


## The science of happiness as a health strategy

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### ABSTRACT

Since time immemorial, the pursuit of happiness has fascinated minds and hearts, challenging us to plumb the abysses of human subjectivity. In a world permeated by nuances and complexities, understanding this elusive state continues to push the boundaries of our understanding, inviting us on an intellectual journey towards its essence. As we move forward in time, happiness has increasingly been the subject of scientific scrutiny, driving the emergence of disciplines such as psychology and neuroscience. In this context, the quest to understand the mechanisms underlying happiness transcends the boundaries of philosophy and enters the territory of empirical research, promoting a multidisciplinary approach that seeks to decipher the enigmas of the human mind and unveil the secrets of a full and satisfying life. Today, the emergence of the science of happiness represents an innovative approach in the field of healthcare, recognizing its impact on the emotional and mental well-being of patients. Thus, this study investigates the integration of psychology in the context of health care, aiming to promote the well-being and quality of life of patients. The research comprises a critical review of relevant contents, seeking to synthesize the existing knowledge on the subject. The humanization of health care emerges as a central issue, valuing both professionals and users of the health system. Despite the advances in the discussion and restructuring of health services, there is still a lack of studies that explore the theoretical and philosophical bases of these transformations.

**Keywords:** Happiness, Science of Happiness, Emotional Well-being, Positive Psychology, Humanization of Health, Health Care.

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## INTRODUCTION

Happiness transcends mere conceptual definition, encompassing a multitude of factors that have been explored and debated throughout human history. From the dawn of philosophical thought to the advances of contemporary science, the quest to understand and cultivate happiness has been a multi-track journey, but at the same time rooted deeply in the essence of the human experience.

For a long time, happiness was treated only as a subjective and difficult-to-measure state of mind that depended on individual personality and circumstances. There was little attention to understanding how happiness could be increased or how it could develop effective interventions to help people be happier (Rozeira, 2024).

In the common sense created, happiness was seen as something that simply happened, or not, in people's lives and that reached a common limit, which could only be raised through the external circumstances of our life such as financial success, our relationships, our physical health, among others. For this reason, when we are in this "ordinary" state, we forget about mental health and go in search of these tangible goals (Rozeira, 2024).

It is true that people live in pursuit of happiness. In literature, music, and the fine arts, the feeling is often portrayed as a state of fulfillment achieved on the basis of external achievements: a great love, a job, or a dream trip. But what is the way to happiness? Is it possible to live "happily ever after"?

The perception and pursuit of happiness can be influenced by a range of cultural, social, religious, and philosophical factors, which can result in distinct perspectives between the Western and Eastern world. For example, in the West, happiness is often associated with personal fulfillment, the pursuit of individual goals, freedom, and autonomy. Meanwhile, in the East, especially in some Buddhist and Confucian traditions, happiness can be seen in a more collective way, linked to social harmony, duty, and communal interdependence. Yet, in the Western world, happiness is often expressed in an extroverted way, as a leap into life, accompanied by a wide smile, outstretched arms and legs, seeking to overflow joy and personal fulfillment. On the other hand, in Eastern countries, there is a tendency to seek happiness through peace of mind, contact with nature and introspection, where inner tranquility and harmony with the world around are valued as fundamental pillars of well-being. Despite these differences, there are common elements in the concept of happiness that transcend cultural boundaries. For example, the pursuit of meaningful relationships, a sense of purpose in life, physical and mental health, and a sense of personal fulfillment are all aspects valued in many cultures around the world (Rozeira, 2024).

According to Ekman (1992), fundamental emotions are accompanied by specific facial expressions, universal in different cultures, and correlate with physiological and behavioral changes, also observed in primates, which suggests that happiness can be considered a basic emotion. A wide



range of experiences can evoke feelings of happiness, such as love, joy, health, satiety, sexual pleasure, contentment, security, and serenity. On the other hand, emotions such as sadness, fear, anger, disgust, and affective states such as anxiety, anguish, pain, and suffering tend to decrease the feeling of happiness.

Cloninger (2004) emphasizes that "happiness" reflects a coherent and lucid understanding of the world, requiring a consistent approach to life that integrates sexual, material, emotional, intellectual and spiritual aspects. He suggests that the adaptability of these aspects—such as gender, material possessions, power, and interpersonal relationships—depends on the degree of awareness people have of their goals and values. In addition, Cloninger points out that the degree of coherence in human thoughts and relationships can be evaluated by their ability to promote harmony and happiness.

One of the most discussed questions in the science of happiness today concerns living in the present, that is, in the only concrete time we have. We observe that many people live according to a happiness that has not yet arrived or that which is already gone. They motivate comments such as: "When I graduate, I will be happy"; "When I buy my own house, I will be happy"; "When I get the job of my dreams, I'll be happy" or even "I was happy and I didn't know it...". Living in function of the past or future is almost a sentence to unhappiness, because, as the Stoics remind us, it is only possible to experience satisfaction with life in the only real time we have: the present moment.

According to the Houaiss Dictionary of the Portuguese language, happiness is defined as "the quality or state of being happy, a state of fully satisfied consciousness, contentment and well-being" (Houaiss, 2004). This positive emotional state is associated with the perception of success and a lucid understanding of the world.

Various states and experiences can awaken feelings of happiness, such as love, joy, health, and security. On the other hand, negative emotions and affective states, such as sadness, fear and anxiety, tend to decrease the feeling of happiness (Ferraz; Tavares; Zilberman, 2007).

One of the most intriguing aspects about happiness is the need to experience it in the present. Many people tend to postpone the pursuit of happiness, setting future conditions to achieve it, such as graduating, buying a house, or getting a dream job. However, this mindset of living for the future or regretting the past can be a barrier to experiencing true satisfaction in the present moment (Rozeira, 2024).

Stefan Klein, in the book "The Happiness Formula," suggests that happiness is both a life goal and a path to a better existence. It is an ongoing journey of self-discovery and personal growth (Rozeira, 2024).

