics approval(s)

University of Nottingham, Institute of Work, Health and Organisation

Study design

Double-blind placebo-controlled trial

Primary study design

Interventional

Secondary study design

Randomised controlled trial

Study setting(s)

Other

Study type(s)

Treatment

Participant information sheet

Not available in web format, please use the contact details below to request a patient information sheet

Health condition(s) or problem(s) studied

Aggression among juvenile offenders.

Interventions

Participants will be randomised to receive either active or placebo emotion recognition training.

The computerised intervention comprises three phases: first assessment, training and second assessment. In all three phases, faces on a happy to angry morph sequence are presented briefly, and participants have to make a two-alternative forced-choice judgement about the emotion of the face. In the first assessment phase, the point at which the participant changes

from perceiving ambiguous faces as happy rather than angry is calculated. In the training phase the procedure is similar but feedback is provided after each trial. In the active condition this feedback is designed to shift the point at which the participant changes from perceiving ambiguous faces as happy rather than angry. In the placebo condition this feedback is designed not to change this point. In the second assessment phase, the point at which the participant changes from perceiving ambiguous faces as happy rather than angry is again calculated, to confirm the effect of the training phase.

Participants will complete the computerised intervention four times over the course of one week.

Intervention Type

Behavioural

Primary outcome measure

Staff Rating Scale of Young Persons Aggression - this scale is based on a measure used by McMurran (2007), which examined aggression in adult male offenders, modified for use with adolescents. It comprises six behavioural categories:

1. Looking at someone in an aggressive way
2. Deliberately getting in someones way
3. Being verbally aggressive
4. Being aggressive in front of someone without touching them (throwing objects, spitting, slamming doors etc.)
5. Hitting, punching or kicking someone
6. Using something as a weapon to hit someone

Each participants key worker will be required to make a judgment about how often the participant has displayed the corresponding aggressive behaviour during the day, and rate each of the six items on a scale of 0 (not present at all) to 100 (present all the time). The measure will be completed daily for a month pre-intervention to establish a base rate of aggression, and daily for a month post-intervention to assess whether there has been any behaviour change.

Secondary outcome measures

1. Participant Behaviour Diary

This diary is a self-report version of the Staff Rating Scale described above. The participants record any instances of aggressive behaviour they display during each day of the week and are instructed to tick the appropriate box each time they acted in an aggressive manner, defined by one of the six categories. The measure will be completed daily for a month pre-intervention to establish a base rate of aggression, and daily for a month post-intervention to assess whether there has been any behaviour change.

2. Frequency of Talk-Times

A talk-time is an early intervention strategy used by members of staff when they identify that a young person is starting to become disruptive or unruly. Each talk-time is noted in the staff daily recordings on each of the young people and this record will be summarized daily for a period of one month pre-intervention to establish a base rate of aggression, and or a month post-intervention to assess whether there has been any behaviour change.

3. Frequency of Sanctions

A sanction is a formal means of reproofing the young people for any infringement of the unit rules. This record will be summarized daily for a period of one month prior to the intervention to

establish a base rate of aggressive behaviour, and for a month after completion of the intervention to assess whether there has been any change in aggressive behaviour over this period.

4. Frequency of Restraints

A restraint is defined as any occasion when one or more staff members have to physically manage the behaviour of a young person. When a restraint takes place an official incident form is completed detailing the specifics of the event. This record will be summarized daily for a period of one month pre-intervention to establish a base rate of aggression, and for a month post-intervention to assess whether there has been any behaviour change.

5. Frequency of Bedroom Isolations

If a young person's behaviour on the unit is placing himself/herself or others in risk of harm he or she may be isolated in his or her bedroom. As soon as a young person is isolated in his or her bedroom a monitoring form is initiated. This record will be summarized daily for a period of one month pre-intervention to establish a base rate of aggression, and for a month post-intervention to assess whether there has been any behaviour change.

6. Early Release Decision

Those young people sentenced to custody by the courts and serving terms of six months or more are eligible to apply for early release. A decision on whether to grant this is taken by the Youth Justice Board and is based on the young person's progress whilst in custody, including the number of aggressive or violent incidents he or she has been involved in. Information about this decision will be collected from official records.

Overall study start date

01/03/2012

Completion date

31/12/2012

Eligibility

Key inclusion criteria

1. Juvenile offenders detained at a secure children's home in South Wales
2. Aged between 10 and 17 years old
3. A score of at least 20 on an aggression rating scale

Participant type(s)

Other

Age group

Child

Lower age limit

10 Years

Upper age limit

17 Years

Sex

Both

Target number of participants

40 participants (20 experimental, 20 control)

Key exclusion criteria

1. Participants with current psychotic symptoms, mood disorder or autism spectrum disorder
2. Concerns of the care planning team about the young persons ability to participate

Date of first enrolment

01/03/2012

Date of final enrolment

31/12/2012

Locations

Countries of recruitment

England

United Kingdom

Study participating centre

University of Bristol

Bristol

United Kingdom

BS8 1TU

Sponsor information

Organisation

University of Nottingham (UK)

Sponsor details

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NG7 2RD

Sponsor type

University/education

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ROR

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Funder(s)

Funder type

University/education

Funder Name

University of Nottingham (UK)

Alternative Name(s)

Funding Body Type

Private sector organisation

Funding Body Subtype

Universities (academic only)

Location

United Kingdom

Funder Name

University of Bristol (UK)

Alternative Name(s)

Universitas Bristolensis, bristoluniversity, bristoluni

Funding Body Type

Government organisation

Funding Body Subtype

Universities (academic only)

Location

United Kingdom

Results and Publications

Publication and dissemination plan

Not provided at time of registration

Intention to publish date

Individual participant data (IPD) sharing plan

IPD sharing plan summary

Not provided at time of registration

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Results article	results	01/05/2013	17/01/2019	Yes	No