| Research Designs | | There are two basic ways of providing evidence to support a RH: a "demonstration" and a "comparison" a demonstration involves using the treatment and showing that the results are "good" a comparison (an experiment) involves showing the difference between the results of the treatment and a "accurate" |
|--|--|---|
| Demonstrations vs. Comparisons Experimental & Non-Experimental Designs "IVs" and "DVs" Between Group vs. Within-Group Designs | | most commercials use demonstrations They tell you how wonderful is the product!! The evidence from a demonstration usually meets with the response "Compared to what ??" a single demonstration is a "implicit" comparison "doesn't this wash look better then yours ?" "did you last heartburn improve this fast ?" "didn't your last headache last longer than this ?" explicit comparisons are preferred (unless they suck, are false comparisons, confounded, or other damn lies we've seen) !!! |
| When testing causal RH: we must have a Experiment" that provides | a "fair comparison" or a "well-run | |
| Init eq of subject variables & ongoing eq of procedural variables For example what if our experiment intended to show that Tide works better compared | | |
| Really dirty light-colored B clothes washed in a small amount of cold water for 5 vs. a minutes with a single rinse rusing Brand-X | arely dirty dark-colored lothes washed in a large mount of hot water for 25 ninutes with a double rinse using Tide | |
| What is supposed to be the "causal variable" that produces the difference in the cleanness of the two loads of clothes? | | |
| Can you separate the initial and ongoing equivalence confounds ? Initial Equivalence confounds Ongoing Equivalence confounds | | |
| "dirtyness" of clothes color of clothes w le si | mount of water ater temperature angth of washing ngle vs. double rinse | |

True Experiment **Research Designs** Words of Caution About the terms "IVs", "DVs" & causal RH:s ... random assignment of individual participants by researcher before IV manip (provides initial You might have noticed that we've not yet used these terms... **True Experiments** equivalence - subject variables - internal validity) treatment/manipulation performed by researcher (provides temporal precedence & ongoing • · Instead we've talked about "causal variables" and "effect If "well-done," can be variables" -- as you probably remember.. equivalence - internal validity) used to test causal good control of procedural variables during task completion & DV measurement (provides ongoing - the Independent Variable (IV) is the "causal variable" RH: -- alternative hvp. equivalence - internal validity) are ruled out because - the Dependent Variable (DV) is the "effect variable" there are no Quasi-Experiment confounds !!! no random assignment of individuals (but perhaps) random assignment of intact groups) However, from the last slide, you have know that we can only treatment/manipulation performed by researcher **Non-Experiments** say the IV causes the DV if we have a true experiment (and poor or no control of procedural variables during ٠ task, etc. the internal validity it provides) No version can be Natural Groups Design also called Concomitant used to test causal - initial equivalence (control of subject variables) Measures or Correlational Design RH: -- can't rule out random assignment of participants no random assignment of individuals (already in alternative hyp. "IV groups") - ongoing equivalence (control of procedural variables) • no treatment manipulation performed by Because there are researcher (all variables are measured) -- a confounds !! • experimenter manipulates IV, measures DV and controls comparison among participants already in groups all other procedural variables no control of procedural variables during task, etc. The problem seems to come from there being at least three different meanings or uses of the term "IV" ... 1 "the variable manipulated by the researcher" • it's the "IV" because it is "independent" of any naturally occurring contingencies or relationships between behaviors • the researcher, and the researcher alone, determines the value of the IV for each participant 2 "the grouping, condition, or treatment variable" 3 "the presumed causal variable in the cause-effect relationship" In these last two both the "IV" & "DV" might be measured !!! So... • you don't have a True Experiment ... no IV manipulation to provide temporal precedence • no random assignment to provide init. eq. for subject vars • no "control" to provide onging eq. for procedural variables • ... and can't test a causal RH: o

This is important stuff -- so here's a different approach...

- It is impossible to have sufficient internal validity to infer cause when studying some IV-DV relationships
- Say we wanted to test the idea that attending private colleges CAUSES people to be more politically conservative than does attending public universities.
 - We wouldn't be able to randomly assign folks to the type of college they attend (no initial eq.)
 - We wouldn't be able to control all the other things that happen during those 4 years (no ongoing equivalence)

Here are some other categories of "IV"s with the same problem...

- orientation, age, # siblings
- ethnic background, race, neighborhood
- characteristics/behaviors of your parents
- things that happened earlier in your life

IVs "vs" Confounds

Both IVs and Confounds are "causal variables" !!!

• variables that may cause (influence, etc.) scores on the DVs

What's the difference ???

The IV is the intended causal variable in the study! We are trying to study if & how & how much the IV influences the DV !

A confound interferes with our ability to study the causal relationship between the IV & the DV, because it is another causal variable that might be influencing the DV.

If the IV difference between the conditions is confounded, then if there is a DV difference between the conditions, we don't know if that difference was caused by the IV, the confound or a combination of both !!!!

