## EXPERIENCE SAMPLING METHOD PROTOCOL : FEASIBILITY, ACCEPTABILITY AND EXAMINATION OF THE DYNAMICS OF REPETITIVE NEGATIVE THINKING, VALUED ACTIONS AND EMOTIONAL MINE HEALTH DURING THE PERINATAL PERIOD

Background: Repetitive negative thinking (RNT) is a transdiagnostic process referring to iterative, relatively uncontrollable and intrusive negative-laden thoughts about oneself and one's difficulties (Ehring & Watkins, 2008), viewed as a momentary experiential avoidance (EA) strategy perturbing values-consistent actions (VA) (Levin, Krafft, Pierce, & Potts, 2018). During the perinatal period, RNT fluctuates considerably (Giesbrecht, Letourneau, Campbell, Kaplan, & The APrON Study Team, 2012), suggesting that its effects vary within and between individuals across time. These findings thus encourage the use of the Experience Sampling Method (ESM) - multiple and contextsensitive assessments of day-to-day life experience - to investigate the daily dynamics of RNT, VA and emotional health. Nevertheless, its applicability (i.e. feasibility and acceptability) and the use of communication technology (i.e. smartphones and mobile applications) during the perinatal period requires further validation and adjustment (Donker, Cuijpers, Stanley, & Danaher, 2015). Objectives: This study has two aims: 1) validate the feasibility, acceptability and reactivity effects of ESM during the perinatal period and 2) assess RNT, VA and emotional concurrent and lagged relationships. Methods: Participants (N = 100; 50 pregnant) will complete an ESM time-contingent protocol with a semi-random schedule (4 times per day, 7 days, between 07:00 - 23:00). Dispositional questionnaires (PTQ, BEAQ, DASS-21, VQ) will establish a baseline level through a web-platform approach and a mobile app will mirror these processes through momentary questions. A self-reported questionnaire will evaluate the applicability of the methods. Descriptive and multi-level mixed effects analyzes will be performed. Results: Preliminary results of a pilot study will be provided. Conclusion: Assessing and adjusting ESM applicability during the perinatal period could improve compliance and data quality, strengthening our confidence in new methods to study RNT and its influence over valuedbehavioural patterns.



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## INTRODUCTION

**Repetitive negative thinking (RNT)** constitutes a transdiagnostic psychological process – distinctive to worry and rumination patterns – defined by the perseverative, relatively uncontrollable and intrusive negative-laden nature of thoughts about oneself and one's difficulties<sup>1</sup>. RNT is considered an **experiential avoidance (EA)** strategy because of its manifestation as an ineffective problem-solving strategy marked by cognitive and behavioral rigidity<sup>2,3</sup>.



Moreover, evidence in the perinatal field indicates that RNT significantly impairs, **perinatal psychological health and functioning**<sup>4</sup> and **values-consistent actions (VA)**<sup>5</sup>.

Recent evidence suggests that **maternal experience fluctuates** importantly in a daily basis<sup>6,7</sup>. Nevertheless, most research in this field has been conducted with estimative and



Hence, adoption of context-sensitive methodologies such as **Experience Sampling Method (ESM)** – environmentally representative, momentary and multiple evaluations of daily life experience on real time – and available **mobile technology** (i.e. Mhealth applications) could enhance the meaningfulness of day-to-day behavioral data (e.g. contextual contingencies of RNT Unfortunately, research on the **feasibility and acceptability** of these methods to assess RNT as well as perinatal moment-tomoment emotional experience and functioning is limited<sup>10</sup>. These attributes are relevant to any measurement method process of development, implementation, compliance and suitability, which enhancement and embracement could





engagement and rampancy) and diminish ensue higher quality findings. potential measurement biases<sup>9</sup>.

**OBJECTIVES** 

Evaluate the feasibility, acceptability and reactivity effects of ESM data collection methods during the perinatal period using personal smartphones and a free mobile

application

Investigate momentary RNT, VA and emotional concurrent and lagged relationships as well as their association to contextual features

# METHOD (IN)

### **Participants**

#### POPULATION

- N = 160 women (80 perinatal period and 80 non-pregnant)
- Determination of sample size. Power analysis statistics (Monte-Carlo simulations) will be conducted.

#### ELIGIBILITY CRITERIA

- At least 18 years old
- Able to speak English or French
- Own a smartphone (iOS, Android)

Variable	Measure
Sociodemographic, psychosocial and obstetric	Social status and context of life Risk factors
Contextual contingences	Where, with whom, activity; when (extracted from prompts) Activity importance, stress and pleasure levels
Dispositional measures	Perseverative Thinking Questionnaire (PTQ) Brief Experiential Avoidance Questionnaire (BEAQ) Depression Anxiety and Stress Scales (DASS-21) Valuing Questionnaire (VQ)
Momentary questions	Validated ESM items; Item adaptation from dispositional equivalent measures
Feasibility	Recruitment; Compliance rates; Data collection procedures; Technical difficulties
Acceptability	Usefulness, Satisfaction and Ease of Use Questionnaire (USE) Disclosure preferences; Adherence
Reactivity and interference	Affective perturbation and activity interference

Measures

## ESM PROTOCOL AND PROCEDURES

Initially assessed for eligibility by PR or research assistant in the region of Montreal (QC), Canada





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#### **Recruitment**

Enrollment
In person (e.g. obstetric clinics) and via
social media advertisement
Pre-screening criteria and interest
Via telephone (10 minutes call)

#### Excluded

- Do not meet inclusion criteria (as assessed by the PR or research assistant)
- Declined participation

Web-based platform assessment

- Consent administered electronically with assistance of PR
- Sociodemographic information and psychosocial and obstetric risk factors
  - Dispositional process levels (RNT, EA, VA, emotional health)



Short web-based instructional videos facilitated by PR assistance (by telephone)

- 1. ESM methodology and objectives
- 2. Downloading and installing app
- 3. Activating survey, responding and sending ESM data after completion

Practice period (20 min.) with ESM items assisted by PR (by telephone)





Given pandemic limitations during winter spring 2020, data collection and procedures were significantly delayed, impeding preliminary data analysis. Thus, recruitment and data collection are expected to start during fall 2020. into Adaptations to take account influence pandemic studied over variables will be made.



**Descriptive and inferential** statistics

#### **Psychometrics**

Multi-level mixed-effects approach to concurrent & lagged associations

### **Expected results**

ESM feasibility and acceptability

RNT, VA and emotional concurrent and lagged trends and association

Contextual and situational variables influence on momentary processes

### Conclusion

Determine the acceptability and feasibility of ESM methods and mobile technology during the perinatal period to asses RNT, VA and emotional health

Improve women's psychological health through increased access to timely evaluation of meaningful processes hindering momentary pursuit of VA.



### ESM data collection

ESM

assisted

training

2

3

5



#### Data collection parameters

- Use of personal smartphones
- Number of days : 7 days
- ESM items per evaluation : 22
- Total number of evaluations : 28 (minimal threshold 80%)
- Number of prompts per day : 4
- Intervals : every 4h (waking time, early and late afternoon, before sleep time)
- Improving compliance : assistance call on 2<sup>nd</sup> day; app notifications after a period of time (10, 20 minutes)
- Time limit to respond before a missing evaluation : 30 minutes



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References

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#### **Further information**

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