When discussing happiness, we encounter a variety of perspectives, including matters of faith, personal opinions, and controversies. Some people believe that happiness is determined by divine



will, while others argue that it is impossible to be happy in today's world or that happiness is directly related to one's financial situation (Rozeira, 2024).

However, beyond subjective beliefs and opinions, there is a more objective and grounded approach to understanding happiness: the science of happiness. This emerging field of study utilizes rigorous research methods to investigate the determinants of happiness, identify effective strategies to increase well-being, and provide valuable insights into how to live a fuller and more meaningful life (Rozeira, 2024).

The science of happiness has gained prominence as an innovative strategy in the field of healthcare, recognizing the importance of emotional and mental well-being in the treatment and recovery process of patients. This approach not only focuses on physical healing, but also considers the positive impact that the relationship between healthcare providers and patients can have on the effectiveness of treatment (Rozeira, 2024).

The success of a healthcare treatment often depends on the quality of interaction between healthcare professionals and patients. A relationship based on empathy, trust, and mutual understanding can significantly improve treatment adherence, recovery, and quality of life for the patient. When patients feel heard, respected, and supported, they tend to be more actively involved in their own care, which can lead to better health outcomes (Rozeira, 2024).

The science of happiness emphasizes the importance of cultivating positive emotions, such as gratitude, optimism, and hope, which can strengthen emotional resilience and help patients face health challenges with a more positive outlook. In addition, strategies based on positive psychology, such as focusing on the patient's strengths and promoting healthy behaviors, can complement traditional medical approaches, contributing to a more holistic and integrated treatment (Lyubomirsky, 2011, Stewart, 2017).

Healthcare professionals can use specific techniques and interventions to promote patient well-being. These approaches not only help patients cope with physical and emotional symptoms, but also develop coping and self-care skills that are critical to maintaining long-term health (Rozeira, 2024).

Incorporating hope and positive expectations into patient care is key to improving their experience and happiness. Positive communication, highlighting strengths and possibilities for improvement in treatment plans, can strengthen patients' optimistic outlook. Informing them about the potential benefits of treatment and expected outcomes can motivate them to follow the care plan and maintain a positive outlook on recovery (Stewart, 2017).

Offering emotional and psychological support is equally important. Helping patients cope with the stress, anxiety, and emotions related to diagnosis and treatment can increase their hope and



confidence in recovery. Sharing success stories of patients who have overcome similar situations can inspire hope and show that recovery is possible (Stewart, 2017).

Encouraging patients' active involvement in their care by setting realistic goals and celebrating progress made can strengthen hope and motivation to continue treatment. Keeping patients informed of their progress and next steps in treatment through regular updates helps maintain a positive and hopeful outlook on recovery (Stewart, 2017; Rozeira, 2024).

A multidisciplinary approach to patient care, working together with other healthcare professionals to address all dimensions of physical, emotional, and psychological well-being, is essential to providing holistic and integrated care (Stewart, 2017).

The role of the health professional should be to pay attention to the well-being and happiness of patients. Showing empathy and understanding, maintaining clear and transparent communication, and treating all patients with respect and dignity are key aspects of improving their experience. Being available to answer their questions and concerns, providing educational information about disease prevention and health care, and creating a welcoming and comfortable environment in your office or clinic are also important (Stewart, 2017; Rozeira, 2024).

Recognizing the uniqueness of each patient and tailoring care to their individual needs, following up regularly to monitor their progress and adjusting the treatment plan as needed, and collaborating with other healthcare professionals to provide an integrated and coordinated approach to patient care are all practices that contribute to improving the patient experience (Stewart, 2017; Rozeira, 2024).

Finally, encouraging patients to provide feedback on your services can help you identify areas of improvement and enhance the quality of care provided, thereby promoting a more positive and satisfying experience for patients (Stewart, 2017; Rozeira, 2024).

The purpose of this study is to investigate how happiness science can be employed as an effective healthcare strategy in a variety of professional fields, including medicine, nursing, psychology, social work, dentistry, and other health disciplines. We aim to explore how positive psychology principles and interventions can be integrated into different health care contexts to promote patient happiness, well-being, and health. In addition, we seek to understand the potential benefits of this approach for the humanization of health care, focusing not only on the treatment of diseases but also on the promotion of human flourishing and quality of life. By examining the scientific evidence and best practices in these diverse areas, we aim to provide insights and guidance to healthcare professionals interested in implementing happiness science-based strategies in their clinical practices, regardless of their area of expertise.



## METHODOLOGY

Based on the guidelines of Cervo, Bervian and Silva (2007), the present study can be characterized as a basic and theoretical investigation, whose objective is to deepen scientific knowledge about the application of positive psychology in the context of health, especially in the context of medical care and in the promotion of happiness as a health strategy. This is an exploratory research with a qualitative approach, based on concepts and information extracted from the scientific literature.

As highlighted by Mancini and Sampaio (2007), this research involves a critical and synthetic review of relevant studies published on the topic in question, with the purpose of synthesizing existing knowledge and offering substantial conclusions on how positive psychology can be integrated in the context of medical care to promote patient well-being and the humanization of health.

To conduct this literature review, strategies were adopted using academic and scientific electronic platforms. Specific terms were used in the search, delimiting the parameters that guided the careful selection of studies and the comprehensive understanding of the existing panorama on the subject. Thus, the search engines Google Scholar, Scopus and Web of Science were explored to select relevant articles, using pertinent descriptors such as "positive psychology", "medical care", "patient well-being", "happiness" and "mental health".

Prominent authors in the field of positive psychology include Martin Seligman, recognized as the pioneer of the discipline, and Mihaly Csikszentmihalyi, known for his contributions to the concept of flow. Other relevant researchers include Barbara Fredrickson, Ed Diener, and Sonja Lyubomirsky, whose studies have significantly advanced the understanding of the determinants of human happiness and well-being.

To clarify complex issues addressed in the text, specific searches were carried out using the Google search engine. This approach allowed access to new sources of knowledge, following a methodology based on scientific and epistemological principles. As highlighted by Rozeira et al. (2023), this methodology reveals the beauty of unpredictability, the wit of complexity, and the truth in the journey of discovery. Each new concept assimilated represents a unique piece in the constant search for discernment, strengthening the structure of this scientific study.

