**Method One Paper**

**Comparing brief mindfulness manipulation (BMM) to attention feedback awareness and control computer-based training (A-FACT)**

**Question**

Will individuals who were found to have deficits in attentional control and were shown to be more susceptible to cognitive bias, benefit more from training of meta awareness, and will present increased attentional control.

**Participants**

**--- needs to be decided ---**

Approximately 250 RRS questionnaires will be online distributed. From the initial sample, the highest 70 on brooding subscale respondents (given that their average will be close to 53 on the total questionnaire based on Eftekhari, Zoellner & Vigil, 2009), will be recruited.

**Procedure**

**--- needs to be updated according to final design deciding ---**

Participants will be recording their STP stimuli sets and answer relevant questionnaires. Once arrived at the lab, a participant will be randomly assigned to either A-FACT, BMM or placebo group. First, she will be administered to the pre-post measures than to the relevant training and then again to the three pre-post measures. Finally, one back dichotic STP task will be administered.

**Design**

* STP stimuli will randomly divided into two sets:
  + Pre training + training
  + Post training

Such that habituation during training is prevented.

**Design Flow:**

STP DCT base line 🡪 Training (AFACT-BMM-Placebo) 🡪 STP DCT post intervention 🡪 MAB 🡪 One Back Dichotic STP

*See attached picture*

**Design details:**

**Training**

1. Internal-External A-FACT –> STP + Digit-Categorization based
   1. X,Y – Trails\Blocks
   2. Feedback based on deviation from running mean of <X> last neutral trials
2. Brief Mindfulness Manipulation (BMM) + STP
   1. Occasionally during the practice, you will here some of your thoughts + see below options **\***
3. placebo

**\* BMM**

Focused guided meditation – breath. Thing will come up during the meditation, kindly return your attention to your breath

**Options:**

1. No measure.
2. Press when your attention was wandering and you came back.
3. Press on each breath (we – will count missing presses).
4. Label out loud.

**Current targets**

1. **OMER & IFTACH & EITAN** 
   1. ~~Decide on boxes\keyboards – python\eprime~~ **~~-~~ PYTHON**
   2. ~~Get tasks structure~~
2. **IFTACH:**
   1. **DCT\ONE BACK DICHOTIC** what is the minimal trial/block amount needed for finding effects (analysis)
   2. What is the cutoff of ptq\rrs scores that show greater effects
      1. *TOMER – DID WE DECICDE THESE QUESTION ARE UNANSWERABLE?*
   3. **ONEBACK DICHOTIC –** pre/post or only post?
3. **LIAD:**
   1. **A-FACT\MAB** what is the minimal trial/block amount needed for finding effects (analysis)
4. **YUVAL & OMER:**
   1. Brain storming over BMM task measurement
   2. See above **\***

**Pre-Post Measures to show training effect**

1. DIGIT + STP – **(baseline bias**?)
2. pre-post: Digit Categorization based pre-post: Meta Awareness of Bias – Digit Categorization based (MAB) – Self Caught Probe **only post**)
   1. ***attention to the problem with data***
3. ~~State – PNAS!~~
4. ~~DAADS – state decentering~~ – MPODs
   1. Wait for paper form Amit.

**Optional Psychopathology Correlates Measures** (*Some of these – not all, I guess…*)

1. PTQ
2. BDI\PHQ9 – Depression
3. BAI – Anxiety
4. PTQ – Repetitive negative thinking
5. PSWQ – Worry
6. RRS – Brooding
7. FFMQ – mindfulness
8. MPOD-t – decentering

Look at iftach

Considerations:

* General description of the population
* Baseline analysis
* Moderators of change
* Pre-post – state measures