

Scientific Overview

SUMMARY

- The technology behind Mightier has been tested in four trials, including two double-blind, randomized controlled trials.
- The Mightier technology has consistently improved behavior symptoms.
- The Mightier technology consistently outperforms the current best-available therapeutic options.
- Gains in Mightier consistently transfer beyond the screen, leading to decreased parent stress and better participation in classroom activities.



THE MIGHTIER LEARNING LOOP

Our science directly validates the Mightier learning loop. Mightier builds off of the established theory that people learn best when then they can construct meaning for themselves. Therefore, Mightier technology works to make emotions visible and actionable when they matter most, during moments of challenge. Children practice in a safe environment that presents the same type of challenges kids face every day, just in miniature.

- 1. Make emotions visible. The Mightier Gizmo, always on the screen, gives kids real-time feedback on their heart rate. *The Blue* is safe but drift out and *The Red* can come down and catch you.
- 2. Scale difficulty with emotions. When in *The Red* the difficulty of Mightier games increases, but the games never become impossible.
- **3. Reward invention.** There's no *one* right way to regulate. Let kids see what works for them and make it tangible in the games.
- **4. Give support.** Sometimes, kids need a bit of extra help. The Mightier gizmo lets kids opt into a deep breathing exercise, showing them that they are in control.

MIGHTIER TRIALS

Key finding: Children using Mightier technology and therapy reduced symptoms aggression, oppositional behavior, and parent stress compared to children receiving control treatment.

Trial	Participants	Design	Location
1	40 children, ages 10- 18, Elevated anger	Open-label compared to treatment as usual	Boston Children's Hospital
2	40 children, ages 10- 18	Double-blinded randomized sham-controlled trial	Boston Children's Hospital

	Elevated aggression and anger		
3 (replication)	40 children, ages 10- 18, elevated aggression and ADHD	Double-blinded randomized sham-controlled trial	Massachusetts General Hospital
4	8 children, ages 8-12 Referred by teachers	Open-label pre- post- comparison	Brookline (MA) and Montreal (QC) public schools





References

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