## LEVELS OF HAPPINESS IN DIFFERENT SOCIAL AND CULTURAL CONTEXTS

The search for understanding happiness has been a topic of growing interest in several areas of knowledge. Comparative studies between populations in different countries reveal marked and consistent differences in happiness levels, shedding light on the various factors that influence this emotional state.



An extensive study conducted in European Union countries between 1973 and 1998, led by Ingleman and Klingemann (2000), highlighted that Danish citizens were significantly more likely to declare themselves "very satisfied" with their lives compared to Italians, French and Portuguese. This finding highlights the influence of culture and social context on an individual's perception of happiness.

In addition, there is a general tendency for richer nations to report higher levels of happiness compared to poorer nations, as indicated by Ingleman and Klingemann (2000). However, this relationship is not uniform, as evidenced by many Latin American countries, which exhibit happiness indices comparable to those of developed nations such as Australia and Japan (Veenhoven, 1991).

The World Values Surveys (WVS), a comprehensive international survey of human values in more than 60 countries, identified the countries with the highest happiness scores, highlighting Puerto Rico, Mexico, Denmark, and Colombia as the most prominent. However, it is interesting to note that Brazil was ranked 32nd, while the United States ranks 15th (Ferraz; Tavares; Zilberman, 2007), highlighting the complexity in understanding the determinants of happiness in different cultural contexts.

While increased purchasing power is associated with a better quality of life, research suggests that once an adequate livelihood threshold is crossed, increased wealth does not significantly correlate with higher levels of happiness. Studies have shown that people with above-average purchasing power are not necessarily happier than the general population and tend to devote less time to pleasurable activities (Kahneman et al., 2006).

Other sociodemographic factors, such as age, gender, marital status, and the presence of children, have been shown to have limited influence on happiness levels, contributing little to the variation in reported happiness indices (Ferraz; Tavares; Zilberman, 2007). However, studies on the relationship between mental health and religiosity or spirituality suggest a positive association between religious involvement and better mental health, with a lower incidence of psychiatric disorders and higher rates of psychological well-being (Moreira-Almeida et al., 2006; Ferraz; Tavares; Zilberman, 2007).

These studies indicate that happiness levels can be influenced by a variety of factors, including socioeconomic, cultural, and individual aspects, and highlight the complexity in understanding this phenomenon, reinforcing the importance of a complex approach to happiness analysis.

### LET'S THINK FOR A MOMENT: WHAT DOES IT MEAN TO BE HAPPY?

In the dictionary definition, the concept of happiness is practically unique: the state of being happy, a feeling of well-being and contentment. Philosophers associate happiness with pleasure, with





feelings and emotions. According to Aristotle, happiness would be balance and harmony, and the practice of good. For Epicurus, happiness occurs through the satisfaction of desires. For Pyrrhus of Aelia happiness came through tranquility. For the Indian philosopher Mahavira, non-violence was an important ally to achieve full happiness. For the Chinese philosopher Lao Tzu, happiness could be achieved by taking nature as a model. Confucius, on the other hand, believed in happiness due to harmony between people. In Buddhism, happiness occurs through the release of suffering and the overcoming of desire, through mental training (Roitman, 2022).

For Immanuel Kant, happiness is the condition of the rational being in the world, for whom, throughout life, everything happens according to his desire and will. For Friedrich Nietzsche, happiness is fragile and volatile. And he added, the best way to start the day is, when we wake up, imagine if on that day we can't give joy to at least one person. According to Albert Einstein, a calm and modest life brings more happiness than the pursuit of success combined with constant restlessness. On the other hand, Hannah Arendt introduced the concept of public happiness with public participation in political issues, the possibility of assembly, the joy of speech, the possibility of persuading and being persuaded, the public freedom to act together (Roitman, 2022).

The psychiatrist and psychoanalyst Sigmund Freud argued that every individual is driven by the search for happiness, but this search would be a utopian thing, since for it to exist, it could not depend on the real world, where the person can have experiences such as failure, therefore, the most that the human being could achieve would be a partial happiness (Roitman, 2022).

Beck (1996), a pioneer of Cognitive-Behavioral Therapy (CBT), argues that happiness is an emotional state resulting from healthy patterns of thought and behavior. In CBT, happiness is seen as a natural consequence of adaptive mental processes and positive behaviors. To experience and learn happiness from the perspective of CBT, it is essential to identify and modify distorted thought patterns that contribute to negative feelings, such as excessive self-criticism, rumination about negative past events, or excessive worry about the future. This can be done through the application of specific techniques, such as cognitive restructuring, which involves challenging and replacing negative automatic thoughts with more realistic and positive thoughts. Additionally, learning how to live happily in CBT involves practicing healthy behaviors and effective coping skills. This includes developing problem-solving strategies, the ability to deal with emotions constructively, and engaging in activities that provide pleasure and satisfaction. CBT also emphasizes the importance of cultivating healthy and fulfilling interpersonal relationships, as social support and connection with others play a key role in promoting emotional well-being and experiencing happiness (Beck, 1996), as we will see later when discussing positive psychology.

For many centuries, reflections on happiness have predominantly been under the domain of philosophy, offering deep insights and philosophical perspectives on what it means to live a good and





meaningful life. However, with the advancement of science and the development of psychology as an academic discipline, the focus has begun to shift to the scientific understanding of human happiness and well-being (Roitman, 2022).

Although psychology has had as its primary mission to alleviate human suffering, especially after traumatic events such as World War II, a crucial question has arisen: is it enough to just treat symptoms and alleviate suffering, or should we look for ways to promote human flourishing and genuine happiness (Rozeira, 2024)?

These questions led to the rise of Positive Psychology, focusing on the study of human strengths, virtues, and capabilities that contribute to well-being and happiness. Instead of focusing exclusively on problems and pathologies, Positive Psychology seeks to understand what makes people thrive and achieve a meaningful life (Rozeira, 2024).

