

City Research Online

City, University of London Institutional Repository

Citation: Clarke, C.S. ORCID: 0000-0003-0496-0597 and Mackintosh, B. (2016). Cognitive Bias Modification Training & Exercise: For Alleviating Depression, Anxiety & Stress Related Disorders. Poster presented at the Economic Social Research Council Conference 2016, 16 Jun 2016, Liverpool, UK.

This is the accepted version of the paper.

This version of the publication may differ from the final published version.

Permanent repository link: http://openaccess.city.ac.uk/id/eprint/23114/

Link to published version:

Copyright and reuse: City Research Online aims to make research outputs of City, University of London available to a wider audience. Copyright and Moral Rights remain with the author(s) and/or copyright holders. URLs from City Research Online may be freely distributed and linked to.

City Research Online:

http://openaccess.city.ac.uk/

publications@city.ac.uk



Cognitive Bias Modification Training & Exercise: For Alleviating Depression, Anxiety & Stress Related Disorders.



Study Aim

This study aims to investigate how cognitive interpretation biases could be trained and modified and used along side moderate exercise, to alleviate the symptoms of anxiety, depression, and stress related disorders.

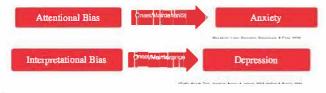
Hypothesis one Participants in the CBM & Exercise condition will have a greater decrease in symptoms of anxiety, depression and stress from session one to session two than the exercise condition or CBM condition alone. There will be no difference from session one to session two in the control condition.

Hypothesis two Participants in the CBM conditions will have a greater decrease in SST cognitively loaded scores between sessions one and two, relative to the non-CBM conditions and non-loaded condition.

Background

Cognitive biases are rooted in cognitive functions, in clinical populations; suggesting that anxiety and stress-related symptoms could be considerably reduced^{1, 9}.

Moderate exercise is advocated to reduce emotional problems and maladaptive mood², however exercise is only mood enhancing when performed at a manageable level⁹.



Methods

Condition 1: CBM training program (N=20),

Condition 2: Moderate Exercise protocol (N=20),

Condition 3: CBM training program & Exercise protocol (N=20),

Condition 4: Control (N=20).

DV's; Anxiety; STAI, Depression; BDI-II, Stress; PSS, Cognitive interpretation biases; SST.

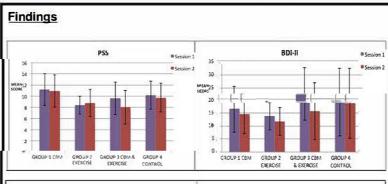
CBM training program developed using 5 sets of 10 ambiguous scenarios, that are trained to be interpreted positively. In each set of 10; 6 focused on exercise anxiety, 2 on social anxiety and 2 on physical anxiety.

Moderate exercise protocol in accordance with previous research³ and conducted in the University of Essex Sports labe

Seraphine Clarke & Mackintosh B

Department of Psychology, University of Essex Contact: ClarkePsy@outlook.com

Results



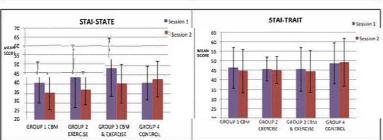


Figure 1 results by experimental condition, for Stress (PSS), State anxiety (STAI-state), Trait anxiety (STAI-trait), Depression (BDI-II).

CBM condition; significant decrease in depressive symptoms, state anxiety and perceived stress, but not trait anxiety.

Exercise condition; significant decrease in depressive symptoms, but not state or trait anxiety, or perceived psychological stress.

CBM & Exercise condition; significant decrease in depressive symptoms and psychological stress. However no significant decrease in state or trait anxiety.

Control condition; no significant decrease in symptoms of anxiety, depression, however there was significant decrease in perceived stress

There was no significant effect of experimental condition on negative interpretation bias scores (SST).

Discussion

When exercise is used alongside treatments for anxiety and depression; such as CBM and CBT, effectiveness of these treatments is greatly increased.

Previous research found that regular exercise acts as a prevention of developing anxiety and depression⁶.

Therefore individuals with maladaptive mood, could benefit from the mood-elevating effect of moderate exercise, suggesting that anxiety and stress-related symptoms could be considerably reduced in vulnerable populations^{5, 9}.

Conclusions

Findings from the current study suggest that exercise and CBM training have an accumulative effect on reducing anxiety, depression and stress. Furthermore the current study is progressing research into modifying and training of cognitive interpretation biases.

Once the paradigm of both attentional and interpretational cognitive biases are formed there are vast implications for how CBM could be used within non-clinical and clinical treatments for depression, anxiety and stress related disorders; especially milder cases.

Future research will investigate cognitive bias modification training over a series of treatment sessions to increase effectiveness.

References

- 1 Bar-Haim, Y., Lamy, D., Pergamin, L., Bakermans-Kranenburg, M. J., & van Uzendoom, M. H. (2007). Threatrelated attentional bias in anxious and non-anxious individuals: A meta-analytic study. Psychological Bulletin, 133, 1–24.
- 2 Barbour, K., A., & Blumenthal, J., A. (2005). Exercise training and depression in older adults, Neurobiology of Aging, 26, 119-123.
- 3 Barnes, R., T., Coombes, S., A., Armstrong, N., B., Higgins, T., J. & Janelle, J. (2010). Evaluating attentional and affective changes following an acute exercise bout using a modified dot-probe protocol. Journal of sports science, 28, 1065-1076.
- 4 Bradley, B. P., Mogg, K., & Lee, S. C. (1997). Attentional biases for negative information in induced and naturally occurring dysphona. Behaviour Research and Therapy, 35, 911–927. Doi:10.1016/S0095-7967(97)00053-3.
- 5 Brosnan, L., Hoppitt, L., Shelfer, L., Sillence, A., & Mackintosh, B. (2011), Cogn®ve bias modifies not for attention and interpretation reduces trait and state articly in anxious patients referred to an out-patient service: Results from a pilot study. Journal of Behavior Therapy and Expenimental Psychiatry, 42, 258–264. Doi: 10.1016/j.blep. 2010.12.006.
- 6 Craft, L., & Perna, L. (2005). Exercise and clinical depression: Examining two psychological mechanisms. Psychology of sport and exercise, 6, 151-171.
- 7 Gotlib, I. H., Kasch, K. L., Trait, S., Joormann, J., Arnow, B. A., & Johnson, S. L. (2004). Ceherence and specificity of information: processing biases in depression and social phobia. *Journal of Abnormal Psychology*, 113, 336-398. doi:10.1037/0021-832X.1133.386
- 8 Hation, L., S., & Ruscio, A., M. (2011). A Meta-Analysis of the Effect of Cognitive Bias Modification on Anxiety and Depression. *Psychological Bulletin*. 137, 940-958.
- 9 Mackintosh, B., Mathews, A., Yiend, J., Ridgeway, V., & Cook, E. (2006). Induced biases in emotional interpretation influence stress vulnerability and endure despite changes in context. Behaviour Therapy, 37, 209-222.
- 40 Mathews, A., & MacLeod, C. (2005). Cognitive vulnerability to emotional disorders. Annual Review of Clinical Psychology. 1. 167–195. doi: 10.1146/annurev.clinpsy.1.102803.143916
- 44 Salmon, P. (2001). Effects of physical exercise on anxiety, depression and sensitivity to stress. A unitying theory. Clinical Psychology review, 21, 33-61.