Leveraging Positive Psychology to Support Addictive Behavior Change: Why and How

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ENHANCING RECOVERY THROUGH SCIENCE
• Monthly newsletter via email
• Breaks down 8 recent recovery science findings
• Provides links to original papers
• Discusses implications for
  • Individuals and families seeking recovery
  • Treatment professionals and treatment systems
  • Scientists
  • Policy makers

April is Alcohol Awareness Month

April is Alcohol Awareness Month. Sponsored by the National Council on Alcohol and Drug Dependence (NCADD), Alcohol Awareness Month began in 1987 to increase the public’s understanding of hazardous alcohol use and alcohol use disorder, and to reduce the stigma that often comes along with these conditions. In recognition of this critical public health initiative, at the Recovery Research Institute, we wanted to pass along five important, but potentially lesser known facts about alcohol and its impact on society that are grounded in scientific research. We hope it sparks thinking and conversation about the role of alcohol in your life and the lives of those you care about.
Huh, not a lot of happiness research here ....
Why target happiness?

• Recovery Movement
  • Expressed goals of recovery include finding inner peace, improving social connections and mental health, learning to enjoy life without substance use, and personal growth (based on a survey of 9,341 individuals; Kaskutas, 2014)

• Since then,
  • Scientists have increasingly argued that the substance use treatment field needs to move beyond a focus on reducing or eliminating substance use

Sidebar: Defining ‘Recovery’

• How exactly to define ‘recovery’ is garnering much attention

• Two studies
  • Kaskutas: survey study of 9,341 individuals who defined themselves as being in recovery
    • Researchers generated a list of elements
    • Individuals in recovery were asked if elements belonged in their definition of ‘recovery’
  • Neale: A series of staged focus groups to generate and refine items, followed by two formal, large sample evaluation studies
    • Treatment providers generated the list
    • SUD service users refined the list

• NIH has interest in defining it better
  • NIAAA: Understanding recovery better
  • NIDA: As an FDA outcome measure

Progress to Date?

• Assessment?
  • Yes - multiple expert panels and review papers have forwarded the recommendation that quality of life indices and other indices beyond substance use should be routinely assessed and reported (Tiffany, Friedman, Greenfield, Hasin, & Jackson, 2012)

• Outcome?
  • Somewhat - efforts are underway to measure ‘recovery’, so that this measurement could be used to track patient progress and/or to evaluate treatment programs
    • Quality of Life (QOL) indices are increasingly proposed to be part of that

• Treatment?
  • Not so much as of yet
Why focus on happiness during treatment?

• “… treatments should go beyond a focus on reducing or eliminating substance use to target greater access to and more time spent in experiences that will be enjoyable or otherwise rewarding …”

Positive Psychology

• There is an entire research field devoted to understanding and promoting human flourishing—the area of positive psychology (Seligman & Csikszentmihalyi, 2000)

• Within this field, studies have been conducted to enhance and sustain the experience of happiness.

• These studies have led to the creation of positive psychology exercises, the explicit goal of which is to increase happiness.
What’s the Evidence?

• Meta analysis
  • k=51 studies
  • n=4,266 participants

• Outcomes
  • Improvements in overall well-being (r=0.29)
  • Reductions in depression (r=-0.31)

• Conclusion
  • Enhancing positive affect with brief, self-administered exercises is entirely feasible

Are these gains sustainable?

• Meta analysis
  • $k=39$ studies
  • $n=6,139$ participants

• Outcomes
  • Improvements in subjective well-being remained evident 3 to 6 months later

• Conclusion
  • Yes!

Don’t take my word for it

• Search

Google Scholar

Positive psychology interventions: a meta-analysis of randomized controlled studies

• Find

Google Scholar

Positive psychology interventions: a meta-analysis of randomized controlled studies

• Read

Any time
Since 2019
Since 2018
Since 2015
Custom range...

Sort by relevance
Sort by date

The use of positive psychological interventions may be considered as a complementary strategy in mental health promotion and treatment. The present article constitutes a meta-analytical study of the effectiveness of positive psychology interventions for the general public and for individuals with specific psychosocial problems. We conducted a systematic literature search using PubMed, PsycINFO, the Cochrane register, and manual searches. Forty articles, describing 39 studies, totaling 6,139 participants, met the criteria for inclusion ...
So why don’t we leverage that?