Abraham Maslow, known for his Hierarchy of Needs Theory, was one of the pioneers in this area, emphasizing the importance of tapping into human potential and positive aspirations. He believed that psychology had much to learn about human capabilities and the "psychological peak" beyond simply diagnosing diseases and problems (Maslow, 1943).

Maslow's Hierarchy of Needs Theory proposes a hierarchical structure that organizes human needs into five distinct levels, representing the different stages of human development. At the most basic level are physiological needs, such as food and shelter, that are fundamental for survival and physical well-being. Next are security needs, which involve emotional stability and protection. The third level addresses social or belonging needs, related to the search for interpersonal connections and meaningful relationships. On the fourth level are the needs of esteem, which include personal recognition and appreciation, both internally and externally. Finally, at the top of the hierarchy are the needs for self-actualization, which represent the intrinsic desire to develop one's fullest potential and find purpose and meaning in life. This pyramid suggests that as needs at a lower level are met, the individual is motivated to seek the fulfillment of needs at the next level, guiding the process of personal growth and self-discovery throughout life (Maslow, 1943).

In 1954, Maslow introduced the term "Positive Psychology," laying the foundation for a new era of research and practice focused on the scientific study of happiness, well-being, and human flourishing. Since then, Positive Psychology has grown and developed, providing valuable insights and practical tools to promote a fuller, happier, and more productive life (Maslow, 1954).

## AND FOR SCIENCE, WHAT IS HAPPINESS?

Psychology and psychiatry have directed their attention to the study of happiness, marking a significant paradigm shift. For much of the twentieth century, the focus of research remained predominantly on pathological affective states. Psychiatrists have extensive knowledge about the



biomedical characteristics of people who suffer from unhappy states, but often have a limited understanding of the characteristics of happy people.

The transformation of happiness into a field of scientific study is a relatively recent development in the history of science and psychology. For a long time, happiness was seen primarily as a subjective state, difficult to quantify and measure objectively, which put it in contrast to the traditional scientific method, which values objectivity, measurement, and replicability (Rozeira, 2024).

Historically, science has predominantly focused on tangible and measurable aspects of human life, such as physical illnesses, biological processes, and observable behaviors. Happiness, on the other hand, was often considered a personal and subjective issue, influenced by complex cultural, social, economic, and psychological factors, making it a challenging topic to study scientifically (Rozeira, 2024).

The field of happiness has been called "subjective well-being" for a long time, it seemed to have a fear of expounding the term "happiness", but today it has experienced a remarkable recent growth in psychology, encompassing a wide range of studies that explore various terminologies such as happiness, satisfaction, state of mind and positive affect. Broadly speaking, this domain focuses on how people evaluate their lives. More precisely, it investigates how and why people experience objective and positive aspects of their lives, as well as considering the subjective assessment of quality of life (Giacomoni, 2004).

Western scholars have long explored the concept of "Happiness" (Diener, 1994), regarding it as the supreme good and the primary motivation for human actions. However, until recently, psychologists have paid little attention to the study of subjective well-being, focusing more on investigating unhappiness and human suffering. Nowadays, this construct is widely used in areas such as quality of life, mental health, and social gerontology. After 1970, behavioral and social scientists began to explore and develop theories on the topic. The term "happiness" was included in the Psychological Abstracts in 1973 and in the Social Indicators Research, founded in 1974, publishing a significant number of articles on the subject (Diener, 1984).

Diener (1984) categorizes the meanings of subjective well-being and happiness into three distinct groups. The first approach conceptualizes well-being in terms of external criteria, such as virtue or holiness. In such normative definitions, which describe what constitutes desirable, happiness is not understood as a subjective state, but as the possession of any desirable quality. Another strand in the definition of well-being arises from research conducted by social scientists, who are dedicated to understanding the factors that lead people to evaluate their lives in a positive way. In this context, the concept of life satisfaction emerges, which is based on the individual's own criteria and standards to determine what constitutes a happy life. This approach values each person's unique perspective on



their own well-being and happiness. In addition, a third category of definition of well-being considers it as a state in which positive emotions predominate over negative ones, emphasizing the importance of the emotional experience of satisfaction and pleasure. This approach assesses the balance between positive and negative emotions over a specific period of time, providing insights into the subjective experience of well-being (Bradburn, 1969).

Over the past three decades, research on subjective well-being has experienced significant momentum, driven by two distinct perspectives of positive functioning. The first, derived from the work of Bradburn (1969), distinguishes between positive and negative affect, considering happiness as a balance between the two. On the other hand, a second conception, increasingly prominent among sociologists, emphasizes life satisfaction as the main indicator of well-being. Life satisfaction is seen as the cognitive aspect that complements the affective dimension of happiness (Ryff and Keyes, 1995).

Subjective well-being, or happiness, is an attitude that has at least two fundamental components: affect and cognition (Ostrom, 1969). The cognitive component refers to the rational and intellectual aspects, while the affective component refers to the emotional aspects. In addition to this distinction, the affective component can be subdivided into positive and negative affect. Andrews and Withey (1976) structured the elements of subjective well-being as the judgment of life satisfaction and positive and negative affect. The definition of well-being is complex, as it can be influenced by variables such as age, gender, socioeconomic status, and culture. It is suggested, in general terms, that a person with a high level of well-being has life satisfaction, frequent experience of positive affect, and relative absence of negative affect. The relative predominance of positive affect over negative affect is called the hedonic balance (Diener, 1996).

According to Diener (1984) there are three fundamental aspects of subjective well-being: firstly, its subjective nature - well-being resides in each person's individual experience; secondly, the understanding that it is not limited to the mere absence of negative factors, but also to the presence of positive aspects; and, finally, that well-being is a global measure that encompasses several aspects of life, rather than being limited to just one.

Since Bradburn's 1960 study, which revealed the relative independence between positive and negative affect, the relationship between these two components has been the subject of controversy. However, there is now ample evidence demonstrating that the proportional levels of negative and positive affect are independent, even when different measurement instruments are employed (Diener, 1984; Giacomoni, 2004).

