

The effect of the Positive Assertiveness Training.

No registrations found.

| | |
|------------------------------|----------------|
| Ethical review | Not applicable |
| Status | Recruiting |
| Health condition type | - |
| Study type | Interventional |

Summary

ID

NL-OMON28800

Source

NTR

Health condition

- Shyness
- Social anxiety
- Loneliness
- Assertiveness

- Verlegenheid
- Sociale angst
- Eenzaamheid
- Assertiviteit

Sponsors and support

Primary sponsor: Instituut voor Positieve Psychologie
Vrije Universiteit Amsterdam
Instituut voor Positieve Psychologie

Martiotteplein 32 HS

1098 PA Amsterdam
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Source(s) of monetary or material Support: fund = initiator = sponsor

Intervention

Outcome measures

Primary outcome

1. Assertiveness;
2. Empathy.

Secondary outcome

1. Happiness;
2. Self-esteem.

Study description

Background summary

There is an abundance of evidence that assertiveness training is effective for enhancing social skills in populations with psychopathology. Studies into the effect of social competence training on healthy individuals, however, are scarce. This study is positive psychological in scope in the sense that we want to examine the effect of the Positive Assertiveness Training (PAT) and the electronic Positive Assertiveness Training on social competence in a non-clinical population, while controlling for lower empathy as a possible negative result. Secondary research questions involve the effect of social competence on self-esteem and happiness and maintenance of effect at 6 months.

We will conduct a three-armed randomized controlled trial. Participants from the general population from 18 years on without major psychopathology will be randomized to take part in the Positive Assertiveness Training (PAT) or a digital version of the training (ePAT) versus a waiting list condition. The primary measures are assertiveness and empathy. Secondary outcomes are self-esteem and happiness. Assessment will take place at baseline, after the training is finished and six months after that. Acquaintances of the participants are also asked to fill in questionnaires to provide so called "other ratings" on the primary measures.

Study objective

1. The Positive Assertiveness Training has a positive effect on assertiveness, social anxiety, happiness and self-esteem;
2. The Positive Assertiveness Training has no effect on empathy;
3. The effect of the Positive Assertiveness Training is still there after six months.

Study design

1. One week before the training starts;
2. One week after the training ends;
3. Six months after the training ends.

Methods of measurement:

1. Positive Assertiveness Scale (PAS): This scale was made specifically for this research to measure positive assertiveness, using items from both the College Self-Expression Scale (GSES) and the RAS Rathus Assertiveness Schedule (RAS) and extra items concerning positive assertiveness designed by the researcher;
2. Inventory of Interpersonal Situations (ISS): This is a questionnaire used to measure social anxiety and social skills;
3. Other rating: Both the PAS and the ISS were rephrased such that they were referring to the other person;
4. NEO Personality Inventory-Revised facets altruism and tender mindedness: These two facets from the attitudinal dimension of the NEO-PI-R are used to measure empathy;
5. Self-Liking Self-Competence (SLSC): This scale is used to measure self-esteem as a combination of competence and worthiness;
6. Happiness Measures (HM): This scale is used to measure happiness.

Intervention

1. Positive Assertiveness Training (PAT): Grouptraining consisting of six weekly training sessions of two hours each;
2. Electronic Positive Assertiveness Training (ePAT): Electronic training. Consisting of six weekly modules of videos and text;

3. Control intervention: Waiting list.

Contacts

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Eligibility criteria

Inclusion criteria

1. Older than 18;
2. Able to speak and read Dutch to an extent where an interpreter is not needed for completion of the questionnaires and the training;
3. Symptom Check List 90 Revised-score lower than 169 for males or lower than 203 for females
-Gives informed consent.

Exclusion criteria

1. Younger than 18;
2. Not able to speak and read Dutch to an extent where an interpreter is not needed for completion of the questionnaires and the training;
3. Symptom Check List 90 Revised-score higher than 169 for males or higher than 203 for females;

4. Does not give informed consent.

Study design

Design

| | |
|---------------------|---------------------------------|
| Study type: | Interventional |
| Intervention model: | Parallel |
| Allocation: | Non-randomized controlled trial |
| Masking: | Open (masking not used) |
| Control: | Active |

Recruitment

| | |
|---------------------------|-------------|
| NL | |
| Recruitment status: | Recruiting |
| Start date (anticipated): | 04-06-2012 |
| Enrollment: | 150 |
| Type: | Anticipated |

Ethics review

| | |
|-------------------|----------------|
| Not applicable | |
| Application type: | Not applicable |

Study registrations

Followed up by the following (possibly more current) registration

No registrations found.

Other (possibly less up-to-date) registrations in this register

No registrations found.

In other registers

| Register | ID |
|----------|-------------------------------------|
| NTR-new | NL3264 |
| NTR-old | NTR3417 |
| Other | WC VUmc : 2012-088 |
| ISRCTN | ISRCTN wordt niet meer aangevraagd. |

Study results

Summary results

N/A