

CARRYOVER EFFECT

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1. Core Definition and Scope

The **Carryover Effect**, often termed a sequence effect, refers to the phenomenon in which the influence or effects of a preceding experimental condition or treatment remain present and impact a participant's subsequent performance in a later condition. This concept is fundamentally tied to research designs, particularly those employing repeated measures or within-subjects protocols, where the same individuals are exposed to multiple levels of an independent variable. It represents a significant threat to the **internal validity** of an experiment, as the measured outcome cannot be purely attributed to the current experimental manipulation but is potentially confounded by the lingering psychological or physiological residue of what came before.

In essence, the carryover effect dictates that the current performance of a participant is not an isolated event but is systematically affected by the specific sequence of experimental conditions encountered up to that point. For example, if a participant receives Treatment A (a high dose drug) followed by Treatment B (a placebo), the residual physiological presence or psychological expectation generated by Treatment A might artificially inflate or suppress the measured response during Treatment B. Recognizing and accounting for this effect is paramount, as failure to do so can lead to spurious findings and incorrect causal inferences regarding the efficacy or impact of the treatments under investigation.

The precise nature of the carryover effect is highly dependent on the experimental stimuli and the response being measured. It can manifest as physiological persistence, such as the continued presence of a drug metabolite in the bloodstream, or as cognitive persistence, such as the continued application of a strategy learned in a previous task that is inappropriate for the current task. Researchers must meticulously design the interval between treatments--known as the washout period--to minimize or eliminate these residual influences, ensuring that the participants return to a baseline state before exposure to the subsequent condition.

2. Types of Carryover Effects

The blanket term **Carryover Effect** encompasses several distinct mechanisms by which prior exposure can influence current performance. Identifying the specific type of carryover is essential for choosing the appropriate mitigation strategy. These effects are classified based on the nature of the residual influence they exert on the participant.

Practice Effects (Learning Effects): This occurs when participants improve their performance

over successive conditions simply due to familiarity with the experimental setting, task demands, or required procedures. If Treatment B is performed better than Treatment A merely because participants have had practice, this improved performance is due to carryover, not the treatment itself.

Fatigue Effects: Conversely, participants may exhibit decreased performance in later conditions due to sustained effort, boredom, or mental exhaustion. If a complex cognitive task is administered repeatedly, performance may decline, masking any genuine treatment effect in the later stages. This represents a negative carryover effect.

Stimulus Sensitization or Desensitization: In situations involving emotional or sensory stimuli, prior exposure can alter the participant's sensitivity. For instance, repeated exposure to a painful stimulus in Condition 1 may lead to heightened sensitivity (sensitization) in Condition 2, or conversely, adaptation and reduced response (desensitization).

Interference or Residual Effects: This is perhaps the most direct form of carryover, where the specific content or strategy used in Condition A actively interferes with the memory or cognitive processes required for Condition B. For instance, learning List A of words may inhibit the recall of List B, a classic example found in memory research.

Contrast Effects: The participant's perception of the current treatment may be altered based on its comparison with the preceding treatment. If Treatment A was exceptionally difficult, Treatment B, even if moderately difficult, might be perceived and responded to as easy, leading to an artificially contrasting response.

3. The Role in Within-Subjects Designs

The carryover effect is primarily a concern within **within-subjects designs** (also known as repeated measures designs) because every participant serves as their own control and is exposed to all experimental conditions sequentially. While this design is highly efficient and excellent at controlling for individual differences (participant variability), it simultaneously introduces the risk that the order in which treatments are presented becomes a confounding variable.

If the order of treatments is fixed (e.g., A always followed by B), any observed difference between Condition B and Condition A may be attributable not to the intrinsic difference between the treatments, but to the carryover residual from A. This makes the design inappropriate for any experiment where carryover is suspected to be unavoidable or substantial, particularly in irreversible interventions like surgery or irreversible learning paradigms.

In the context of the "before and after design" specifically mentioned in the source material, the carryover effect must be considered the dominant methodological threat. The success of a before-

and-after measurement hinges on the assumption that the "after" measurement accurately reflects the impact of the intervention alone. If the intervention itself creates lasting changes that influence how subsequent measurements are taken or interpreted--such as increased participant scrutiny or expectation bias developed during the intervention phase--then a measurement carryover is occurring, compromising the comparison.