- Siloed
- Resnick, 2006: “Although the underlying philosophies and goals of the recovery movement and positive psychology are similar, two differences have kept them from intersecting.”
- Krentzman, 2013: “The two movements have existed side-by-side with minimal crosspollination.”
Two Differences (Resnick & Rosenheck, 2006)

• **Difference #1**
  • In establishing the field of positive psychology, a dichotomy was invoked: that psychology must pay as much attention to “fulfilling the lives of healthy people as to healing the wounds of the distressed” (Peterson & Park, 2003)
    • That implies that “only “healthy” people will benefit from a psychology of strengths, while “distressed” people will continue to require “negative psychology” ”

• **Difference #2**
  • “Positive psychology is centered on empirical research, whereas the recovery movement, ... has placed itself distinctly apart from the human service professions, the academy, and the empirical research tradition.”

Peterson C, Park N: Positive psychology as the evenhanded psychologist views it. Psychological Inquiry 14:143-147, 2003
Can positive psychology be used to support health behavior change?

- Positive psychology interventions (PPIs) have been successfully implemented to facilitate health behavior change in the areas of:
  - Smoking cessation
  - Chronic pain management
  - Treatment of cardiovascular disease
Smoking Cessation

• Positive emotion during smoking cessation has been shown to increase an individual’s likelihood of successfully quitting smoking.

• Positive psychology based interventions have been developed for in-person and smartphone app delivery:
  • Jury is still out on their effectiveness
  • In-person: http://quitwithbrown.org/
  • Smartphone app: https://scholar.harvard.edu/bettina.hoeppner/join-our-study
Chronic Pain Management

• In chronic pain sufferers, the induction of positive mood states using PPIs is associated with
  • decreased bodily pain
  • increased pain tolerance

Treatment of Cardiovascular Disease

- In cardiac patients needing to increase physical exercise,
  - Positive psychological traits have been found to be associated with more positive cardiac outcomes in patients with heart disease.
  - Patients have also reported a great liking of PPIs
  - The use of PPIs has been linked prospectively with increased cardiac health behaviors.
What do we know about positive experience and substance use?

• **Not a lot, but promising**

• The experience of positive emotions,
  • Has been linked to resilience
  • May act as a buffer against family conflict, parental or peer substance use
  • May help rebuild a life outside of substance use.

• Well-being has been found to be associated with **fewer relapses** in persons in a residential treatment program for addiction (**cross-sectionally, so cause-and-effect is unclear**)  

• Longitudinally, higher life satisfaction has been linked with a **greater chance of remission 1-2 years later**


What about supporting behavioral change in the area of problematic substance use?

• Is it feasible?
  • The transition away from problematic substance use represents a particularly challenging time, and thus, is perhaps a time during which exercises designed to engender an awareness of the good things in life could instead serve as a reminder of things that are lost or lacking

• Three pilot studies
  • 20 adolescents attending an alcohol and drug treatment service
  • 23 outpatients in a treatment program for alcohol use disorder
  • 21 methamphetamine-using men who have sex
Akhtar & Boniwell, 2010

- 20 adolescents attending alcohol and drug treatment service
- Randomized to receive
  - Eight weekly workshops based on positive psychology models including happiness, strengths, optimism and gratitude
  - versus no treatment
- Results
  - Increase in subjective happiness and decrease in alcohol consumption in the treatment but not the control group

<table>
<thead>
<tr>
<th>Session</th>
<th>Zones</th>
<th>Principal Themes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Week 1</td>
<td>Feel Good Zone</td>
<td>Positive Emotions, Savouring</td>
</tr>
<tr>
<td>Week 2</td>
<td>Future Zone</td>
<td>Gratitude, Optimism</td>
</tr>
<tr>
<td>Week 3</td>
<td>Me Zone</td>
<td>Strengths</td>
</tr>
<tr>
<td>Week 4</td>
<td>Chill Zone</td>
<td>Relaxation, Meditation</td>
</tr>
<tr>
<td>Week 5</td>
<td>Change Zone</td>
<td>Change, Goal-setting</td>
</tr>
<tr>
<td>Week 6</td>
<td>Me to You Zone</td>
<td>Relationships</td>
</tr>
<tr>
<td>Week 7</td>
<td>Body Zone</td>
<td>Nutrition, Physical Activity</td>
</tr>
<tr>
<td>Week 8</td>
<td>Bounce back Zone</td>
<td>Resilience, Growth Mindset</td>
</tr>
</tbody>
</table>