Ryff and Keyes (1995) proposed a multidimensional model of well-being, composed of six distinct components of positive psychological functioning: positive evaluation of oneself and the previous period of life (self-acceptance), a sense of continuous personal growth and development



(personal growth), the conviction that life has purpose and meaning (meaning of life), satisfying relationships with others (positive relationships with others), ability to cope effectively with the challenges of life and the environment (mastery of the environment) and a sense of self-determination (autonomy).

However, after the 2,000s, there was a growing interest in the scientific understanding of human happiness and well-being. Advances in positive psychology, a subfield of psychology that focuses on the study of the strengths, virtues, and factors that contribute to human flourishing, have played an important role in this process. Researchers such as Martin Seligman and Mihaly Csikszentmihalyi have been exploring concepts such as gratitude, resilience, flow, and engagement, providing a theoretical and empirical basis for the scientific study of happiness.

Additionally, the development of more sophisticated research methods and advanced statistical tools has allowed scientists to address complex questions related to happiness with greater rigor and precision. Longitudinal studies, controlled experiments, and interdisciplinary research have contributed to a deeper understanding of the determinants of happiness, including genetic, environmental, psychological, and social factors (Rozeira, 2024).

As scientific evidence on the importance of happiness for health, well-being, and quality of life has accumulated, academic and public interest in the topic has increased significantly. Consequently, happiness has gained recognition as a legitimate and vital field of scientific study, leading to the formation of dedicated research institutions, academic programs, and specialized publications (Rozeira, 2024).

Martin Seligman is a prominent figure in the field of Positive Psychology, an approach that focuses on the study of human strengths, virtues, and abilities that contribute to well-being and happiness. In contrast to traditional approaches to psychology, which often focus on problems and pathologies, Seligman advocates a more holistic and positive view of the human being (Seligman; Csikszentmihalyi, 2000).

For Seligman, psychology should not only be limited to the study of weaknesses and harms, but should also explore human qualities and virtues. Treating someone is not only about correcting what is wrong, but also about cultivating and strengthening the best in each individual. He argues that by focusing only on reducing our negative aspects, we can achieve average, but we will never achieve excellence or become truly extraordinary people. Instead, Seligman proposes that we should direct our efforts toward developing and nurturing our unique strengths and virtues, striving for a full and meaningful life (Seligman; Csikszentmihalyi, 2000).

As for the concept of happiness, Seligman defines it as the "experience of joy, contentment, or well-being, combined with a sense that life is good, meaningful, and valuable." This definition reflects a broad and integrated perspective of happiness, which goes beyond mere momentary



pleasure, encompassing a deeper sense of purpose, meaning, and satisfaction in life (Seligman; 2011).

Seligman (2004) presented the 5 pillars that support his theory of happiness and serve to measure and support a "flourishing life", that is, full of well-being. The set was called the PERMA Model. Check it out below:

1. **Positive Emotions:** This component highlights the importance of experiencing positive emotions such as joy, gratitude, hope, and love. For example, happy moments with dear friends, such as sharing laughter in a relaxed gathering, can heighten our positive emotions and promote a healthy state of mind.
2. **Engagement:** This refers to engaging in activities that provide us with a state of flow, where we are completely immersed and absorbed in what we are doing. For example, when we engage in a hobby we love, such as painting or playing a sport, we lose track of time and feel deeply satisfied with the activity.
3. **Relationships:** Social and emotional bonds play a crucial role in promoting happiness and well-being. For example, cultivating meaningful relationships, such as spending time with family or having deep conversations with friends, provides us with a sense of belonging, connection, and emotional support.
4. **Meaning:** This component involves finding a purpose or meaning in life. For example, dedicating yourself to altruistic causes, such as volunteering at a charity or working to protect the environment, can provide a deep sense of accomplishment and personal meaning.
5. **Accomplishment:** This refers to the sense of achievement and progress toward personal and professional goals. For example, achieving a challenging goal, such as completing a marathon or receiving a promotion at work, can boost our self-esteem and provide us with a sense of accomplishment and satisfaction.

Mihaly Csikszentmihalyi's theory, known as the Flow theory, explores the mental states of deep involvement and total immersion in an activity. According to Csikszentmihalyi, the flow state occurs when a person is fully absorbed in a challenging task that requires specific skills. During this state, the person loses track of time and space, experiencing a feeling of complete concentration and satisfaction (Seligman; Csikszentmihalyi, 2000).

Csikszentmihalyi identifies several characteristics of the flow state, including a clear goal of the activity, immediate feedback, a balance between challenge and skill, a sense of control over the situation, and a loss of self-awareness. He argues that flow is a key source of motivation and fulfillment, and that finding activities that provide this state is essential for well-being and happiness (Seligman; Csikszentmihalyi, 2000).



Happiness is not euphoria. It's not smiling and hugging the trees all the time. It's not something superficial. "Happiness is an experience of joy, contentment, or positive well-being combined with a sense that life is good, meaningful, and valuable," says Sonja Lyubomirsky, PhD, a Stanford researcher (Lyubomirsky, 2011).

Sonja Lyubomirsky, is one of the leading figures present in the field of happiness science. It has played a role in popularizing and advancing the scientific study of happiness, contributing significantly to academic and public understanding of the determinants and benefits of happiness (Rozeira, 2024).

Lyubomirsky is the author of several influential books on the topic, including "The How of Happiness," in which she presents practical strategies based on scientific research for increasing happiness and well-being in everyday life. She advocates for an evidence-based approach to cultivating happiness, combining insights from positive psychology, cognitive science, and neuroscience (Rozeira, 2024).

Her work addresses important issues such as the influence of genes and environment on happiness, the effectiveness of different practices and interventions to improve well-being, and the relationship between happiness and personal and professional success. Lyubomirsky also explores the concept of the "happiness set point," suggesting that while there is a genetic predisposition to happiness, it is possible to increase and sustain higher levels of well-being through intentional behaviors and attitudes (Rozeira, 2024).