4. Strategies for Mitigation and Control

Researchers employ sophisticated strategies to minimize or control for the influence of carryover effects, thereby improving the reliability and validity of their experimental conclusions. The primary technique used to address sequencing issues is counterbalancing.

The core objective of these strategies is to ensure that while carryover effects might still exist, their influence is spread evenly across all conditions, neutralizing their impact as a systematic bias. By achieving this balance, the researcher can statistically isolate the true effect of the independent variable from the spurious influence of the order of presentation.

Counterbalancing: This technique involves systematically varying the order in which different participants receive the treatment conditions.

Complete Counterbalancing: Where feasible, this method involves using every possible sequence of conditions. If there are three conditions (A, B, C), all six sequences (ABC, ACB, BAC, BCA, CAB, CBA) must be used equally often. While ideal for controlling for all order and linear carryover effects, it rapidly becomes impractical as the number of conditions increases ($N!$ sequences).

Incomplete Counterbalancing (Latin Square Design): When complete counterbalancing is impractical, researchers often use designs like the Latin Square, which ensures that each condition appears equally often in every serial position (first, second, third, etc.) and that each condition precedes and follows every other condition exactly once. This controls for linear order effects but does not fully control for all possible complex, non-linear carryover effects.

Increasing Washout Periods: Especially critical in pharmacological studies, the washout period is the time interval between the cessation of one treatment and the commencement of the next. Extending this period allows residual biological or psychological effects to decay to a negligible baseline level, minimizing physiological carryover.

Employing Between-Subjects Designs: In cases where the expected carryover effect is irreversible (e.g., a therapeutic technique that fundamentally alters participant knowledge or perception), the only solution is to abandon the within-subjects design entirely and adopt a **between-subjects design**, where different participants are assigned to different conditions.

5. Distinguishing Carryover from Simple Order Effects

While often discussed together, it is important to delineate the difference between a general **Order Effect** and a specific **Carryover Effect**. An order effect is a broad term referring to any change in participant performance due merely to the position in the sequence (e.g., performance being generally better in the third condition than the first, regardless of what the condition is). Order effects are typically linear--they either increase steadily (practice) or decrease steadily (fatigue) across the session.

In contrast, a true carryover effect is asymmetrical and specific: it is the result of the influence of one specific condition (A) on the next specific condition (B). This is evidenced if the magnitude of the difference between B and A is greater when A precedes B than when C precedes B. For instance, if an aggressive film clip (A) makes the subsequent reaction time test (B) faster, but a neutral clip (C) does not, the specific influence of A on B is a carryover effect, whereas the fact that the second test is generally faster due to warming up is a simple practice effect (a type of order effect).

The distinction matters because simple order effects can often be controlled entirely by Latin Square counterbalancing, which assumes that the effect is only based on the serial position. However, specific carryover effects require specialized analysis and often complete counterbalancing or the abandonment of the within-subjects approach, particularly when anticipating differential carryover--where the carryover from A to B is different in magnitude or direction than the carryover from B to A.

6. Significance and Impact on Research Validity

The significance of controlling the carryover effect lies in its direct relationship to the validity of scientific findings. If a study fails to adequately control for carryover, the internal validity is compromised, meaning the researcher cannot confidently conclude that the independent variable truly caused the observed changes in the dependent variable. Instead, the effect might be a statistical artifact of the sequence of presentation.

In applied fields, such as clinical psychology or educational research, the implications of uncontrolled carryover are severe. An ineffective teaching method might be falsely deemed effective if the participants carry over enhanced motivation or familiarity from a prior, successful method used earlier in the study sequence. Conversely, a genuinely effective treatment might appear inert if participants are suffering from overwhelming fatigue induced by a difficult preceding task.

Therefore, the identification of potential carryover is a critical step in the ethical and methodological planning stages of any study involving repeated measures. Researchers must utilize pilot studies

and expert knowledge to anticipate the likelihood and nature of carryover, ensuring that their chosen design and mitigation strategies are robust enough to yield reliable and generalizable results.

Further Reading

[Internal validity \(Wikipedia\)](#)

[Within-subject design \(Wikipedia\)](#)

[Counterbalancing \(Wikipedia\)](#)

[Carryover Effects in Repeated Measures Designs \(Psychological Bulletin Source\)](#)

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