Krentzman et al., 2015

**Design**
- 23 outpatients in a treatment program for alcohol use disorder
- **Daily emails** for 2 weeks
- Randomized

**Results**
- 91% of participants completing the exercise daily
- **Decrease in negative affect**
- Increased experience of the calm and peaceful dimensions of positive affect

| Table 2. Six open-ended questions administered daily for 14 days via web-based survey. |
|---|---|
| Treatment (TGT) (Seligman et al., 2005) | Control (placebo sleep hygiene questions) |
| Instructions | Please describe three good things that happened to you in the past 24 h |
| Question 1 | Description of the first good thing that happened in the past 24 h |
| Question 2 | What was its cause? (What made this happen?) |
| Question 3 | Description of the second good thing that happened in the past 24 h |
| Question 4 | What was its cause? (What made this happen?) |
| Question 5 | Description of the third good thing that happened in the past 24 h |
| Question 6 | What was its cause? (What made this happen?) |
| In the past 24 h, please describe exactly when and where you dozed off, fell asleep, napped, or slept for any length of time. If you engaged in any kind of exercise, including light exercise, in the past 24 h, what did you do? When during the day did you exercise? During the past 24 h, what kinds of caffeinated products (coffee, tea, soda, chocolate) did you have, if any, and about how much of each did you have? While you were sleeping at any time over the past 24 h, was anything on (computers, lights, TV, stereo)? If so, what was on while you were sleeping? Please describe what you were doing in the hour before you last fell asleep. Please describe what you did in the first hour after your final awakening. |

Carrico et al., 2015

• Design
  • 21 methamphetamine-using men who have sex with men
  • Adding a 5-session positive affect component to contingency management
  • Randomized

• Results
  • High treatment completion (98%)
  • Increases in positive affect over short term (2 months), but not long term (6-months)
That’s all nice and well, Dr. Hoeppner, but ... 

... did YOU actually contribute anything here?
Recovery Happiness Survey

- Online survey
  - 531 adults describing themselves as seeking or being in recovery from problematic substance use
  - Recruited from recovery-support social network sites, Craigslist, RRI, Rally

- Questions:
  - “What role do you think happiness plays in recovery?”
    - A goal
    - A pathway
    - Goal and pathway
    - Not relevant
    - Hindering
  - “How important is your happiness to your recovery process?”

What role do you think happiness plays in recovery?

Happiness is ...

- ... a goal of recovery
- ... both a goal and a pathway
- ... hindering recovery
- ... a pathway towards recovery
- ... not relevant to recovery
How important is your happiness to your recovery process?
Then it got interesting …

- **Pre:** Asked: “How happy are you feeling right now?”

- **Randomized** to complete one of 7 exercises
  - Happiness Exercises
    - 3 Good Things
    - Experiencing Kindness
    - Savoring
    - Rose, Thorn, and Bud
    - Reliving Happy Moments

  - Control Exercises
    - 3 Things
    - 3 Hard Things (aka, “The Thicket”)

- **Post:** Asked again: “How happy are you feeling right now?”
3 Good Things

• Exercise
  • “Think back over the past day. What are three good things that you have experienced in the past 24 hours?”

• Based on
  • Best known positive psychology exercise
  • Shown to have rapid and lasting effects on reducing depressive symptoms and increasing happiness.
Exercise

“Think back over the past day. What is one act of kindness that YOU have done in the past 24 hours? What is one act of kindness that you have seen SOMEONE ELSE do in the past 24 hours?”

Based on

- Positive psychology research
- Writing about the “blessings” in one’s life is a particularly effective means of increasing happiness (Lyubomirsky et al., 2005)
- Simply counting one’s own acts of kindness has been shown to increase happiness (Otake, Shimai, Tanaka-Matsumi, Otsui, & Fredrickson, 2006)
Exercise

“Please describe an experience that you have savored in the past 24 hours. By ‘savored’ we mean a positive experience that you have noticed and appreciated as being a wonderful moment. These experiences can be quite simple, everyday kind of moments. If you didn’t actively savor an experience in the past 24 hours, please describe an experience you will likely have in the next 24 hours that you could savor.”

Based on

- Positive psychology research, but not an explicit exercise used before
- Show to be an important aspect of sustained happiness
Exercise

“Thinking back over the past day, what is the BEST thing that you have experienced (your rose), the WORST thing you have experienced (your thorn), and the thing you are most looking forward to in the next 24 hours (your bud)?”

Based on

This exercise is not an exercise put forth by scientists, but rather is an organically existing, commonly shared exercise used for self-reflection and mindfulness.
Reliving Happy Moments

• Exercise
  • “Take a minute to browse through the pictures you have saved on your smartphone, on your computer, or have lying around. Find one that brings back a happy memory. What is happening in that picture?”