Sonja Lyubomirsky's theory of the composition of happiness, derived from sound and serious research, often referred to as the "happiness formula," suggests that our happiness is influenced by three main components: genetic factors, life circumstances, and intentional activities or behaviors (Lyubomirsky, 2011). According to this theory:

1. **Genetic Factors** (approximately 50%): About 50% of our ability to be happy is determined by genetic factors. This means that some people may have a genetic predisposition to being happier than others. However, it is important to note that genetics is not a fixed, immutable destiny; It establishes a starting point, but it does not determine our final destination in terms of happiness.
2. **Life Circumstances** (approximately 10%): Approximately 10% of our happiness is influenced by the external circumstances of our life, such as income, social status, work, and significant events. While these factors may have a temporary impact on our well-being, they tend to have a limited and short-lived effect on our long-term happiness.
3. **Intentional Activities or Behaviors** (approximately 40%): About 40% of our happiness is determined by intentional activities or behaviors that we can control, such as practicing gratitude, fostering positive social relationships, engaging in meaningful





activities, and developing effective coping skills. These are areas where we can make a significant impact on our well-being through conscious choices and deliberate actions.

Lyubomirsky argues that while we can't change our genetics or completely control our life circumstances, we do have the power to influence a significant portion of our happiness through our choices and behaviors. By adopting practices and habits that promote well-being and cultivating a positive mindset, we can increase and sustain higher levels of happiness and life satisfaction (Fredrickson, 2009).

Sonja Lyubomirsky explains the seriousness of her research into the happiness formula by taking a rigorous scientific approach to her studies. She conducts her research based on established scientific methods such as controlled experiments, robust statistical analyses, and peer review in respected academic publications. In addition, Lyubomirsky has published several articles in prestigious scientific journals, presenting empirical evidence to support his theories and conclusions about happiness. Her research is internationally recognized and contributes significantly to the academic and practical understanding of happiness, which solidifies her position as a serious and respected scientist in the field of positive psychology (Rozeira, 2024).

Another intriguing study conducted by psychologist Barbara Fredrickson, PhD, of the University of North Carolina at Chapel Hill, has revealed a new finding: people who experience continued success maintain a 3-to-1 ratio between positive and negative thoughts. In other words, for every negative thought, they cultivate three positive thoughts to balance. These findings were presented in the book entitled "Positivity, The 3 to 1 Ratio That Will Change Your Life", not yet available for the Portuguese (Fredrickson, 2009).

Thus, according to current science, the path to happiness or subjective well-being would be to: experience more positive emotions than negative ones (in a ratio of 3:1); be engaged, carry out challenging activities according to individual skills; maintain quality relationships with significant others; to create and make life meaningful, so that it is worth living; have goals in life, whether small or large, and make efforts to achieve their fulfillment (Rozeira, 2024).

Importantly, positive psychology began to fit into cognitive behavioral therapy (CBT) in the mid-1990s, when researchers and therapists began to explore more deeply the elements related to well-being and happiness within the context of CBT. Since then, CBT has increasingly integrated positive psychology concepts and techniques to promote not only the reduction of symptoms, but also the cultivation of positive emotions, the pursuit of personal satisfaction, and the development of a meaningful life. This movement is called the 3rd wave of Cognitive Psychology (Rozeira, 2024).



## REFLECTIONS ON PSYCHIATRY AND MENTAL HEALTH

Psychiatry has been successful in decreasing people's malaise, but not always in increasing their well-being, for a variety of reasons. First, throughout its history, psychiatry has focused predominantly on the treatment of mental illness, leaving the understanding and development of mental health as a whole in the background. This limited approach may result in a lack of emphasis on increasing people's well-being, since attention is primarily focused on remediation of negative symptoms.

In addition, the categorical nature of the classifications used in psychiatry also contributes to this gap. By dividing people into categories of healthy and sick, these classifications can increase separation and contrast between the two groups, rather than promoting interventions that cultivate everyone's mental health. This emphasis on distinguishing between health and disease can disregard the complexity and individuality of each person, making it difficult to promote well-being comprehensively.

Traditional methods of diagnosis and treatment in psychiatry also have their limitations. The lengthy training required for practitioners and the costs associated with treatments can restrict the availability of these interventions to a small number of individuals, leaving many without access to the care needed to promote their mental well-being.

Furthermore, both psychology and psychiatry have historically emphasized the study of pathology and weakness to the detriment of the investigation of human strengths and virtues. This approach can result in a lack of focus on developing and promoting people's positive qualities, which are essential for increased well-being.

To promote mental well-being more effectively, there is a need to take a more holistic approach, one that recognizes the interconnectedness between the biological, psychological, social, and spiritual aspects of mental health. This includes not only the treatment of mental illness but also the promotion of factors that contribute to a meaningful and satisfying life, considering each person's individuality and cultivating their positive qualities.

The absence of mental disorders does not guarantee individual flourishing, nor a perception of fulfillment and happiness in life. Happiness is a condition that goes beyond the mere absence of unhappiness, distinguishing itself qualitatively.

Many publications choose to use the term "subjective well-being" instead of "happiness" due to the difficulty in directly addressing the concept. This preference reflects the search to measure the well-being reported by people who consider themselves happy.



## HUMANIZATION OF HEALTH CARE PRACTICES

During the nineteenth and twentieth centuries, we witnessed a series of technological advances applied to healthcare at all levels of care, ranging from prevention to rehabilitation of comorbidities. Parallel to technological development, the biomedical conception often interprets disease as a deviation from biological norms, reducing complex phenomena to simple principles of cause and effect. This model, which separates mind and body, treats the body as a machine and minimizes social, psychological, and behavioral aspects (Goulart; Chiari, 2010).

It is important to recognize the contributions of technological advances, but it is also essential to consider the human, experiential, psychological, and cultural dimensions of the disease, as well as the nuances in verbal and non-verbal communication in interactions between health professionals and users (Goulart; Chiari, 2010).

In Brazil, since the 1970s, there have been debates about the role of health and patients' rights, with emphasis on the 1988 Constitution, which recognizes health as a universal right and establishes the autonomy of individuals in their health care. Beginning in the 1990s, several countries, including members of the WHO, signed declarations on patients' rights, emphasizing respect, equity, and the free exercise of individual choice (Goulart; Chiari, 2010).

