## **Evaluating experiments**

Andy J. Wills

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## Spurious correlations

http://www.tylervigen.com/spurious-correlations

# Piracy and global warming

- ► Average global temperatures have risen over the last 300 years
- Number of cases of sea piracy have dropped over the same period
- Global warming and piracy are (negatively) correlated

## Piracy and global warming

- Average global temperatures have risen over the last 300 years
- Number of cases of sea piracy have dropped over the same period
- Global warming and piracy are (negatively) correlated
- Global warming caused by the absence of sea pirates?
- Would an effective way of reducing global warming be to encourage piracy?
- Absence of sea pirates caused by global warming?
- Would an effective way of reducing piracy be to increase our carbon emissions?
- Association does not demonstrate causation.

#### Depression and memory

- Depression is associated with over-general memory.
- Depression causes memory problems?
- Memory problems cause depression?
- Both causal directions?
- Neither causal direction (e.g. both caused by childhood trauma).
- ▶ It is not possible to distinguish between these accounts on the basis of correlational data.

## Longitudinal data does not solve this problem

- Use of night lights in infancy is correlated with myopia in later life (true).
- Seems causal? Causes must precede effects. The later myopia cannot cause the earlier use of night lights. So, night lights must be causing myopia?
- ▶ Ban night lights? (genuinely recommended on basis on these data).

# Third factor explanations are still possible in longitudinal research

- ► A third factor causes both the presence of night lights and myopia.
- Developing myopia in later life has a genetic component. If your parents are myopic, this increase the chance you will become myopic.
- Myopic adults, on average, favour higher levels of illumination. This drives their decision to use night lights in their baby's room.
- ► The parents' myopia causes both the presence of infant night lights and later myopia.
- ▶ Ban night lights? Clearly, this would be ineffective.

#### Correlation does not imply causation

- Correlational research is fundamentally limited.
- ▶ It is extremely unlikely that any two variables are completely unrelated.
- Many correlations in psychology are very small e.g.
  - Extroversion explaining 2% of the variation in some other variable.
  - 2% is detectably different from no correlation
  - but not meaningful (everything likely to be related to some degree).
- ► Partial solution set a minimum effect size (e.g. ignoring anything below 20% of variation).
- Still doesn't establish causation.

#### Determining causation through the Experimental Method

- Simplest form
  - ► Take two groups of people
  - Do different things to those two groups.
  - Measure something
- Independent variable Intended difference in what we do to the two groups
- Dependent variable The thing we measure

#### Example: Testing a treatment for depression

- Group 1 6 weeks of the new therapy
- ► Group 2 Nothing.
- ► Take measure of depression at end (e.g. Beck Depression Inventory).
- ▶ Group 1 are less depressed than Group 2
- ► This has the potential to show that the therapy *causes* a reduction in depression.
- Q: Other possibilities?

#### Pre-existing differences

- ► Group 1 6 weeks of the new therapy
- ► Group 2 Nothing.
- ▶ What if Group 1 were happier to start with?
- Approaches to this problem
  - Detection
  - Prevention

#### Detection

- ► Take pre-treatment measures
- e.g. Measure BDI of both groups before (and after) treatment period.

	Pre	Post
Therapy	25	5
Control	25	25

#### Prevention

- Construct groups such that we eliminate pre-existing differences.
- Matching Take BDI measures for everyone. Allocate people to groups in such a way that the average BDI for the two groups is identical (or at least, minimized).
- Randomization Allocate people to groups randomly.
- Matching versus Randomization pros and cons.

## Our therapy experiment

- Use large, randomized groups.
- ► Take pre-treatment measures
- ▶ Treatment caused the reduction in depression?

	Pre	Post
Therapy	25	5
Control	25	25

## Confounding variables

▶ Any variable, other than the one you are attempting to study, that varies between conditions, and which could potentially have led to the effect you observe.