• Based on
  • Variation of standard laboratory cue exposure tasks which expose research participants to affect-inducing pictures drawn from standardized picture sets, such as the IAPS (Lang, Bradley, & Cuthbert, 2008) and OASIS (Kurdi, Lozano, & Banaji, 2017),
Control Exercises

- Both control exercises were modeled after the “3 Good Things”
  - Neutral: “Think back over the past day. What are three things that you have experienced in the past 24 hours?”
    - Effort to create a theoretically neutral comparison, which acts as an attention-control without valence.
  - Negative: “Think back over the past day. What are three experiences that have been hard for you in the past 24 hours?”
    - Clinically relevant comparison, because treatment frequently addresses encountered challenges
So what did we find?
Results

- Two Things
  - In-the-moment happiness increased in participants randomized to happiness exercises
  - It decreased in controls

*Figure 3. Average happiness ratings immediately before vs. after completing a randomized exercise in persons recovering from heavy substance use (n=531; 67% alcohol)*
Which Exercise Worked Best?

- Greatest pre-post increases in happiness for
  - “Reliving Happy Moments” exercise ($g_{av}=0.15$)
  - “Savoring” ($g_{av}=0.09$)
  - “Rose, Thorn, Bud” ($g_{av}=0.07$).

- Observed decreases in happiness in response to the “3 Hard Things” exercise underscore the importance of offsetting the challenges of recovery with positive experiences.
How doable are these exercises?

<table>
<thead>
<tr>
<th>Measure</th>
<th>Percentage (Sample Size)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Completed the exercise (at least partly), % (n)</td>
<td>92.0 (346)</td>
</tr>
<tr>
<td>Time to complete the exercise, minutes, M(SD)</td>
<td>4.1 (3.0)</td>
</tr>
<tr>
<td>Ease of completing the exercise, range 0-100, M(SD)</td>
<td>81.7 (18.7)</td>
</tr>
<tr>
<td>Could do an exercise like this as part of their daily routine, % (n)</td>
<td>93.5 (328)</td>
</tr>
<tr>
<td>Would do an exercise like this as part of their daily routine</td>
<td></td>
</tr>
<tr>
<td>Yes, for several weeks if not indefinitely, % (n)</td>
<td>32.2 (113)</td>
</tr>
<tr>
<td>Yes, for a little while, % (n)</td>
<td>27.4 (96)</td>
</tr>
<tr>
<td>Yes, on and off, % (n)</td>
<td>34.2 (120)</td>
</tr>
<tr>
<td>No, % (n)</td>
<td>6.3 (22)</td>
</tr>
<tr>
<td>Daily exercises could help them to be happier or maintain happiness, % (n)</td>
<td>86.3 (232)</td>
</tr>
</tbody>
</table>
Do They Only Work for Happy People?

• No, the opposite, actually.

How happy are you feeling right now?

Distribution of happiness

Happiness rating, M±SE (scale: 0-100)

Time in relation to exercise completion

Happiness (positive) - HIGH
Negative & Neutral - HIGH
Happiness (positive) - LOW
Negative & Neutral - LOW
A Conceptual Model

High Positive Affect
(maintained or increased)
- broadened thought-action repertoires to enact substance use alternatives
- increased self-efficacy
- decreased defensive processing of self-relevant health information
- reduced desire / urge to use substances

Positive Psychology Intervention

Sustained Recovery

• Largely based on smoking research
Measuring the Thought-Action Repertoire

• A little bit harder to measure
• Name the emotion
• Feel the emotion
• List actions
• Then we count them

Losing the Signal in the Noise

• Naming the emotion
  • In the happiness groups, only 66% - 96% of participants named a positive emotion
  • In the neutral group, as many as 59% named a positive emotion
  • Even in the “3 Hard Things” group, 13% named a positive emotion

• Invalid responses
  • “nothing”
  • “I wish I were ...”
  • Being rather than doing (e.g., “be less down”)
  • Passively receiving (e.g., “hear from my friends”)
Thought-Action Repertoire

- Still found a signal!
- Keep in mind that 59% in the “3 Things” still thought happy thoughts
Conclusions

• Happiness exercises seem to work best when
  • Happiness is not at ceiling levels
  • There is a need to counteract expected experiences of negative affect

Great! So is this coming to a theater near me?
Yes! The SiS App

- https://scholar.harvard.edu/bettina.hoeppner/sis

Complete daily happiness exercises...