According to Rozeira (2024), the fight for patients' rights reflects social and political transformations, contributing to the construction of democracy and citizenship in Brazil. In addition, there is a growing recognition of the need to invest in health professionals to ensure more humane care, considering adverse working conditions.

The humanization of health care is a relevant issue nowadays, especially in the Brazilian context, where principles such as comprehensiveness, equity and social participation require a review of daily practices, valuing both the dignity of the worker and that of the user of the health system (Goulart; Chiari, 2010; Rozeira, 2024).

Although there have been advances in the discussion and restructuring of health services, there is a scarcity of studies that address the theoretical and philosophical bases for these changes. The concepts of comprehensiveness and humanization must be discussed and contextualized to ensure their effective application (Goulart; Chiari, 2010; Rozeira, 2024).

Humanization, when conceived as a health policy, cannot be treated only as an abstract principle. Its effectiveness depends on the implementation of concrete and specific practices, but it is important to avoid compartmentalization and isolation of these actions. For example, separating the humanization of childbirth from the humanization of emergencies can limit their scope and impact (Goulart; Chiari, 2010).

In addition, it is essential to consider the conditions of health workers, who often face mechanized work processes and deal with situations of pain, suffering, and death on a daily basis.



The training of these professionals from graduation is also crucial to ensure a humanized approach to health care (Stewart, 2017).

The National Humanization Policy, launched in 2004, highlights the importance of a problem-solving and welcoming service, combating depersonalization and guaranteeing the rights of users. Humanization should not only be a moral predication, but an operative concern with the right to health, involving the reorganization of health services and practices (Rozeira, 2024).

Humanization as a State policy needs to be implemented in a transversal way, going beyond the boundaries of the different fields of knowledge involved in the production of health. This requires planning, strategic decisions, and the implementation of collective actions, always guided by the right to health (Rozeira, 2024).

To ensure comprehensive and humanized health care, it is necessary to involve all levels of management, implementation of actions and the participation of society. Everyone must be committed to this proposal, whether in the provision of health services, in working in the health sector, or in the use of health services (Rozeira, 2024).

Humanization is not only a moral predication, but a practice that requires a critical and reflective approach, involving the training of health professionals and managers. This implies questioning the foundations of the prevailing biomedical model and seeking a new practice that recognizes the experience of patients' suffering (Goulart; Chiari, 2010).

These reflections extend to several health professionals, whose education is often still based on biomedical premises. To promote humanized care, it is necessary to recognize the person and the subject, respecting their cultural diversity and guaranteeing their autonomy (Stewart, 2017; Rozeira, 2024).

The humanization of health is not limited only to clinical care, but also involves a change in the structures and labor relations in health services. This requires the active participation of all those involved, from managers to service users, and the consideration of their opinions and suggestions during the decision-making process (Goulart; Chiari, 2010).

In addition, humanization demands an integration between care practices and care management, recognizing that these processes are interdependent and inseparable. This implies changes in the organization of health services, in the dynamics of the teams, and in the planning and evaluation mechanisms (Goulart; Chiari, 2010).

Humanization in professional practice in the health sector has undergone significant transformations, especially in the relationship between health professionals and users. Previously, the excessive valuation of science often placed professionals in a position of superiority, distant from patients. However, sensitivity and affectivity are becoming essential elements in care (Goulart; Chiari, 2010).



The analysis of interactions between health professionals and users reveals the importance of non-verbal cues in communication, especially in the demonstration of feelings such as interest, attention, tranquility, surprise, tension, tiredness, restlessness, indifference, anxiety and irritation. These signals can significantly influence the quality of the interaction and the user's perception of the care received (Stewart, 2017; Rozeira, 2024).

Nurses, for example, should be attentive to their non-verbal communication, as it can facilitate or hinder interaction with users. The expression of feelings such as interest and tranquility can create an environment conducive to dialogue and acceptance, while the demonstration of irritation or indifference can damage the relationship of trust and negatively affect the user experience (Goulart; Chiari, 2010).

In addition, it is important for professionals to be aware of the contradictions between their verbal and non-verbal communication, thus avoiding distorted interpretations by users. However, many professionals are not sufficiently attentive to these aspects of communication, which can compromise the humanization of care (Stewart, 2017; Rozeira, 2024).

Humanization in the context of health goes beyond communication and involves improving the working conditions of professionals, building bonds between teams and users, and valuing values related to the defense of life and health promotion. It is a process that requires changes in the concrete practices of health services and in the way professionals relate to users (Goulart; Chiari, 2010).

However, it is important to avoid excessive idealizations about the relationship between health professionals and users, recognizing that this relationship is complex and multifaceted. Humanization does not necessarily mean that professionals should be friends or like their patients, but rather that they should offer quality care, respecting the needs and rights of users (Stewart, 2017).

Therefore, humanization in health requires a joint effort of professionals, managers, and users to promote more welcoming, respectful, and effective care. This involves not only changes in care practices, but also a broader reflection on the values and conceptions that guide health care (Goulart; Chiari, 2010).

The lack of consideration of the communicative dimensions in the doctor-patient relationship can lead to misunderstandings and difficulties in transmitting adequate information, affecting treatment adherence. Therefore, humanization requires an approach that values dialogue, attentive listening, and mutual respect between professional and patient (Stewart, 2017).

It is important to emphasize that humanization is not limited to an act of charity on the part of professionals, but rather to an encounter between subjects who share knowledge, powers, and experiences. This encounter is essential to establish healthy bonds and build a relationship of trust and respect (Goulart; Chiari, 2010).



The personal experience of professionals as patients has been valued as a source of knowledge that complements scientific knowledge. This experience allows for a broader understanding of patients' needs and expectations, contributing to a more humanized practice (Goulart; Chiari, 2010; Stewart, 2017).

Communication between professionals and patients is one of the most important aspects in the care relationship. Patients value physicians who treat them with attention, respect, and empathy, and who are able to communicate effectively. This humanized communication is essential to ensure a constructive and trusting relationship between professional and patient (Goulart; Chiari, 2010; Stewart, 2017).