#### **Attrition**

- Attrition participants dropping out before the end of the study
- ► If attrition rates vary between conditions, you may have a major problem.

#### Example

Pre-treatement BDI scores

						Mean
Therapy	6	8	12	15	30	14.2
Control	6	8	12	15	30	14.2

- ► The most-depressed 20% drop out of therapy (perhaps because the therapy is quite demanding).
- There are no drop-outs in the control condition (there's not much to drop out from).
- Both therapy and control are inert (no effect) post-treatment BDI equals pre-treatment BDI.

## Example

► Pre-test BDI scores

						Mean
Therapy	6	8	12	15	30	14.2
Control	6	8	12	15	30	14.2
► Post-t	est	BDI	scor	es		
						Mean
Therapy	6	8	12	15		10.25
Control	6	8	12	15	30	14.2

A therapy we know to be ineffective appears to have worked, due to non-random differential attrition.

#### Placebo effect

- Classic example
  - Someone has a headache
  - Give them a pill with no active ingredient
  - ► Tell them it's a headache tablet
  - Their headache symptoms reduce
- Lesson In order to assess drug effectiveness you need to test drug vs. placebo, NOT drug vs. nothing.
- The placebo effect typically accounts for some, but not all, of a drug's effectiveness.
- ▶ In the case of anti-depressant medication, the effect seems to be almost entirely placebo.

## Placebo effect in psychological therapy

- ▶ Perhaps the therapy is inert?
- ► The treatment group are happier because they have the expectation that what they are receiving will work.
- Problem a placebo pill is known to be inert; what is the equivalent in therapy?
- ► There is no agreement there's someone willing to endorse the effectiveness of almost any therapy.

## Placebo effect in psychological therapy

- ➤ Solution set out to show that your new therapy works better than an existing treatment (or, as well as existing treatment, if yours is better in some practical way e.g. cheaper).
- Problem this is seldom done.
- ▶ Worse problem where it is done, treatments seldom differ.
- ► Example Posting a pamphlet on CBT as effective as 6 weeks of 1-to-1 sessions with therapist

#### Demand characteristics

▶ Participants' responses may be affected by a desire to comply with what they think the experimenter wants to see.

#### Example - Evaluative conditioning

- ▶ Pairing something neutral with something people already like increases their liking of the neutral item.
- Applied in advertising
- Coke can paired with beautiful smiling people.
- Department store paired with heart-warming story of cross-species friendship

## Evaluative conditioning - Experimental demonstration

- Show picture of soft-drink can.
- Pair repeatedly with something positive.
- Liking ratings go up in this treatment group...
- but not in a control group where the can and smiles are both presented, but in an unpaired fashion.
- Evidence for evaluative conditioning?

## Evaluative conditioning - Alternative explanation

▶ Participant thinks - "what's going on here? The experimenter is showing me this coke can and then smiley faces. I think they expect me to like coke more as a result. I wouldn't want to disappoint them so sure, let's give it a higher rating than I did last time".

## Confounding variables

Any variable, other than the one you are attempting to study, that varies between conditions, and which could potentially have led to the effect you observe.

#### Confounds discussed so far...

- Pre-existing differences (address by matching or randomization)
- ▶ Differential attrition (major issue, some partial solutions)
- ► Hawthorne effect / Placebo effect
- Demand charcteristics

#### Therapy example

- ► Compare meditation-based therapy with relaxation training.
- Large, randomized groups.
- No pre-treatment differences in BDI
- No differential attrition
- ▶ BDI drops more for meditation than relaxation.
- ▶ Meditation is the more effective treatment.

#### Therapy example - Closer look

- ► Compare meditation-based therapy with relaxation training.
  - Meditation Delivered by the people who developed the treatment
  - Relaxation Delivered by people with no particular investment in relaxation therapy, who have been on a one-week training course in relaxation therapy.
- Large, randomized groups.
- ▶ No pre-treatment differences in BDI
- ▶ BDI drops more for meditation than relaxation.
- ▶ Meditation is the more effective treatment.