...and in so doing, build a log of happy experiences.

...and along the way, receive science findings on why happiness matters to health and becoming smoke-free.
Uhm, smoking cessation?

- Tobacco use is a leading cause of preventable death in persons suffering from substance use disorder
- Individuals in treatment for alcohol use disorder who smoke are more likely to die from tobacco use than from alcohol use
- 65-87% of persons with SUD smoke (only 15.5% in the general population)
- Best practice recommendations are to treat smoking cessation during SUD treatment
  - Tobacco use is associated with worsened substance use treatment outcomes
  - Tobacco use is a lethal and ineffective long-term coping strategy for managing stress
  - Treatment of tobacco use does not harm SUD recovery and may in fact even improve SUD treatment outcomes

SiS Study 1

- 30 nondaily smokers
- Used app for 3 weeks
- Completed surveys
  - Baseline
  - Week 2
  - Week 6
  - Month 3
  - Month 6

Hoeppner BB, Hoeppner SS, Carlon HA, Perez G, Helmuth E, Kahler CW, Kelly JF. Feasibility and acceptability of a smartphone app leveraging positive psychology to support smoking cessation in nondaily smokers. JMIR mHealth and uHealth. in press.

Table 1. Sample characteristics (n=30)

<table>
<thead>
<tr>
<th>Demographics</th>
<th>mean/ %</th>
<th>(SD/n)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>44.7</td>
<td>(14.1)</td>
</tr>
<tr>
<td>Gender (% female)</td>
<td>26.7</td>
<td>(8)</td>
</tr>
<tr>
<td>Race (in %)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>White</td>
<td>40.0</td>
<td>(12)</td>
</tr>
<tr>
<td>Black</td>
<td>43.3</td>
<td>(13)</td>
</tr>
<tr>
<td>Other or unknown</td>
<td>16.7</td>
<td>(5)</td>
</tr>
<tr>
<td>Hispanic (in %)</td>
<td>6.7</td>
<td>(2)</td>
</tr>
<tr>
<td>Education (in %)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>High School or less</td>
<td>26.7</td>
<td>(8)</td>
</tr>
<tr>
<td>Some college</td>
<td>36.7</td>
<td>(11)</td>
</tr>
<tr>
<td>BA/BS or higher</td>
<td>36.7</td>
<td>(11)</td>
</tr>
</tbody>
</table>

Smoking Characteristics

<table>
<thead>
<tr>
<th>Smoking Characteristics</th>
<th>mean/ %</th>
<th>(SD/n)</th>
</tr>
</thead>
<tbody>
<tr>
<td># of days smoked in past 30 days</td>
<td>15.6</td>
<td>(6.0)</td>
</tr>
<tr>
<td># of cigs smoked per smoking day</td>
<td>4.5</td>
<td>(2.9)</td>
</tr>
<tr>
<td>Ever smoked daily? (% yes)</td>
<td>60.0</td>
<td>(18)</td>
</tr>
<tr>
<td>Ever quit before? (% yes)</td>
<td>70.0</td>
<td>(21)</td>
</tr>
</tbody>
</table>
App Use Over Time

[Graph showing the percentage of participants using the app over time, with lines for different categories such as 'Any App Use', 'Happiness Exercise', 'Happiness Log', 'Behavioral Session', 'Making Cigarette Report', 'Viewing Cigarette Graph', 'Ad Libitum: Risky Times', 'Ad Libitum: Social Support', 'Ad Libitum: Personal Reasons', 'Ad Libitum: Benefits', and 'Smoking cessation quit day'. The x-axis represents the day in the study, and the y-axis represents the percent of participants using the app function.]

[Graph showing the same data but split by study week, with a legend indicating the end of the 'prescribed' app use period.]
How did it help?

- 90% said the app had helped them
- Particularly important
  - Reminder to stay on track (83%)
  - Boosting confidence to quit (80%)
  - Reinforcing belief that quitting was worthwhile (80%)

