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Boredom and Risk-Taking in Mania

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Boredom and Risk-Taking in Mania

Jardine, R.M. & Smith, N.A.

Introduction

It is possible to better distinguish between biological causes of behavior and externally influenced behavioral reactions. Hıdıroğlu et al. (2013) proposes that, in bipolar 1 disorder, risk-taking may have an underlying endophenotypic component. McWelling (2003) proposes boredom to be thought of as a subjective state and thus can help mold course of illness in chronic psychotic disorders. This proposal would seek to further explore these ideas by examining risk-taking during a manic episode in atypical Bipolar I Disorder while controlling for boredom.

Methodology

- Video Pilot performed
 - “Calm” = control
 - “Exciting”
- Suppress boredom as a control using pre- and post- tests
- Randomly assign to a video
- Post video risk-taking assessment

Results

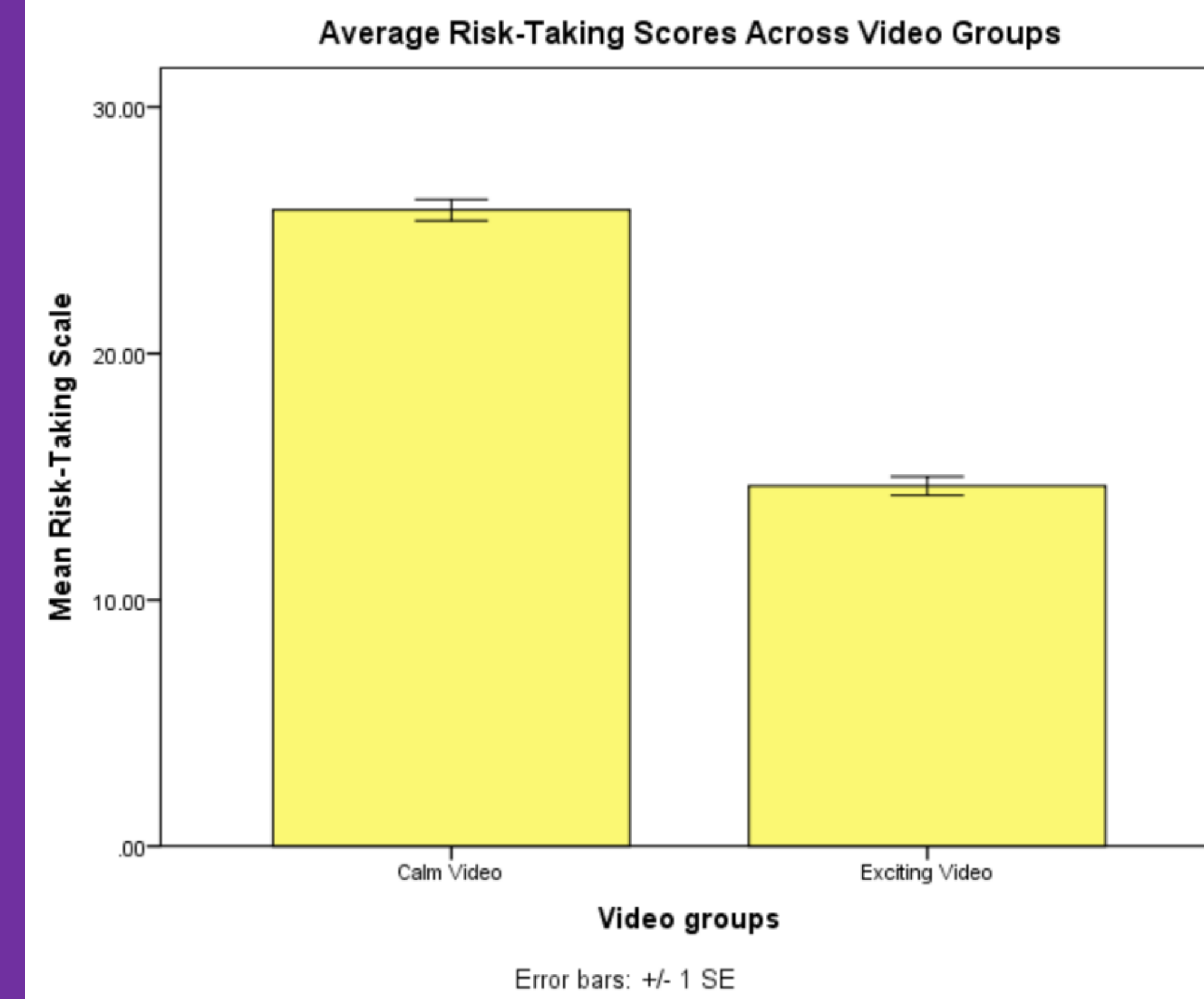
- Although boredom was suppressed, the “calm” video showed larger overall scores ($M = 5.57, SE = .11$) than “exciting” ($M = 4.78, SE = .13$)
- The “calm” video also had larger scores ($M = 25.82, SE = .41$) than “exciting” ($M = 14.63, SE = .38$) in risk-taking

Discussion

A longitudinal study would allow an opportunity to see if this video effect is long-lasting. It is possible that the control video from the pilot needs revision after these results before any treatment interventions or imaging can be considered. Individual experiences and subjectivity should be weighted alongside the scores for a full picture. If indeed effective, replications across the bipolar spectrum would yield intriguing results.

Possible Treatment Intervention for Atypical Bipolar 1 Disorder:

Watching an “exciting” video could show a lower overall score in boredom and risk-taking during mania



Participants

I propose to recruit roughly 100 participants via purposive sampling from Intensive Outpatient programs (IOP), Inpatient programs, and Community programs. The participants are verified as currently experiencing a manic episode and not in active psychosis by their facility. Demographics such as age, sex, and race were included. This study was completely voluntary, and consent was acquired.

Measures

- **Revised DOSPERT Scale** (Blais & Weber, 2006) 30-item scale ($M\alpha = .79$)
- **Boredom Proneness Scale** (Farmer, R., Sundberg, N.D., 1986) 28-item scale ($\alpha = .79$)
- **Video Pilot** “calm” and “exciting” videos and will be found to both be valid measurements ($p < .05$)
 - **Video 1.** The first video, “calm”, will consist of a series of 5 short consecutive video clips each 7 seconds in length of cute animals as a control
 - **Video 2.** The second video, “exciting”, consists of a series of 5 short, consecutive video clips each 7 seconds in length depicting activities such as skydiving, shopping, and a road trip

Future Directions

- The “exciting” video could be used as a potential immediate treatment intervention, but more studies are needed
- Could act as an early risk assessment
- Implications for wearable imaging devices to aid in locating disease-based areas of interest