#### Therapy example - Closer look

- ► Compare meditation-based therapy with relaxation training.
  - Meditation Delivered by the people who developed the treatment
  - Relaxation Delivered by people with no particular investment in relaxation therapy, who have been on a one-week training course in relaxation therapy.
- ▶ Alternative explanation? It's not the type of therapy that matters. It's some combination of therapist's belief in the treatment, their experience in delivering it, their general level of therapeutic expertise.

#### Experimenter Effects - Data analysis - Example

- Diary entries as a measure of happiness.
- ▶ Participants write about their feelings
- Experimenter rates for level of happiness.
- ► If experimenter knows which condition the participant is in, this may bias their assessment of happiness.

#### Experimenter Effects - Data analysis

- Objective measures immune?
- No! Data analysis typically involves many decisions, all open to bias.
  - Should I exclude outliers?
  - If so, what's the cut-off?
  - Should I use a parametric or non-parametric test?
  - Are these tests multiple comparisons I should correct for, or separate analyses (for which I don't correct)?
- ► If the experimenter knows which condition the participants are in, this could bias their decisions.

#### Data analysis - Example

- My theory predicts people react more quickly to auditory than to visual alarm signals.
- ▶ I find this result if I exclude all reaction times above 3 seconds
- But not if I keep all RTs
- ▶ and not if I exclude all reaction times below 100ms.
- ▶ I choose the 3 second cut-off
- Am I sure that decision was unbiased?

# Blind testing

- Single-blind testing participant does not know which condition they are in.
  - e.g. Drug vs. placebo. Participants do not know which condition they are in.
- ▶ Double-blind testing single-blind testing plus the experimenters do not know which condition is which until after they have completed their analysis.

#### Order effects

- ► Auditory versus visual alarm signals, within-subjects design
- ▶ Visual (300ms)  $\rightarrow$  Auditory (250ms)
- ► Auditory faster?
- Or, practice effect?

#### Order effects

- ► Auditory versus visual alarm signals, within-subjects design
- ▶ Auditory (250ms)  $\rightarrow$  Visual (300ms)
- ► Auditory faster?
- Or, fatigue effect?

#### Order effects

- Auditory versus visual alarm signals, within-subjects design
- Randomly allocate participants to the two orders
- ► Auditory (250ms) → Visual (300ms)
- ► Visual (300ms) → Auditory (250ms)
- Auditory faster irrespective of order.
- No practice or fatigue effect (mean RT across conditions 275 ms at time 1 and time 2).

#### Difference versus no difference designs

- ► The preferred hypothesis is that people differ in the speed with which they react to auditory and visual alarm signals.
- ► The alternative theory against which this is compared is that there is no difference (nil hypothesis).
- Problem Experimental control is never perfect.
- Thus the nil hypothesis is almost certainly wrong, and detectably so if you test enough people.
- ▶ Thus the result of the study is known before you run it.
- ► Thus There was no point in running it.

#### Better alternatives 1

- One-tailed tests
  - ▶ The preferred theory is that auditory is faster.
  - ► The alternative theory against which this is compared is that there is no difference (nil hypothesis).
  - If you find visual faster, you have disproved your theory.
  - So, whatever the result, there was a point to running this experiment (because the theory was falsifiable).

#### Better alternatives 2

- Ordinally different theories
  - ▶ One well-established theory predicts that auditory is faster.
  - Another well-established theory predicts that visual is faster.
  - Whatever you find in this study, you've gained information (except in the unlikely case where the nil hypothesis was true).

# Further reading/ watching

Only lecture content on these topics is examinable.

- https://www.youtube.com/watch?v=NW2EmATcb6o
- http://www.youtube.com/watch?v=ZgXfWmgA9NE (don't watch this one if you are easily upset or offended)
- http://en.wikipedia.org/wiki/Hawthorne\_effect

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