

Virtual Reality Aggression Prevention Training in forensic clinics

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Ethische beoordeling	Positief advies
Status	Werving gestopt
Type aandoening	-
Onderzoekstype	Interventie onderzoek

Samenvatting

ID

NL-OMON24428

Bron

NTR

Verkorte titel

VRAPT

Aandoening

Reactive aggression, forensic psychiatric inpatients, Virtual Reality, SIP model

In Dutch:

Reactieve agressie, forensisch psychiatrische patiënten, Virtual Reality, SIV model

Ondersteuning

Primaire sponsor: Universitair Medisch Centrum Groningen

Hanzeplein 1

9713 GZ Groningen

Overige ondersteuning: NWO, Maatschappij- en Gedragswetenschappen

Onderzoeksproduct en/of interventie

Uitkomstmaten

Primaire uitkomstmaten

Our primary outcomes are twofold, consisting of staff-report and self-report questionnaires.

• Staff:

The social dysfunction and aggression scale (SDAS; Widstedt et al., 1990) is recorded by staff on a weekly basis for each patient meeting the inclusion criteria to document the aggressive state of patients. The SDAS measures a broad range of aggressive behaviour, including very mild forms of aggression. SDAS data needs to be collected at least three months before VRAPT starts (T0).

• Participants:

Three self-report questionnaires are completed by the participants at three different times: pre-treatment (T1), after treatment (T2) and three-month follow-up (T3).

- the Dutch version of the Aggression Questionnaire (AVL; Meesters, Muris, Bosma, Schouten, & Beuving, 1996).

- Novaco Anger Scale and Provocation Inventory (NAS-PI; Novaco, 1994).

- the State-Trait Anger Expression Inventory-2 (STAXI-2; Hovens, Lievaart & Rodenburg, 2014).

Toelichting onderzoek

Achtergrond van het onderzoek

Besides being perpetrators, forensic inpatients are also more likely to become victims of aggression. Reactive aggression is an impulsive and uncontrolled outburst of anger as a reaction on a perceived provocation, often involving problems with Social Information Processing (SIP). The SIP-model is used as a framework for Virtual Reality Aggression Prevention Training (VRAPT). VRAPT is an interactive three-dimensional virtual environment in which inpatients have the opportunity to practice with aggressive behavior of virtual characters. In an iterative process, software engineers, VR experts, clinicians and researchers developed the VRAPT protocol.

VRAPT consists of 16-biweekly individual treatment sessions. Different interactive provocative social scenarios were designed with the main focus on controlling behavior, emotions and impulses. During these interactive scenarios participants wear earphones and a head-mounted display while arguing with a virtual character that is controlled by the therapist. Therapists deliver the dialogue and control speech, emotions and actions of the virtual character. Besides, VRAPT measures real-time galvanic skin response and heart rate as feedback for participants on their physical arousal.

All participants are monitored with the Social Dysfunction and Aggression Scale by staff for aggression on a weekly basis. Additionally, pre- and after treatment; and at three months

follow-up self-report questionnaires will be completed. The development of the VRAPT protocol and the pilot was successful. Following the evaluation after the pilot a few adaptations in the VRAPT protocol and software were made. The multicenter randomized controlled trial is still ongoing.

Doel van het onderzoek

Besides being perpetrators, forensic inpatients are also more likely to become victims of aggression. Reactive aggression is an impulsive and uncontrolled outburst of anger as a reaction on a perceived provocation, often involving problems with Social Information Processing (SIP). The SIP-model is used as a framework for Virtual Reality Aggression Prevention Training (VRAPT). VRAPT is an interactive three-dimensional virtual environment in which inpatients have the opportunity to practice with aggressive behavior of virtual characters.

Onderzoeksopzet

Data will be collected at baseline (T0), pre-treatment (T1), after treatment (T2) and at three-month follow-up (T3).

Onderzoeksproduct en/of interventie

In both arms treatment as usual (with the exception of specific aggression therapy or training) will be provided for the forensic psychiatric patients. In the first experimental arm there will be a maximum of 16-biweekly individual treatment sessions Virtual Reality Aggression Prevention Training (VRAPT). Treatment duration is about two months and patients will be followed-up at 3 months. The second arm entails a waiting list and after the study, these participants will also get VRAPT.

Contactpersonen

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Deelname eisen

Belangrijkste voorwaarden om deel te mogen nemen (Inclusiecriteria)

- Forensic Psychiatric inpatient in a Forensic Psychiatric Centers (FPC's), Clinics (FPK's) or Sections (FPA's);
- Forensic Psychiatric inpatients are referred to aggression training by their treatment supervisors;
- Age 18 – 65.

Belangrijkste redenen om niet deel te kunnen nemen (Exclusiecriteria)

- IQ under 70;
- Insufficient command and understanding of the Dutch language;
- Epilepsy.

Onderzoeksopzet

Opzet

Type: Interventie onderzoek
Onderzoeksmodel: Parallel

Toewijzing:	Gerandomiseerd
Blinding:	Enkelblind
Controle:	Geneesmiddel

Deelname

Nederland	
Status:	Werving gestopt
(Verwachte) startdatum:	06-03-2017
Aantal proefpersonen:	128
Type:	Werkelijke startdatum

Voornemen beschikbaar stellen Individuele Patiënten Data (IPD)

Wordt de data na het onderzoek gedeeld: Nee

Ethische beoordeling

Positief advies	
Datum:	14-04-2017
Soort:	Eerste indiening

Registraties

Opgevolgd door onderstaande (mogelijk meer actuele) registratie

Geen registraties gevonden.

Andere (mogelijk minder actuele) registraties in dit register

Geen registraties gevonden.

In overige registers

Register	ID
NTR-new	NL6184
NTR-old	NTR6340

Register	ID
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Ander register	NWO; Medisch Ethische Toetsingscommissie van het Universitair Medisch Centrum Groningen : 432-13-802; METc 2015/474
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Resultaten