Sensitivity and attentive listening on the part of professionals are essential to understand the needs of patients and offer quality care. The humanization of professional practice in the health sector requires an approach that considers not only the technical aspects, but also the emotional and relational dimensions involved in patient care (Goulart; Chiari, 2010).

The quality of care is closely linked to the time dedicated to the consultation and the communication established between professional and patient. Patients value attention and personal involvement during treatment, demonstrating expectations regarding the establishment of effective communication. On the other hand, lack of communication can generate frustration and affect the patient's perception of the quality of care (Stewart, 2017).

In addition, humanization in health also involves rethinking the process of training professionals, which is often centered on technical learning and emphasis on biomedical aspects, to the detriment of humanistic and relational aspects. It is necessary to promote training that values not only scientific knowledge, but also sensitivity, empathy and the ability to establish therapeutic bonds with patients (Stewart, 2017; Rozeira, 2024).

By recognizing that patients' emotional well-being is as relevant as their physical health, we make room for a more comprehensive and effective approach to health care (Rozeira, 2024).

After reading this study, we will conclude that humanization in medical care is not limited to clinical procedures and drug prescriptions; It also encompasses the ability to establish meaningful and empathetic connections with patients. In this context, the science of happiness plays a key role, as it seeks to understand the factors that contribute to a full and satisfying life.

By applying the principles of the science of happiness in clinical practice, we are prioritizing not only the cure of disease, but also the promotion of the integral well-being of patients. This implies considering their emotional, social, and psychological needs, in addition to purely medical issues (Rozeira, 2024).

Through humanization and the science of happiness, healthcare professionals can offer more complete and compassionate care that takes into account not only the body but also the mind and





spirit of patients. This not only contributes to the success of the treatment, but also to the construction of a relationship of trust and collaboration between professional and patient (Rozeira, 2024).

## FINAL THOUGHTS

Happiness is a rich and plural experience that reveals itself in many ways in our human journey. Over time, we've learned that happiness isn't just a single or definitive state, but rather a complex tapestry of moments, emotions, and interactions that bring us joy, satisfaction, and meaning. This diversity and complexity of happiness is reflected in our everyday language, such as when we wish "lots of happiness" in celebrations, recognizing that there are myriad ways and nuances to experience well-being and contentment in life.

An inspiring example of this plurality of happiness can be found in genuine interactions with children. Your innate ability to live in the present moment, express emotions unfiltered, and find joy in the little things in life serves as a powerful reminder of the purity and simplicity of happiness. In special moments of connection and sharing with children, we experience an exchange of mutual happiness that connects us to a deeper, more authentic dimension of our humanity.

Carlos Drummond de Andrade, in his poetic wisdom, masterfully captured the essence of these ephemeral moments of happiness. His words resonate with us, reminding us of the importance of finding happiness in the little things and the absence of apparent motive. It invites us to cherish and celebrate the moments of joy and contentment we encounter on our daily journey, acknowledging the beauty and fragility of these precious moments (Roitman, 2022).

Csikszentmihalyi (1990) notes that despite advances in health, technology, and scientific knowledge, little is known about happiness compared to the ancient Greeks. He criticizes contemporary values that associate happiness with wealth, consumption, and physical appearance, stating that such values are ineffective in the pursuit of happiness.

Most aspects related to happiness are psychological in nature, such as personality, optimism, resilience, and positive emotions. Sociocultural issues, such as religiosity, can influence happiness in part through these emotional aspects.

The rise of happiness to the status of a science, particularly through Positive Psychology, represents a significant evolution in the understanding and appreciation of human well-being in all its complexity and plurality. This innovative approach emphasizes the importance of cultivating human virtues, strengths, and aspirations as essential components in the pursuit of a full, meaningful, and happy life.

By embracing the plurality and complexity of happiness in all its forms and nuances, we can enrich our lives and promote more complete and sustainable well-being. This ongoing journey of discovery, appreciation, and celebration of the precious moments that life offers us invites us to



cultivate a deeper and more meaningful relationship with happiness, guiding us in our search for a life filled with joy, meaning, and connection.

The rise of happiness to the status of a science, particularly in the field of Positive Psychology, marks a significant evolution in the understanding of human well-being. This approach promotes the development of human virtues and strengths as essential components in the pursuit of a full and meaningful life. Additionally, integrating the science of happiness as a healthcare strategy offers a more holistic approach to medical care, strengthening the relationship between healthcare providers and patients and contributing to a more empathetic and effective care environment.

The science-centered approach to happiness offers an innovative and comprehensive perspective for health promotion and the humanization of health care. By focusing not only on treating disease but also on promoting human flourishing and quality of life, this approach recognizes the importance of considering patients' emotional, social, and psychological well-being.

Understanding the potential benefits of this approach is critical to transforming the way we deliver healthcare. Firstly, by integrating principles of positive psychology into clinical practices, healthcare professionals can help patients develop effective coping skills, foster emotional resilience, and strengthen the internal resources needed to cope with life's challenges.

The integration of happiness science as a health strategy provides a more holistic and humanized approach to medical care. Prioritizing emotional and mental well-being in addition to physical health, this approach strengthens the relationship between healthcare professionals and patients, contributing to a more welcoming, empathetic, and effective care environment. By adopting this perspective, healthcare becomes more compassionate and patient-centered. This implies that professionals not only treat physical symptoms, but also consider the emotional, social, and environmental context in which patients are embedded.

This approach can also contribute significantly to the humanization of health care, strengthening the relationship between health professionals and patients. By acknowledging and valuing each patient's individual experience, healthcare providers can create a more welcoming, empathetic, and supportive environment where patients feel heard, understood, and respected.

By promoting human flourishing and quality of life, healthcare becomes more proactive and preventive, seeking not only to treat existing diseases but also to prevent future health problems from arising. This involves educating patients about healthy lifestyle habits, encouraging physical activity, a balanced diet, adequate sleep, and stress management.

In conclusion, by recognizing and cultivating happiness as a fundamental aspect of the human experience, we can enrich our lives and promote more complete and sustainable well-being. This ongoing journey of discovery and appreciation of the precious moments that life offers us invites us to embrace happiness with gratitude, joy, and a deep sense of purpose.



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