<table>
<thead>
<tr>
<th>Statement</th>
<th>mean (SD)</th>
<th>% agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>The app helped remind me to stay on track with quitting.</td>
<td>3.9 (0.9)</td>
<td>83%</td>
</tr>
<tr>
<td>The app gave me confidence that I can quit smoking.</td>
<td>3.9 (1.0)</td>
<td>80%</td>
</tr>
<tr>
<td>The app made me think that it was worthwhile for me to quit.</td>
<td>4.0 (1.1)</td>
<td>80%</td>
</tr>
<tr>
<td>The app made me feel that someone cared if I quit.</td>
<td>3.9 (1.1)</td>
<td>77%</td>
</tr>
<tr>
<td>The app reminded me why I wanted to quit.</td>
<td>4.1 (0.8)</td>
<td>77%</td>
</tr>
<tr>
<td>The app helped me stay positive while quitting.</td>
<td>3.8 (1.1)</td>
<td>70%</td>
</tr>
<tr>
<td>The app gave me the feeling I could get trusted advice at any time.</td>
<td>3.7 (1.1)</td>
<td>70%</td>
</tr>
<tr>
<td>The app made me feel that I knew the right steps to take to quit.</td>
<td>3.5 (1.1)</td>
<td>60%</td>
</tr>
<tr>
<td>The app motivated me to reach out to the people in my life about quitting.</td>
<td>3.4 (1.2)</td>
<td>57%</td>
</tr>
<tr>
<td>The app helped me deal with risky smoking times.</td>
<td>3.5 (1.2)</td>
<td>57%</td>
</tr>
<tr>
<td>Taken altogether, do you think that the app helped you in your quit attempt?</td>
<td>3.5 (1.2)</td>
<td>90%</td>
</tr>
</tbody>
</table>

Note: rated on a 5-point Likert scale: 1=strongly disagree, 2=disagree, 3=neither agree nor disagree, 4=agree, 5=strongly agree
Impact on Mechanisms of Change

• **Confidence increased** (on a 0-100 scale)
  • internal cues: $b=16.7$ [95%CI: 7.2, 26.3], $p=.001$
  • external cues: $b=15.8$ [95%CI: 5.4, 26.1], $p=.004$

• **Urge to smoke decreased** (on a 1-7 scale, $b=-0.8$ [95%CI: -1.3, -0.3], $p=.002$)

• **Perceptions of smoking became less positive**
  • (on a 1-5 scale)
    • psychoactive benefits: $b=-0.5$ [95%CI: -0.9, -0.2], $p=0.006$;
    • pleasure: $b=-0.4$ [95%CI: -0.7, -0.01], $p=.03$;
  • on a 0-100 scale,
    • importance of pros of smoking: $b=-11.3$ [95%CI: -18.9, -3.8], $p=.004$).
Smoking Cessation

- Biochemically verified point-prevalence abstinence rate was 30%
- Self-reported 30-day abstinence
  - 6 weeks after quit day: 41%
  - 3 months after quit day: 45%
  - 6 months after quit day: 48%
- By comparison
  - 26% of daily smokers using the app “Clickotine” (n=416) reported 30-day abstinent at 2-month follow-up
  - 36% of daily smokers using an mHealth program combining real-time tailored advise with asynchronous secure messaging with a cessation counselor reported abstinence 5-month follow-up
  - An average of 28% (treatment) vs. 13% (control) of daily smokers across 4 RCTs testing text-messaging smoking cessation interventions reporting abstinence 4-6 weeks post quit
Work in Progress

Version 1

Happiness Exercises
Here are the actions you can take regarding your happiness exercises:
Complete today’s exercise:

- EXPERIENCING KINDNESS

Browse through your previously submitted happy moments

- YOUR PAST ENTRIES

Look at a graph of your day-to-day happiness over time

- VIEW GRAPH

Version 2

Experiencing Kindness
Please describe two acts of kindness: a kindness you did, and a kindness you saw someone else do today:

- describe an act of kindness you did today

- describe an act of kindness you saw someone else do today

Why this exercise?
Think back over the past day. What is one act of kindness that YOU have done in the past 24 hours?

Examples

- My Act of Kindness: Held the elevator for someone rushing into the building
- Witnessed Act of Kindness: At my favorite lunch place, the chef told me that he made my wrap especially nicely just for me.
Other Tools in SiS: Behavioral Challenges

Engage in "behavioral challenges" every 2-4 days, designed to coach you through your quit attempt...

...and earn badges as you go!
Other Tools in SiS: Logging Cigarettes

As you go, log your cigarettes...

...and receive feedback based on your smoking pattern.
Other Tools in SiS: Personal Reasons

Reflect on your personal reasons for quitting smoking...

...and be reminded of them at key times during your quit attempt.
Other Tools in SiS: Games and Facts

As you need it, play our game "Magma Bear" to beat your cravings...

...and along the way, receive science findings on why happiness matters to health and becoming smoke-free.
Closing Thoughts

Don’t think of the green elephant

You are where your attention is
Thank You!

My family - science is a team sport!