Between Groups vs. Within-Groups Designs

Between Groups

- also called Between Subjects or Cross-sectional
- each participant is in one (& only one) of the treatments/conditions
- different groups of participants are in each treatment/condition
- typically used to study "differences" -- when, in application, a participant will usually be in one treatment/condition or another

Within-Groups Designs

- also called Within-Subjects, Repeated Measures, or Longitudinal
- each participant is in all (every one) of the treatment/conditions
- one group of participants, each one in every treatment/condition
- typically used to study "changes" -- when, in application, a participant will usually be moving from one condition to another

| Between Gro | oups Design | Within-Gro | ups Design | Research Des | signs | |
|---|--|---|---|--|---|---|
| Experimental Tx | Traditional Tx | Experimental Tx | Traditional Tx | Putting this all toget types of designs we | her here's a summary 'll be working with | of the four |
| Pat Sam Kim Lou Todd Bill Different pa each treatm | Glen Sally Kishon Phil Rae Kris trticipants in | Pat Sam Kim Lou Todd Bill All participa treatment/co | Pat Sam Kim Lou Todd Bill nts in each | • w, • m Between Groups (dif parts. in each IV condition) Within-Groups (each part. in all IV conditions) | True Experiment / "proper" RA/CB - init eqiv anip of IV by researcher Results <u>might</u> be causally interpreted if good ongoing equivalence Results <u>might</u> be causally interpreted if good ongoing equivalence | Non-experiment • no or poor RA/CB • may have IV manip Results <u>can not</u> be causally interpreted Results <u>can not</u> be causally interpreted |
| Four versions of t | he same study | which is which? | | | | |
| • Each participant in our "object identification study" BG Non was asked to select whether they wanted to complete the "visual" or the "auditory" condition. | | | | | | |
| • Each participant in our "object identification study" WG Exp completed both the "visual" and the "auditory" conditions in a randomly chosen order for each participant. | | | | | | |
| • Each participant in our "object identification study" BG Exp. was randomly assigned to complete either the "visual" or the "auditory" condition. | | | | | | |
| • Each participant in our "object identification study" WG Non completed first the "visual" and the the "auditory" condition. | | | | | | |

| So, you gotta have a | True Experiment for | the results to be ca | ausally |
|----------------------|---------------------|----------------------|---------|
| interpretable? | | | |

But, does running a "True Experiment" guarantee that the results will be causally interpretable?

What are the elements of a True Experiment??

Random Assignment if Individuals to IV conditions by the researcher before manipulation of the IV

Supposed to give us initial equivalence of measured/subject variables.

Supposed to give us temporal precedence & help control ongoing equivalence of manipulated/procedural variables

Please note: A "true experiment" is defined by these two elements! BUT \rightarrow there is "an asymmetry" between "true exp" and "causal interp" Huh? True Exp is necessary, but not sufficient, for causal interpretability! What could possibly go wrong ???

Random Assignment "might not take"

• RA is a "probabilistic process" → there's no guarantee that the groups will be equivalent on all subject variables!

Might introduce a confound when doing the IV manipulation

• might treat the conditions differently other than the IV

May "miss" or even "cause" other ongoing equivalence confounds

• often, especially for younger researchers or newer research topics, we don't really know what to "control"

• we may know what to control and just not get it done...

If only True Experiments can be causally interpreted, why even bother running non-experiments?

1st Remember that we can't always run a true experiment !

- Lots of variables we care about can't be RA & manip gender, family background, histories and experiences, personality, etc.
- Even if we can RA & manip, lots of studies require long-term or field research that makes ongoing equivalence (also required for causal interp) very difficult or impossible.
- We would greatly limit the information we could learn about how variables are related to each other if we only ran studies that could be causally interpreted.

If only True Experiments can be causally interpreted, why even bother running nonexperiments? Cont...

2nd We get very useful information from non-experiments !

- True, if we don't run a True Experiment, we are limited to learning predictive information and testing associative RH:
- But associative information is the core of our understanding about what variables relate to each other and how they relate
- Most of the information we use in science, medicine, education, politics, and everyday decisions are based on only associative information – and things go pretty well!
- Also, designing and conducting True Experiments is made easier if we have a rich understanding of what variables are potential causes and confounds of the behavior we are studying

Q

Between Groups True Experiment







| Between Groups Non-experiment Untreated Population participant selection "control group" Untreated Population participant selection "experimental group" | Within-Groups Non-experiment Untreated Population treatment the whole participant selection "control group" Treated Population the whole treatment group |
|--|--|
| The design has the external validity advantage that each subject REALLY is a member of the population of interest (but we still need a representative sample) The design has the internal validity disadvantages that we don't know how participants "end up" in the populations no random participant assignment (no initial equivalence) we don't know how the populations differ in addition to the treatment per se no control of procedural variables (no ongoing equivalence) | The design has the external validity advantage that each subject REALLY is a member of each population of interest (but we still need a representative sample) The design has the internal validity disadvantages that we don't know how the populations differ in addition to the treatment per se no control of procedural variables (no ongoing equivalence) |
| There is always "just one more thing" Sometimes there is no counterbalancing in a Within-groups design, but there can still be causal interpretation | |
| A good example is when the IV is "amount of practice" with "10 practice" and a "50 practice" conditions | |
| There is no way a person can be in the 50 practice condition, and then be in the 10 practice condition | |
| Under these conditions (called a "seriated IV"), what matters is whether or not we can maintain "ongoing equivalence" so that the only reason for a change in performance would be the increased practice | |
| The length of time involved is usually a very important consideration | |
| Which of these would you be more comfortable giving a causal interpretation? | |
| When we gave folks an initial test, 10 practice and then the test again, we found that at their performance went up! | |
| When we gave folks an initial assessment, 6 months of once-a-week therapy and then the assessment again, their depression went down! | |