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Positive psychology, virtue, and flourishing in psychotherapy

compassion, and justice among others; Hill & Sandage, 2016). A goal of "flourishing" moves beyond hedonic or subjective forms of well-being, and each of the research teams in this panel are informed by eudaimonic or developmental theories of well-being characterized by relational maturity, meaningful purpose, integrity and the pursuit of virtue, and communal concern through prosocial behavior (Boettscher, Sandage, Latin, & Barlow, 2019; Waterman, 2013). To date, efforts at integrating positive psychology into psychotherapy have tended to involve the development of new "positive psychotherapies," however we will consider the possibilities (and challenges) of integrating positive psychology into mainstream psychotherapy approaches. Drawing on work from a multi-site Templeton grant, this panel will describe ways these complex topics of virtue and flourishing can be engaged in psychotherapy research and practice.

Integrating positive psychology constructs in psychotherapy: Therapist perspectives on flourishing and virtue.

Jeremy Coleman, University of Denver; Jesse Owen, University of Denver; Shannon Sauer-Zavala, University of Kentucky; Karen Tao, University of Utah; Nancy Devor, Boston University; Heidi Levitt, University of Massachusetts Boston; Cassidy Gutner, Boston University School of Medicine; Mary Zanarini, McLean Hospital; Steven J. Sandage, Boston University

The term "flourishing" means to grow or prosper and refers to a holistic, developmental sense of well-being (VanderWeele et al., 2019). There is growing interest in the principles of flourishing in psychotherapy. For instance, there are 20 studies of positive psychotherapy with results on par with other bona-fide treatments and emphasize aspects of flourishing as factors in client progress (e.g., AEDP, ACT; Fosha, 200; Rashid & Seligman, 2018). Still, the concept of flourishing remains largely segregated from mainstream mental healthcare practice. The disease model dominance within mental healthcare employs a view of the human person as "clusters of symptoms" with the goal of treatment being the reduction of negative symptoms rather than increasing flourishing. Little is known about how mental health treatments improve clients' flourishing, as most studies have focused on symptom reduction. To address these limitations, the current study facilitated collaboration among four clinical research teams representing different clinical sites and training perspectives (e.g., CBT, Psychodynamic, Integrated). In doing so, we conducted eight focus groups utilizing a grounded theory qualitative approach to explore the processes through which flourishing is fostered in psychotherapy and the training of mental healthcare professionals.

Trajectories of Change in Well-Being During Cognitive-Behavior Therapies for Anxiety Disorders: Quantifying the Impact and Covariation with Improvements in Anxiety

Todd Farchione, Boston University; Matthew Gallagher, University of Houston; Colleen Phillips, University of Houston; Johann D'Souza, University of Houston; Angela Richardson, University of Houston; Laura Long, University of Houston; James F. Boswell, University at Albany/SUNY, USA; Elizabeth Eustis, Boston University; Stephen Allen, Boston University; David Barlow, Boston University

Despite substantial evidence supporting the efficacy of cognitive-behavioral therapy for reducing many forms of mental illness, less is known about whether CBT also promotes mental health or well-being. We will discuss results of a recent study (Gallagher et al., 2019) examining changes in well-being during different CBT treatments for anxiety disorders and how these changes relate to anxiety. In that study, 223 adults (55.6% female, Mage=31.1 yrs) were randomized to one of five CBT protocols for anxiety disorders at an outpatient clinic. Effect sizes were calculated to examine the timing and magnitude of changes in well-being as a result of CBT. Further, parallel process latent growth curve models were conducted to examine the extent to which trajectories of changes in well-being correlated with the trajectories of change in both clinician-rated and self-reported anxiety during active treatment. Results indicated that there were moderate-to-large increases in overall well-being and the three components of subjective, psychological, and social well-being, mainly during the second half of CBT, and these increases were maintained at a 6-month follow-up. Further, trajectories of change in well-being across treatment were strongly correlated with trajectories of change in clinician rated and self-reported anxiety. Together, these findings suggest that different CBT protocols for anxiety consistently produce robust and lasting changes in different domains of positive mental health and increases in well-being are strongly linked to changes in anxiety during treatment.

Humility as a Predictor of Flourishing, Functioning, and Health among Adult Community Mental health Clients.

Steven J. Sandage, Boston University; Sarah Crabtree, Boston University; Eugene Hall, Boston University; Peter Jankowski, Bethel University; Elizabeth Ruffing, Boston University

The scientific literature on humility has grown rapidly over the past decade with hundreds of studies now